

SoJust

SPRING 2017

SAINT LOUIS UNIVERSITY
COLLEGE FOR PUBLIC HEALTH
AND SOCIAL JUSTICE

STUDENTS TAKE THE LEAD

Academic and service events
showcase SLU nationally

Page 16

CIVIC SERVICE HELPS VETS AND THEIR COMMUNITIES

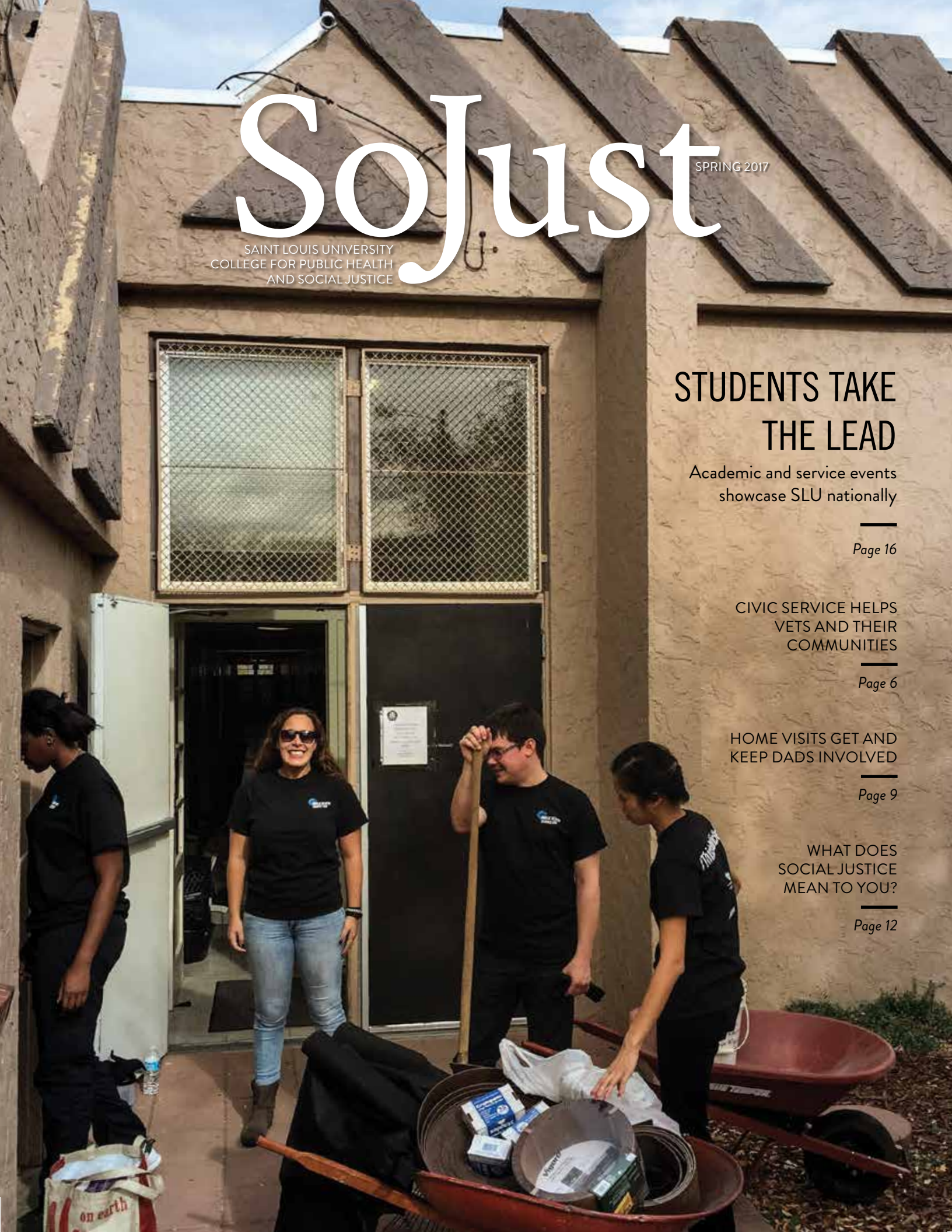
Page 6

HOME VISITS GET AND KEEP DADS INVOLVED

Page 9

WHAT DOES SOCIAL JUSTICE MEAN TO YOU?

Page 12





In this second issue of *SoJust*, we bring you stories united around a common theme of partnership. When we partner with individuals and organizations outside the walls of our institution we combine unique strengths, approaches and skill sets to make a stronger and more sustainable impact in the community.

We now face an unprecedented global challenge around migrants and refugees. Many of the striking headlines and heart-wrenching images that have brought this issue to the public's attention have been of children caught up in the unrest and exodus wrought by political and economic upheaval.

In my book, *Healing Our Differences: The Crisis of Global Health and the Politics of Identity*, I have a chapter titled "Omon," or "a child" in the Edo language of Nigeria. I open the chapter with some common Edo names including Omokaro, "a child leads the way," and Omoragbon, "a child is the world." For the Edo people, naming a child is highly symbolic and sets an intent for a family's future.

The battle for the future of our human family is ever more rooted in the battle to keep our children whole.

Children play an integral role in helping their families, who may be migrants or refugees, integrate into a new community. That's why I am so enthusiastic to announce that our college is partnering with the International Institute of St. Louis thanks to the generosity of an anonymous donor. This partnership focuses on strengthening the capacity of the Institute's staff to apply social work skills and approaches in assisting clients. Refugee families have often gone through trauma, and our goal is to provide individuals and families with more comprehensive and compassionate support. We are also working with the Institute to better understand children's experiences and the types of support they need as they adapt to new environments.

The International Institute is a nationally-recognized leader in immigrant and refugee resettlement, and has been a champion of cultural and ethnic diversity in St. Louis for nearly 100 years. The Institute's work is consistent with our own Jesuit mission of working for—and most importantly, with—vulnerable and marginalized people to achieve a more just and equitable society. I would like to thank the Institute's leadership, particularly Executive Director Anna Crosslin and Senior Vice President Suzanne LeLaurin, for their cooperative spirit and innovative thinking when building this partnership, as well as Fr. Chris Collins, SLU's assistant to the president for mission and identity, for helping to connect our institutions.

Hope erases cultural and spiritual differences. We are working to ensure that the stories about immigrants and refugees include our collective efforts to turn the incredible resilience children have into lessons and opportunities to thrive.

Partnerships like this are what keep us grounded in the community. As we watch the Class of 2017 head out into the world to work for positive change, I hope you will stay connected and share your story of partnership, whether in your community, in your education or in your work.

All my best,

Collins O. Airhihenbuwa

SoJust

VOLUME 2, ISSUE 1

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ON THE COVER

Participants in public health service day volunteer at the Denver Indian Center during the 2016 American Public Health Association annual meeting.

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Fireworks in Baroda, Gujarat, India
PHOTO BY NAMRATA PATEL, MASTER OF PUBLIC HEALTH IN GLOBAL HEALTH STUDENT AND WINNER OF THE 2017 STUDENT PHOTO CONTEST, CITYSCAPE CATEGORY.

CONTENTS

FEATURES

6 *Coming Home Again*
Civic service helps military veterans transition back to civilian life and benefits their communities.

8 *Father Figures*
When parent education programs engage fathers early, the benefits can last a lifetime.

10 *When Child Discipline Crosses the Line*
Reaching a hand of support to overwhelmed parents can be critical opportunity to reduce child maltreatment.

12 *What Does Social Justice Mean to You?*
In our last issue, faculty members responded to this question. Now our students add their voices.

3 *Short Takes*
New health management and policy chair, awards and accolades

4 *Research Report*
Mapping the risk of a Zika outbreak in the United States

5 *Trending*
Faculty in the news

16 *Student Spotlights*
National public health week at SLU, essay contest win, community-based research experience, global mental health internship, addressing Islamophobia

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Students in public health and nursing participated in Saint Louis University's Closed Point of Dispensing exercise, which simulated the large-scale distribution of life-saving medications to the campus community in the event of a pandemic or biological attack.

PHOTO: GENE CARROLL

Bridging the Gap

Through her work exploring the ways that families and health care systems together influence chronic disease management, **Rhonda BeLue, Ph.D.**, approaches health disparities from a global, cross-national perspective. BeLue's current research portfolio includes a federally-funded, school-based obesity prevention program and a Fulbright Research Award to study diabetes management in Senegal.

As the incoming chair in the Department of Health Management and Policy, we asked BeLue about her work, teaching and the future at SLU.

Q&A with Rhonda BeLue



PHOTO COURTESY PENN STATE UNIVERSITY

SoJust: What are the similarities and differences in the way you might approach chronic disease management the U.S. and the global south?

BELUE: I have to incorporate and consider the influence of local culture, health care system structure and health policies that differ across contexts. For example, in the community that I work with in Senegal, a large majority of people are uninsured and pay for health care expenses out of pocket. Extended families often share a household, which requires different strategies for self-management compared to the U.S. where nuclear family households are more the norm.

SoJust: What is your favorite thing about teaching?

BELUE: Teaching and mentoring are not only ways to prepare students for future careers; mentoring students also serves as a learning opportunity for me. I have maintained long-term professional relationships with many of my students, and I really enjoy watching and advising them as they advance through their careers to serve their local communities, and then continue on to mentor the next generation.

SoJust: What community and university partnerships are you excited about in St. Louis?

BELUE: Most of my work involves partnerships with safety-net organizations that deliver health and wellness programs to under-served communities, such as federally-qualified health centers. SLU has long-standing ties with community-based organizations that work with underserved families. The College's focus on social justice and cutting-edge health services research will support collaboration and innovation in strategies to eliminate health disparities among diverse communities globally.

Of note

Professor of Social Work **Michael Vaughn** was named as a 2017 Fellow of the American Academy of Social Work and Social Welfare.

Associate Professor of Epidemiology **Pamela Xaverius** received the Maternal and Child and Family Health Coalition's 2017 Dr. Terry Leet Researcher Award.

Professor of Environmental and Occupational Health **Terri Rebmann** was named as a Fellow of the Association for Professionals in Infection Control and Epidemiology.

Professor of Biostatistics **Steven Rigdon** was selected as a Fellow of the American Statistical Association.

Assistant Professor of Epidemiology **Lauren Arnold** received the 2017 Riegelman Award for Excellence in Undergraduate Public Health Education from the Association of Schools and Programs in Public Health.

Professor of Epidemiology **Mario Schootman** was appointed as a Fellow of the American College of Epidemiology.

Associate Professor of Social Work **Jin Huang** and Assistant Professor of Social Work **Brandy Maynard** were inducted into the 2017 class of Fellows of the Society for Social Work and Research.

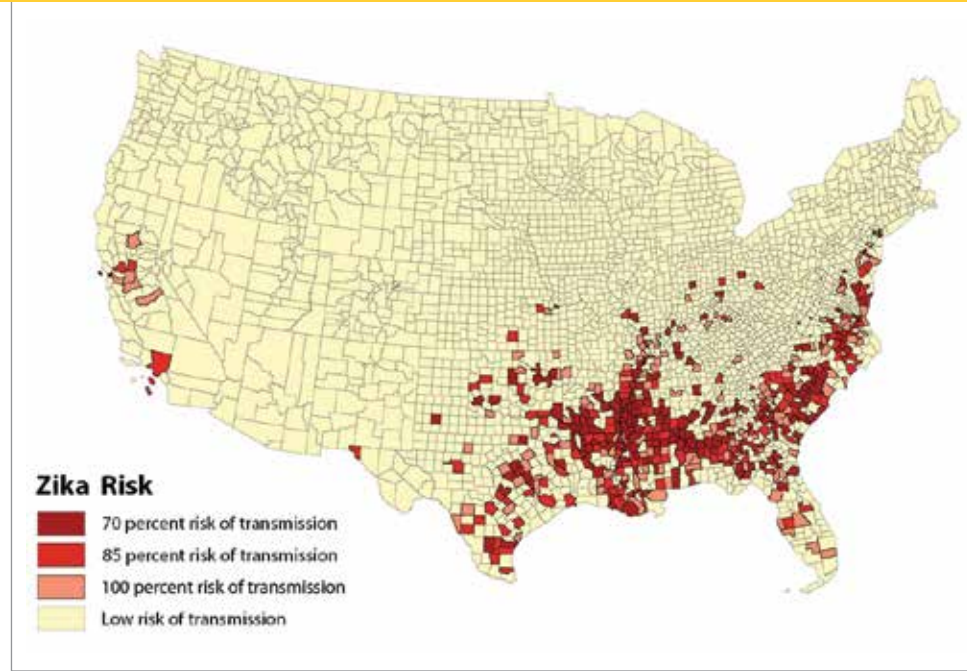
Saint Louis University will begin the celebration of its 200-year anniversary with a Mass under St. Louis' Gateway Arch on Saturday, Sept. 23.

Visit slu.edu/bicentennial to learn more and explore 200 years of SLU history.



HOT SPOTS

A new paper in the American Journal of Public Health puts the bull's-eye for Zika transmission on the Mississippi delta.



Enbal Shacham, Ph.D., associate professor of behavioral science and health education, and her collaborators studied 3,108 counties in the U.S., and determined 507 “high risk” areas for Zika transmission based on several factors: the presence of *Aedes aegypti* mosquitoes; high rates of sexually transmitted infections, which is an established surrogate marker for unprotected sex; number of women of child-bearing age; and an estimate of birth rates for each county.

“The sexually transmitted route is also concerning because sexually transmitted infections tend to cluster geographically and occur disproportionately in areas with higher concentrated disadvantage,” says Shacham.

Assuming that Zika is transmitted in 70 percent of the cases of STIs, the researchers estimate between 300,000 to 41.7 million people from high-risk counties could be more likely to contract Zika than individuals who live in other counties in the U.S. Of those at potential higher risk, between 3,700 and

632,000 may be pregnant women, the highest at-risk group.

It is unclear if sexual transmission of Zika occurs 100 percent of the time, therefore, the



“Our results also show that complications from the Zika virus are likely to overlap with impoverished counties with large minority populations where resources are more likely to be scarce to combat a large-scale Zika virus outbreak.”

ENBAL SHACHAM

researchers projected three different models of transmission risk: 70, 85, and 100 percent risk based on the data-driven model.

“We need significant planning and prevention in areas and populations most likely to experience the highest burdens from Zika infection,” Shacham says. “Timely strategies to communicate risk, control mosquito populations, and prevent disease transmission are imperative to preventing a large-scale Zika epidemic in the United States.”

About 80 percent of those who contract Zika have no symptoms, which means they may engage in sexual activity without any indication they are at risk of transmitting the virus, she added.

“The purpose of this study was not to create unwarranted alarm, but rather to enhance Zika prevention methods such as mosquito control, effective prevention message dissemination, and treatment and care preparation, in advance of a Zika epidemic in the contiguous U.S.”

TRENDING FACULTY IN THE NEWS AND AROUND THE WEB



“The **benefits** of food insecurity screening very likely **outweigh the costs.**”

Ellen Barnidge (behavioral science and health education) as part of her challenge to health care systems and community food assistance providers to better connect families with community-based food resources.

READ THE FULL JAMA VIEWPOINT: BIT.LY/INSECUREFOOD



“Falling in love presents very much like an addictive process. You have this drive to **get that fix** in the form of being around the person that you care about.”

Brian Boutwell (criminology) on the literal meaning of a broken heart, and why a breakup is similar to cocaine withdrawal to the brain.

READ THE ESSAY AT VOX.COM: BIT.LY/SOJUSTBREAKUP



“The projection for that would have been about **\$200 million.**”

Kimberly Enard (health management and policy) on the projected reduction in uncompensated care costs for Missouri hospitals in 2016 if the state had expanded Medicaid eligibility to individuals with incomes up to 138% of the federal poverty level under the Affordable Care Act.

READ THE ARTICLE AT ST. LOUIS PUBLIC RADIO: BIT.LY/SOJUSTACA



“The public’s view of adolescent drug use in general is, kids are exposed to all kinds of drugs and are using them more and more. **But that’s not really true.**”

Michael Vaughn (social work) on his findings that an increasing percentage of teens believe it would be impossible for them to get heroin.

READ THE POST ON LIVESCIENCE.COM: BIT.LY/SOJUSTHEROIN

“The professional development we do is really around understanding how race matters... and impacts things like the kinds of stress kids experience.”

WATCH THE VIDEO: BIT.LY/NORMWHITE

Norman White (criminology) was honored at the St. Louis American newspaper’s 2017 Salute to Excellence in Health Care. His Shut It Down program trains teachers and principals at seven elementary St. Louis public schools on how race impacts the kind of trauma that their students experience.

“This mix of contaminants has gravely affected the health of the people of La Oroya and surrounding areas.”

Fernando Serrano (public health) on the Peruvian government’s rollback of air quality standards, linked to the sale of a smelting plant with a history of pollution.

READ THE ARTICLE AT THE GUARDIAN: BIT.LY/SOJUSTPERU

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COMING HOME AGAIN



Social Work Researcher Finds that Volunteering Eases Veterans' Transition to Civilian Life

Monica Matthieu knows firsthand how to support military veterans who have returned home from their tours of duty. For more than a decade, she has served as a clinical social worker and trauma therapist at the Department of Veterans Affairs, providing counseling to veterans as they readjust to civilian life.

“When veterans complete their military service, they go through a transition like all of us, when we change jobs, move to a new town or retire. It is a transition that takes focus, deep reflection and new information to discover the next challenge they will pursue along their journey in life,” says Matthieu, an assistant professor of social work at SLU.

Since 2013, she’s held a joint appointment between SLU and the VA Healthcare System as a research social worker. Her expertise in evidence-based programs to reduce the risk of suicide among veterans took her to the White House in 2016 to sit on an expert panel about suicide prevention.

Called to duty

It was no surprise, then, when The Mission Continues—a national nonprofit that deploys veterans on six-month volunteer service missions with community agencies—turned to Matthieu to conduct a large-scale evaluation of its programs. The organization was founded in St. Louis in 2007 by former Navy SEAL Eric Greitens, who stepped down as CEO in 2014 and now is Missouri’s governor.

The research is the first peer-reviewed and published national study of civic service among U.S. military veterans. It examined how volunteering affected the health and social life of U.S. veter-

ans who served in Iraq and/or Afghanistan, then participated in a formal civic service program. Civic service has accountability requirements, clearly defined goals and a stipend, making it more like a job than less structured forms of volunteering, such as helping out with child care or setting up for a church function.

Matthieu and her team studied 346 veterans who completed the program in 2011-2014, volunteering 20 hours a week on specific projects for six months. Before deployment on civic service missions, more than 50 percent said they had symptoms of post-traumatic stress disorder and nearly a fifth reported symptoms of depression. Nearly half had reported receiving treatment for a mental health condition.

At the end of their civic service, more volunteers reported they had good or excellent health than before they volunteered. Their emotional health improved; more reported it was easier to perform everyday activities than before volunteering. Their PTSD symptoms significantly decreased, and the number of veterans who had probable PTSD

dropped from 50 percent before their civic service to 43 percent after.

Similarly, the number of veterans who had symptoms of depression also decreased – from 23.5 percent to 15 percent. They also said they felt less isolated and lonely, and realized help is available.

While all the veterans in the civic service program experienced improvements in health, mental health and social functioning, those who entered the program with existing mental health conditions like depression and PTSD showed the most significant improvements, (even after the researchers controlled for treatments they were already receiving.)



Veterans work on construction projects as they transition to civilian life. Through The Mission Continues, veterans transition to civilian life by volunteering on community service missions.

PHOTO COURTESY THE MISSION CONTINUES

“When we get up and move and that movement is geared toward a purpose of helping others, it is like stepping outside our own lives to focus on the needs of others, and so many positive things come together.”

—MONICA MATTHIEU

Focused on others

Matthieu says the actual mechanism of why volunteering improves mental health remains a question.

“One of our theories has to do with behavioral activation and the purpose surrounding the activity. So in other words, when we get up and move and that movement is geared toward a purpose of helping others, it is like stepping outside our own lives to focus on the needs of others, and so many positive things come together,” says Matthieu, who teaches courses in veteran’s services.

Veterans are eager to find opportunities to serve at home as they rejoin civilian life, she says. Matthieu speculates that for vet-

erans, volunteering allowed them to find meaning and purpose again in life, which prepared them for the transition back to the civilian world.

“This study tells us that formal volunteering in a civic service program that engages the veterans in community service in their hometown is one option to aid in that transition. Some may call this a gap year; I call it a fulfillment year.”

“This area of science around health promotion programs that make a difference in veterans’ lives is really just starting,” Matthieu says, adding that more research will follow. ♣

Matthieu (seated, left) facilitates a student discussion in her Veterans Services course.

PHOTO: GENE CARROLL



FATHER figures



PHOTO: Nanette Hegamin

Home visits, or visits from trained individuals (often called “parent educators” or “family support workers” depending on the model of home visiting) to homes with young children, are rapidly expanding. These programs, such as Parents as Teachers and Healthy Families America, are funded in part through federal investments from the Maternal, Infant, and Early Childhood Home Visiting Program to help parents learn nurturing, healthy relationships with their children.

“What [a home visit] looks like is a parent laying on the carpet with their child, observing what she’s looking at... what she’s sensing. Basically, home visitors help parents see how awesome their baby is,” says Stephen McMillin, an assistant professor of social work at SLU.

Programs that find creative ways to do outreach to fathers and involve them in home visits can help keep fathers involved in their children’s lives even if they do not remain married or partnered to the child’s mother.

Fathers who are engaged during pregnancy are more likely to still be involved with their children later than fathers who were not involved during pregnancy. But it can be hard for home visiting programs to enroll participants while participants are still pregnant. Home visiting is voluntary and, while some participants refer themselves, other participants may not be referred or enrolled in home visiting until after they give birth.

Early involvement is key to getting—and keeping—fathers in the picture.

Interested in the role fathers play in the home visits, McMillin interviewed 34 program administrators, collected and analyzed their responses. He found, among other results, that while most of the home visitors in these programs were female, program supervisors believed that enhancements to target fathers could be useful. At the same time, program participants were intrigued and eager to receive training on improving father engagement. Funding for father enhancement programs was a concern; especially funding that came with “too many strings attached,” such as requiring fathers to have health insurance or limiting funding only to fathers that lived with the mothers. As a possible solution to these concerns, McMillin suggests testing an “inter-program” of father workers that work across several agencies rather than occupying a full-time employee position at any one of them.

McMillin is excited about the possibilities for innovation in these programs focused on early childhood from pre-birth to pre-kindergarten because “they pay off exponentially in the long-term.” Best of all, evidence-based improvements to these programs “can be made for pennies on the dollar,” he notes. The Affordable Care Act greatly expanded enrollment in evidence-based home visiting, but uncertainty about the future of the Affordable Care Act means that many different home visiting models and programs may now be at risk. ♥



“In the past, home visits were a bad thing... a feared thing. But, thanks to these improvements, we are creating this whole new world for children and their parents.”

—STEPHEN MCMILLIN



WHEN CHILD DISCIPLINE

CROSSES THE LINE

Associate Professor of Behavioral Science and Health Education Nancy Weaver

You're at the store and you see a parent hit and scream at her child. Should you intervene?

We've all been there. A two-year-old is kicking and screaming in the middle of the grocery store and Mom reacts with a temper. Dad is in a hurry, forcefully tugging his child down the street.

Research shows that most people would look the other way. In fact, experts don't yet know the best way to handle these types of situations. A grant to Nancy Weaver, associate professor of behavioral science and health education, from Missouri Foundation for Health will help find answers.

"Wouldn't it be nice if instead of reacting with judgment and anger, bystanders would reach out a hand of support?" says Weaver, who is principal investigator on the project. "We just don't know what that hand looks like at this point, but this project will help us develop and promote the most effective strategies."

The \$341,000 grant funds a two-year pilot project that examines the effectiveness of a training program for bystanders that offers strategies on how to intervene and guidance on when to turn to authorities if they see children being treated severely. The training will be accompanied by a social media marketing campaign that reinforces messages during training and bolsters approaches for bystander interventions, such as how to distract a child to assist an overwhelmed parent.

Weaver says she got the idea for bystander training from health professionals who said they were uncomfortable watching some parents interact harshly with their children in a hospital setting, yet didn't know exactly what to do. "Hospitals and other community settings have begun to

institute 'no hit' policies, but we really don't yet know if those will work, if they might backfire or how to best support parents who are struggling," Weaver says.

A total of 40 employees at SSM Health Cardinal Glennon Children's Hospital and affiliates of Family Resource Center and Safe Connections will receive the initial training, which will be guided by principles developed during fact-finding focus groups and adapted from a successful sexual violence prevention approach.

"We plan to train people in the community who have expressed a need for prevention strategies. We will address personal barriers to intervening and ask participants what types of parent/child interactions they observe most often that make them uncomfortable," Weaver says.

"We will then teach and model how to respond safely and effectively. Our goal is for bystanders to become allies who create opportunities for parenting support."

Each of the 40 employees will train 10 others, expanding the network of those who are equipped to address child mistreatment. They will learn to identify parenting behaviors that pose a threat to the child, connect with parents in a comfortable and non-threatening way to de-escalate the situation that doesn't jeopardize their own or the child's well-being, and share available resources to help parents who are overwhelmed.

"Our goal is to get bystanders to take action, and give them the confidence that they don't have to watch in silence as children are being mistreated."

- NANCY WEAVER

"There are ways to diffuse the situation. It could be something as simple as saying, 'It looks like you're struggling. Going to the grocery store can be a real challenge with a toddler. Can I grab your diaper bag so you don't have to juggle that?'" Weaver says.

"You have to understand why people parent the way they do. Parents have different philosophies about using physical punishment to discipline a child who misbehaves and different values about parenting that are shaped by personal experience and community context. Our goal is to get bystanders to take action, and give them the confidence that they don't have to watch in silence as children are being mistreated."

Child mistreatment is a significant problem, Weaver notes. A recent study shows that as many as a third of U.S. children are the subject of an investigation for abuse or neglect before they turn 18.

"Evidence suggests that parents who are physically aggressive toward their child have a greater potential for child abuse. Public mistreatment is a critical opportunity for intervention," she says. ▀

Translating Knowledge into Action, with a Focus on the Health of Women and Children

The College for Public Health and Social Justice is leading a campus-wide initiative to attack problems in the region that undermine the health of children and mothers.

The REACH (Research and Equity in Action for Child Health) center was launched by an interdisciplinary group of faculty with support from the dean. The center serves as an academic backbone for community partnerships that advance maternal and child health, with particular attention to highly vulnerable families and social factors that affect health.

"Infant mortality rates in St. Louis rival those in low-resource countries, children are going to bed hungry at night and our city has the highest rates of sexually transmitted infections in the nation. Many groups already are tackling these issues and other problems to make our community healthier. But for us to have an impact, there must be a coordinated effort. SLU's goal is to work side by side, with a collective voice that responds to the needs of women and children," says Dean Collins O. Airhihenbuwa.



Students from the College for Public Health and Social Justice volunteered at the St. Louis Area Diaper Bank, a nonprofit that distributes nearly 30,000 diapers a month to organizations that help young families that lack the resources to purchase diapers. PHOTO BY SERVICE DAY STUDENT VY PHAM

With faculty from public health and social work, REACH supports coordinated research into solutions for maternal child health issues by seeking funds to support faculty seed grants, establishing writing groups for manuscript and research proposals and connecting interested students with faculty members. Through its workforce development initiative, REACH connects students with community groups through practicums, internships, volunteer opportunities, and education and training exercises.

WHAT DOES SOCIAL JUSTICE MEAN TO YOU?

As part of an ongoing feature, members of our college community reflect on the meaning of social justice for them and their fields. We asked students from our diverse programs what social justice means to them. Here's what we heard:

A Call for Compassion

Cassandra Novinger
BACHELOR OF SCIENCE IN PUBLIC HEALTH



When I read the story of Ruth in scripture, I see a clear picture of God's definition of social justice. It tells of a man with influence and opportunity, Boaz, and his compassion toward Ruth, an outcast and foreigner in Israel. In the unfolding of the story, God demonstrates His desire to shelter the weak, to protect the vulnerable, to welcome the hungry to His table, and to shower the hurting with compassion.

Ruth is an incredible story about God's immense care and concern for the poor, and it is a call for us to do the same.

It is also about a God who is more than a friend to the needy, who offers more than compassion toward those who are hurting, and who extends a grace that

is much richer than a good life; it is about a God who sends Jesus Christ to die on a cross.

In Jesus' death, He welcomes anyone who chooses to believe in Him into His family forever. He shows us that God's provision for the poor is not just temporary, it is eternal. As a Christian, I am absolutely called to serve the outcast as God served Ruth—to fight for people's physical and material needs as He has done throughout scripture. But I am also called to point people toward hope in so much more than that.

I am called to point those who are hurting toward the truth of who they are in Jesus Christ. If I am not doing that, I am not doing justice at all.

Possibility

Beth Tobo
PH.D. IN PUBLIC HEALTH STUDIES



Social justice is a powerful term because in it is captured a possibility of what we can achieve.

The possibility of a level playing field that allows everyone an equal opportunity for health and well-being and for realizing their full potential. The possibility that each person's value in society is not based on how much they earn or what occupation they hold or the color of their skin. The possibility of celebrating the fact that we're all fundamentally similar just by virtue of being human, rather than allowing divisive, socially constructed ideas from perpetuating an "us" versus "them" attitude.

Social justice is an ongoing process that demands dedication both to achieve and maintain it...but I remain very hopeful.

Roll the Die

Jordan Kaufman
BACHELOR OF SCIENCE IN SOCIAL WORK



Imagine that you exist only as a sort of blob in space. You have no gender, no sex, no body type, hair color, eye color or skin color, no sexuality, no religion, no job title or wealth. Strip it all away.

In this new state of existence, imagine that you are given a die and must roll it to determine the identity you will now have. You do not know where you will be born, what language you will speak, the people that will surround you, your class, race, physical or mental abilities, and so on. What you will get is completely out of your control, but whatever you roll will be who you are; no trading!

Are you comfortable with getting any of the possibilities that are available the way our world currently is? Do you feel that our global and local environment provides the same opportunity, safety and acceptance for every life?

For me, social justice is rooted in empathy and love. We, as humans, have learned to be competitive to survive, but we are also cooperative. We yearn for connection, acceptance and understanding. Social justice is the attempted realization of this for all beings. It is recognizing that another's livelihood does not have to take away from our own and that every combination of being and identity (or roll of the die) is just as valid as the next. It is recognizing that there are current systems that tell us otherwise, and that this is not one person or one group's fault, but is, and must be, the collective responsibility of us all.

Not a Luxury

Cade Jones
MASTER OF ARTS IN CRIMINOLOGY AND CRIMINAL JUSTICE



To me, social justice is not a luxury but a right and necessity for every human on the planet. It is where everyone in society has an equal chance of living in harmony without fear of crime, but if crimes are committed around them, then justice steps in and promises that punishments are handed down fairly and equally.

Justice is not just punishment alone, but also knowing that a criminal is not in the community, that law enforcement is there doing their jobs correctly and seeing that justice is fair and timely.

As a graduate student, these are a few of the elements that draw me into

learning more about the criminal justice system and wanting to ensure everyone in society feels—and is—safe, that their best interest is in mind and that they can live peacefully knowing there are people looking out for them. Social justice is everyone getting a fair opportunity to thrive.

Get to the Root

Brianna Clare
MASTER OF HEALTH ADMINISTRATION



It is estimated that social and economic factors attribute to 40 percent of health, while only 10 percent can be attributed to clinical care. Although hospitals' primary purpose is to provide medical services, these institutions can leverage their resources to develop solutions from both a clinical and non-clinical perspective.

The current transition in health care delivery from volume to value-based care encourages hospitals to tackle the root of health disparities within a community. When community needs assessments indicate that public concerns include factors of poverty, such as lack of safe and affordable housing, insufficient sources of healthy foods, or low literacy rates, hospitals can partner with public health agencies and community organizations to help address these social determinants of health.

Population health challenges hospitals to play a new role in communities by participating in non-medical initiatives such as renovating playgrounds, establishing fresh food mobile units and supporting early childhood intervention programs. These solutions are not novel strategies; rather, the ingenuity arises from having hospitals directly involved in the upstream efforts to create healthier communities. Yet, quantifying the impact of non-medical programs is difficult and often lacks a demonstrable return-on-investment.

Increased hospital participation in reducing adverse social determinants of health, which disproportionately impact poverty-stricken communities, calls for a continued shift towards value-based reimbursements and further research exhibiting the positive impact of population health programs. As a future health administrator, I aspire to help bolster hospitals' investment in improving community health through population health initiatives.



Never Settling

George Tharp
BACHELOR OF SCIENCE IN BIOSTATISTICS

Social justice means never settling for ignorance and constantly striving for excellence in every aspect of our lives. Social Justice means continuously working to embrace every member of our community regardless of race, ethnicity, age, ability, faith, sexual orientation, gender, gender identity, gender expression, class and ideology.

Social justice means holding every member of our community accountable for having a role in the perpetuation of systems of oppression and holding every member of our community responsible for actively deconstructing those systems.

Social justice means never being silent during periods of injustice and always challenging ourselves to be the best that we can be.

Our students develop the skills and tools needed to confront the greatest challenges to the health of individuals and the communities they live in.



The College for Public Health and Social Justice at Saint Louis University is the only academic unit of its kind among the nearly 250 Catholic institutions of higher education in the United States. With a focus on finding innovative and collaborative solutions for complex global health problems, the college offers diverse degree programs united by our commitment to social justice. Our Jesuit identity is a foundation which inspires the moral and ethical principles of our social justice mission: working with and in communities to improve health and well-being, with a focus on health equity for the disadvantaged and vulnerable.

GLOBALY-RECOGNIZED LEADERSHIP IN HEALTH CARE MANAGEMENT EDUCATION

- >> Bachelor of Science in Health Management
- >> Master of Health Administration
- >> Master of Public Health in Health Management and Policy
- >> Executive Master of Health Administration

SOCIAL WORK EDUCATION BUILT ON RESEARCH AND GROUNDED IN PRACTICE

- >> Bachelor of Science in Social Work
- >> Bachelor of Arts in Criminology and Criminal Justice
- >> Master of Social Work
- >> Ph.D. in Social Work
- >> Master of Science in Applied Behavior Analysis
- >> Master of Arts in Criminology and Criminal Justice

PUBLIC HEALTH PROGRAMS BUILT ON COLLABORATION AND SERVICE

- >> Bachelor of Science in Public Health
- >> Bachelor of Science in Biostatistics
- >> Master of Public Health
 - BEHAVIORAL SCIENCE AND HEALTH EDUCATION
 - BIOSECURITY AND DISASTER PREPAREDNESS
 - BIOSTATISTICS
 - EPIDEMIOLOGY
 - ENVIRONMENTAL AND OCCUPATIONAL HEALTH
 - GLOBAL HEALTH
 - HEALTH MANAGEMENT AND POLICY
 - MATERNAL AND CHILD HEALTH
 - PUBLIC HEALTH PRACTICE
- >> Ph.D. in Public Health Studies



SAINT LOUIS UNIVERSITY
COLLEGE FOR PUBLIC HEALTH AND SOCIAL JUSTICE



Your turn!

What does social justice mean to you? Use the hashtag #SoJust and tell us on your favorite social media platform. 🗣️

Students Take the Lead

Undergrad and masters student organizers pulled off prominent events for National Public Health Week



Public Health Fair Draws Large Crowd

Now in its second year, the Public Health Fair on April 1, 2017, drew nearly 900 attendees to its many events, which included a keynote speech by Tishaura O. Jones, Treasurer of the City of St. Louis.

“We had an absolutely beautiful day for the second Public Health Fair. We had a series of fabulous speakers, a research symposium, salsa lessons, acupuncture, and more!” says Solis Winters, an undergraduate public health student at the College for Public Health and Social Justice.

The event, which took place on Tegeler Field and Tegeler Hall at SLU’s main campus, featured 48 booths from nonprofits and educational organizations from the local area as well as healthy

activities, including yoga and cornhole, and screening services for blood pressure, vision and more.

Keynote speaker Jones (pictured, right,) a Master of Health Administration alumna of Saint Louis University, answered questions from the audience about the city’s Office of Financial Empowerment, low voter turnout in the mayoral race, the recent closing of a homeless shelter and more.

When asked how she uses her graduate degree in her current career, Jones said: “I try to make decisions on policy initiatives using data, existing research and best practices for programs that are already working across the country.”



Fifth-Annual Public Health Scholar Bowl Brings Undergraduate Students From Across the Country to St. Louis

In April, a dozen teams of students came to SLU to test their public health knowledge, connect with their peers, and compete for cash prizes of up to \$1,000 in the quiz bowl—a public health trivia-style competition—and a case study presentation challenge. 2017’s theme was mental health.

Mercyhurst University brought home first place in the quiz bowl competition and Johns Hopkins University won second. The Ohio State University’s team took home first place in the case study competition, while Macalester University took second.



ABOVE: Graduate students in public health and health management plan and manage Scholar Bowl. From left, Leslie Osborne, Brendan Daly, Jessica Walton, Meghan Senne, Becky Brosch, Travis Huynh, Isra Elsidigh, Lizzie Kontarovich and Greg Siu. Not pictured are Sam Governor and Ryan Manos.

LEFT: Huynh and Lauren Arnold, associate professor of epidemiology, moderate the final round of Quiz Bowl.



Amber Matha (right) answers a question for the Mercyhurst University team. Also pictured, from left, Mallory Mansberry, Robert Wood, Susan Baltes and Julia Martino. Not pictured are Brett Conrad and Meaghan Kincaid.

Food Matters

Connecting families in need with community resources

This year, Kathryn Krupsky, a Master of Public Health student and graduate research assistant at the College had a behind-the-scenes look at what it means to be a part of an interdisciplinary, community-based research team through the Food Matters STL project, an initiative focused on improving the connections between families, pediatricians and community help.

"It's not like one parent failed to do their duty," says Krupsky. "This is a systemic issue and we want to do what we can to help from a public health, social work and a clinical perspective."

The idea builds on research, led by Ellen Barnidge, associate professor of behavioral science and health education, and colleagues at Danis Pediatric Center in St. Louis, that revealed a startling discrepancy.

When pediatricians ask about their food situation, only two to three percent of caregivers voiced concerns; the study revealed that in reality more than half were experiencing "food insecurity" or unreliable access to a sufficient quantity of affordable, nutritious food.

"When you read about a social determinants of health issue, such as food insecurity, you get really caught up in the data and the literature. But when you actually put

a person behind it and you have real words associated with it...We're all parents, we want what's best for our kids, but we have bills to pay"...it makes a difference," Krupsky says.

The caregivers may also be hesitant to disclose their situation in case social services would be alerted, while others might not understand why they would tell a doctor about their budget issues, Barnidge adds.

Thanks to pilot funding through the Dean's office, the Food Matters project is working to connect the dots through a "clinic to community" model, by working with pediatricians on training, social workers on making connections and Operation Food Search, a community-based partner, on food assistance.

Krupsky has had a boots-on-the-ground research experience of a lifetime: she helped develop training modules for the pediatrics department, created surveys for data collection, practiced skills in qualitative coding and analysis, co-facilitated partnership meetings, and managed essential project development tasks, such as submitted protocols to the Institutional Review Board.

"I was entrusted with important tasks, such as setting agendas for meetings, presenting our work at conferences and



Master of Public Health student Kathryn Krupsky

participating as an author in published manuscripts we've written as a team," says Krupsky. "This project has greatly influenced my educational experience. Not only have I played a role in important public health research, I've taken part in the development of a collaborative public health intervention that we designed and implemented in a thoughtful and inclusive way."

Studies have shown that children who live in food insecure households have more cognitive, emotional and physical health changes throughout their life -- including greater risks of multiple chronic diseases and obesity, says Barnidge. If successful, these interventions could have a lifelong, positive impact on the children's health and well-being. ♡

Guiding Partners

Global health student builds connections for community mental health

Avi Sukhwal's parents expected he would follow in their footsteps and become a physician. When he told them he wanted to go into public health, his parents simply wanted to know that he would be able to make a living. He's headed to a Ph.D. program this fall, but as an M.P.H. student concentrating in global health, it was Sukhwal's interest in mental health that really took him places.

Through his internship at a nongovernmental organization in Dublin, Ireland called Cairde (pronounced "cord-ja" which is Gaelic for "friendship"), Sukhwal took a lead role in producing a series of mental health guidebooks for diverse minority, immigrant and refugee populations. The books are published in 16 languages.

Sukhwal's job involved reaching out to experts and community leaders. "It can be very hard for people who have been through traumatic events to seek mental health care, especially if providers don't speak their language," he says. "We reached out to many community healthcare entities to ask if we could include them in our guide. They said 'yes,' and asked: 'Please, can we be a part of your process, so that we can add in what we want as well?'"

For his part, Sukhwal often played the role of detective, tapping into community networks and tracking down mental health professionals fluent in different languages. Sukhwal says he even shed a few pounds through his legwork on the streets of Dublin.

The guides are distributed widely throughout northern Ireland in hospitals, clinics, public libraries and through community partners. "If you go to Dublin, you will find one of our guides!" says Sukhwal. ♡

Cairde's Mental Health Guides are published in 16 languages



Sukhwal (right) and fellow intern Justyna Maslanka work at Cairde's offices in Dublin



American Public Health Association annual meeting in Denver, Colorado serves as backdrop for student-organized day of service

95 students from 31 institutions participated by volunteering two hours of their time at seven sites in Denver as well as three in St. Louis.



"Public Health Service Day was started as a way to get students out of the convention hall and into the host community, working with local organizations in shared service," said Samantha Wasala, M.P.H. '17, who spearheaded the student organizing committee.

2017-2018 Fulbright awards
CPHSJ RECIPIENTS WILL TEACH AND CONDUCT RESEARCH

Courtney Sciaratta, a master's student in public health, has been offered a research grant in Argentina. Her goal is to disrupt the spread of mosquito-borne diseases through targeted outreach in at-risk areas.

Samuel Shreve, a senior studying public health, international studies and Italian, has been offered an English Teaching Assistant grant to Italy.

Renee Richter graduated from SLU in 2015 with degrees in public health and international studies. She has been offered an English Teaching Assistant grant to South Africa.

Framing Unity

Amaly Yossef is behind the “I Am Muslim And...” social media campaign

The popular “Humans of New York” photo project, featuring interviews with thousands of people on the streets of New York City, is a testament to the mix of empathy and thick skin required to engage with strangers.

“It can be emotionally, mentally and even physically draining,” says Amaly Yossef, a Master of Social Work student at Saint Louis University, and the photographer behind the “I Am Muslim And...” social media campaign. She asks Muslims to finish the sentence and pose for a photo.

Some choose to be silly, some religious and others political. Yossef smiles as she talks about how children light up with they see her photos, laughing and pointing out people they know.

“It’s a positive reflection of their community. It’s something they don’t often get to see in the mainstream media.” She recalls working with a group of adolescent boys right after the presidential election; she relied on her social work skills to guide them as they reframed their emotions into a positive light: “Love Trumps Hate.”

Yossef and her younger sister Aminah began the campaign to help fight the rise of Islamophobia. They’ve grown their Facebook and Instagram communities to more than 1,200 people. They receive photo submissions from all over the world- from Muslims and non-Muslims who want to show their support.

And yes, it is tough dealing with negative online comments: there’s no getting around that, she admits. But the photos have helped bring people together in ways she never thought possible. So, most days, the positive outweighs the negative.

“As a Muslim woman, as a social worker, I continue that fight. If I can touch just one person who thought negatively, then I’ve done my job,” she says.

Yossef presents the photos in black and white, to give the campaign a sense of unity. “You can still see the diversity, but it highlights the connection between all of us,” she says.



TOP: Master of Social Work student Amaly Yossef
 ABOVE, RIGHT: A small sample of Yossef's images, courtesy of the photographer



College Establishes Undergraduate Scholarship Fund

Thanks to an anonymous donor, a new scholarship program for undergraduate public health students has been established at the College for Public Health and Social Justice.

“Scholarships are a critical component of enabling students from every walk of life to access higher education. Ensuring a variety of voices and perspectives are heard in our classrooms, on our research teams

and in the workforce is an integral part of advancing our knowledge of health and well-being,” says Collins Airhihenbuwa, dean of the College for Public Health and Social Justice.

The Dean’s Undergraduate Public Health Endowed Scholarship provides funding to students pursuing a Bachelor of Science in Public Health who maintain an overall G.P.A. of 3.0 and have financial need.

Visit slu.edu/giving to learn more about the many ways you can support SLU.



Jenna Zmuda (center) receives the MOHEG Student Essay Award from American College of Healthcare Executives fellow David Baltzer (right). Health Management and Policy interim chair Kathleen Gillespie holds the matching plaque presented to the College.

A Winning Idea for Health Care

Poorer health outcomes and higher costs are linked to hospital readmissions, Master of Health Administration student Jenna Zmuda finds in her award-winning essay.

Zmuda was awarded \$1,000 and a trip to one of Missouri’s largest health care conferences for her winning entry in the Missouri Healthcare Executives Group (MOHEG) student essay competition. Zmuda discusses how social and economic conditions such as poverty and low access to primary care affect the likelihood that patients treated for acute conditions such as heart attack or pneumonia will have to return to the hospital for additional care. Hospitals with high rates of these so-called readmissions pay penalties, and Zmuda says safety net hospitals that treat low-income patients are penalized disproportionately.



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APRIL FLOWERS

An early warm-up brings the magnolia blooms out, as campus awakens from winter.

PHOTO: CHRISTOPHER CASEY

