



**PROVIDENCE
COLLEGE**

10th ANNUAL UNDERGRADUATE
CONFERENCE ON
HEALTH & SOCIETY

PROGRAM

APRIL 13, 2019

THE DAY AT A GLANCE:

Welcome/Breakfast Harkins 333	8:00am – 8:30am
Panel 1 Presentations Harkins 300	8:30am – 10:00am
Panel 2 Presentations Harkins 300	10:15am - 11:45am
Lunch Harkins 333	11:45am - 12:30pm
Panel 3 Presentations Harkins 300	12:30pm - 2:00pm
Panel 4 Presentations Harkins 300	2:15pm - 3:45pm

PANEL 1 | INTERDISCIPLINARY APPROACHES TO MENTAL HEALTH

8:30am – 10:00am | Harkins 300

STUDENT DISCUSSANT | KAILA KUTZ, ROGER WILLIAMS UNIVERSITY |

“The Impact of Disability Models on Disability Attitudes: An Investigation of Therapeutic Approaches to Treatment”

JOSETTE TUGANDER, PROVIDENCE COLLEGE | 2019

Past research has indicated that students with disabilities have lower undergraduate completion rates than students without disabilities. These lower rates are influenced by students’ sense of belonging at school, which is impacted by peers’ disability attitudes. A previous study demonstrated that stronger medical model and weaker social model of disability beliefs are correlated with less favorable disability attitudes. Conversely, stronger social model beliefs and weaker medical model beliefs are correlated with more favorable disability attitudes. Continuing a project from Experimental Health Psychology last semester, this experiment will extend previous research beyond correlation to investigate the impact of disability models on disability attitudes. Participants will read about a therapeutic treatment plan for a person with a disability (stuttering). However, the reading will use medical model language in one condition and social model language in the other condition. Participants’ attitudes toward the person will be measured with the Multidimensional Attitudes Scale Toward Persons with Disabilities. Based on the previous research, it is hypothesized that participants in the social model condition will have more favorable attitudes than those in the medical model condition. Results supporting the hypothesis could imply that it may be beneficial for schools to discuss disability using the social model.

“You Aren’t What You Eat: Structures of Moralistic Food Beliefs in the Digital Age”

AUTUMN GERARD, SARAH LAWRENCE COLLEGE | 2022

In a society which touts the slogan “you are what you eat”, individuals are systematically conditioned to view themselves as the sum of what they choose to (or not to) consume. This phrase, which through cultural repetition and mainstream assertion, has become a normalized truth - also produces a structure of belief which conflates dietary choices with moral status, and perpetuates identity

construction through displays of food morality and body discipline. Drawing on my ethnographic fieldwork done in the online “clean eating” communities of Ketogenic dieters, raw vegans, and bodybuilders, as well as an interview with a dietetic eating disorder specialist, I will seek to problematize statements such as “you are what you eat”, as engendering enhanced degrees of consumer anxiety in ways that mediate consumption habits and reproduce methods of disordered food interaction. In this presentation, I will provide both an engaged analysis of this circulated idiom, as well as a more nuanced perspective on food morality and disordered eating, the literature on which, has historically been deeply reductive of the complex daily interactions between individuals and their environment as they attempt to eat and live within inequitable systems of consumption.

"A Mathematical Approach for Assessing tDCS Efficacy for Post-Traumatic Stress Disorder"

ABIGAIL SMALL, ROGER WILLIAMS UNIVERSITY | 2020

Post-traumatic stress disorder (PTSD) is a neurological condition which results from a traumatic experience caused by physiological shock or physical harm. Clinical results show success in combating the symptoms of PTSD with a neurostimulation treatment called transcranial Direct Current Stimulation (tDCS). Though effective, the underlying mechanisms of the treatment and its success are not fully comprehended. In order to elucidate reasons for its efficacy, a mathematical model has been developed in order to quantify the electrical and neural activity invoked by this form of current stimulation. Computer simulations of various electrode montages on a three-dimensional cranial cavity with biologically-based tissue conductivities parallel results from clinical trials discussed in current medical literature. Certain regions of the brain which are most commonly affected by PTSD are targeted by specific electrode configurations. The model provides a prediction not only of voltage and electrical current density within the head cavity, but also of the sensitivity of the brain tissue to fire an action potential during treatments. We present our current results and findings that begin to shed light on optimal tDCS settings for treating PTSD.

PANEL 2 | PIVOTAL MOMENTS IN DEVELOPMENT

10:15am – 11:45am | Harkins 300

"What predicts burnout among medical students?: The role of empathy vs. interpersonal sensitivity"

TAMARA ALEKSANYAN, MCPHS UNIVERSITY | 2019

The purpose of this study was to investigate the relationship between self-reported empathy and interpersonal sensitivity (the ability to accurately perceive others' emotions) in predicting burnout among medical students. Participants were recruited from the University of Massachusetts Medical School. The data was collected via an online Qualtrics survey containing multiple scales and a skill test. Results yielded multifaceted conclusions not only about the relationships between variables but also about the variables themselves. Findings of this study suggest a complex relationship between empathy and burnout, that is impossible to describe in one way. On the contrary, the data showed lack of relationship between interpersonal sensitivity and burnout. This research aims to raise awareness of burnout syndrome and its prevalence in healthcare providers. Furthermore, the hope for this study is to contribute to potential training programs that develop burnout prevention and coping mechanisms in future and current healthcare providers.

"The Emotional Responses of Health Care Professional after Hurricane Maria"

RANYA PEREZ, KALAMAZOO COLLEGE | 2020

ANN GROSS ALMONTE, PROVIDENCE COLLEGE | 2019

MADLINE WEIL, PROVIDENCE COLLEGE | 2019

When hurricanes Irma and María hit Puerto Rico in September 2017, healthcare workers became first responders charged with helping the injured and reconstructing the healthcare system.

We conducted 23 semi-structured interviews with healthcare providers from Puerto Rico to document their experiences in the immediate aftermath of the storm and the longer term recovery period. We analyze the responses to questions that address care relationships to understand how disaster affects care structures. Many providers expressed that feelings of compromise (which translates loosely to commitment or engagement) was a significant driver in caring for neighbors and patients. We found that essential components to resiliency during a time of crisis are a strong emotional support system and network of care. We highlight how healthcare providers had extraordinary capacity for care giving in the aftermath of the storm and share the incredible lengths they went to deliver care to in the wake of disaster and destruction.

"Transition from Pediatric to Adult Healthcare for Adults with Intellectual and Developmental Disabilities"

VICTORIA GRASSO, PROVIDENCE COLLEGE | 2019

Every year, half a million children with intellectual or developmental disabilities (I/DD) age into adulthood in the United States (American Academy of Pediatrics 2002). Although the move away from institutionalization in the 1960s and 1970s resulted in inclusiveness and more humane treatment, it created a complex healthcare system for a very vulnerable population. The growing size and aging of the I/DD population is a public health concern and demands a comprehensive look at the healthcare transition process for young adults. Despite three decades of government led discussions about healthcare transitions for individuals with I/DD, there is insufficient program organization and provider training, as well as legal and financial barriers to meeting the healthcare needs of individuals with I/DD transitioning from pediatric to adult care. As a result, the adult I/DD community experiences significant and preventable negative health disparities when compared to adults without disabilities. In this paper, I discuss the transition program history and its shortcomings, the barriers to care for patients with I/DD and give actionable policy suggestions, specifically reforming provider training using the HIV model and mandating a Transition Readiness Assessment Questionnaire, for overcoming healthcare transition obstacles. Throughout, I use Rhode Island as a case study comparison to the United States.

"Smoking evolved?" Perceptions and use of JUUL products amongst college students"

TY MEKA, MCPHS UNIVERSITY | 2019

In recent years, there has been a surge in the number of electronic-cigarette users in the United States. One brand in particular has been on the forefront of society's attention. JUUL products have come to dominate the e-cigarette market, and seem especially popular amongst youth. This is cause for concern, due to the relatively easy access to the product and associated adverse health effects of nicotine on youth. Additionally, the expansion of e-cigarette use through JUUL has certain parallels to the tobacco industry marketing strategies in the past. Through the use of a survey conducted on a college campus, this paper will explore attitudes towards JUUL. By looking into student perceptions, in addition to usage of JUUL amongst students, the survey will provide data that can be added to the current body of literature surrounding e-cigarettes and youth. The lack of education of youth on JUUL products is a cause for public health concern that this paper addresses.

LUNCH | 11:45AM - 12:30PM | HARKINS 333

PANEL 3 | COMMUNITY HEALTH RESEARCH AND SERVICE

12:30pm – 2:00pm | Harkins 300

"Health Equity Zone Learning Community Events"

WILLIAM RAUSCH, PROVIDENCE COLLEGE | 2019

In 2015 the Rhode Island Department of Health (RIDOH) began a place based initiative to address social determinants of health called "Health Equity Zones" or HEZ. A HEZ is defined as a specific geographic area with documented health risks and an economically disadvantaged population. Within the HEZ is a group of volunteer stakeholders that works to achieve health equity for these residents. HEZ stakeholders meet bi-monthly and hold a "learning community" event to discuss the social determinants of health that they believe are most important to their HEZ, and how best to rectify these issues. As a RIDOH intern researching applied public health and working on the HEZ learning community events, I assess their effectiveness from the stand point of the stakeholders and the community members alike. I will do this by analyzing health data from RIDOH to track the effectiveness of HEZ on improving health indicators and examine stakeholder evaluations of HEZ events. I will demonstrate where the HEZ initiative is effective, but also give critical remarks on how to improve the learning communities to better address the social determinants of health within the communities they hope to serve.

"The Afro-Latinx Experience: Uncovering Health Inequities within Rhode Island's Family Visiting Program"

SARA JEAN-FRANCOIS, PROVIDENCE COLLEGE | 2019

As a Rhode Island Department of Health (RIDOH) intern-scholar, I engage families who are not currently enrolled so that they may gain access to Family Visiting resources and programing. The Department of Family Visiting works with mothers and families in a variety of programs to educate and promote overall infant and maternal health and development, while also disbursing healthcare and social service resources. These resources are especially important for Afro-Latina women because of health disparities such as higher rates of infant and maternal deaths among women of color. Further, as immigrants and women of color, Afro-Latinx women may experience barriers to accessing family visiting services that involve language, immigration status, and unpredictable work schedules. This program evaluation asks: Do Afro-Latinx women, use family visiting resources at the same rate as women of other ethnic backgrounds? By analyzing family enrollment data and interviewing various participants within the department's scope, this applied program evaluation method seeks to gain more knowledge on this minority population and help the Department of Health work with families to become more conscious of their own health risks. Ultimately, this project seeks to bridge cultural and social gaps that keep families of Afro-Latinx descent from using healthcare resources.

"Unequal Access to Healthcare: A Social Portrait from Florida"

MADLINE WEIL, PROVIDENCE COLLEGE | 2019

JULIA SCHEURING, PROVIDENCE COLLEGE | 2021

CARA MCCLUSKEY, PROVIDENCE COLLEGE | 2019

This past summer, a woman living in Florida (who we refer to using the pseudonym Jane) died from an untreated respiratory infection. This infection could have been cured with a simple round of antibiotics. Jane was unable to afford this medicine because she was uninsured. We use ethnographic interviews of Jane's co-workers, family, and local health care safety net providers to create a social portrait and illness narrative. Jane was a caretaker, she provided care for her husband who was in kidney failure, and worked as at an assisted living facility where people lived to as old as 103. Jane died before she reached her 60's. We explore how perceptions of worthiness shape uninsured residents' experiences trying to access care and ultimately how those perceptions lead to death. Jane's story is not an isolated occurrence, she is just one of millions of Americans that have fallen into the coverage gap and forced to make health a second priority. Sharing Jane's story will highlight the need to include the human experience in partisan discussions of health legislation, increase coordination of care in safety net settings, and shine a light on the inequity that is built into U.S. health policy.

PANEL 4 | POLITICS AND PARTIES

2:15pm – 3:45pm | Harkins 300

"From Beshear to Bevin: The Rise and Fall of the ACA in Kentucky"

ELLIE BAKER, BROWN UNIVERSITY | 2019

How did Kentucky quickly go from being the poster-child for the success of the Affordable Care Act to shutting down its own healthcare exchange and attempting to implement a work requirement for Medicaid? Through my research, I have examined the course of ACA implementation in Kentucky, all the way up to its present state. Why was Kynect such a successful marketplace? If uninsured rates dropped from 20.4% to 7.5% in less than three years, why did Kentuckians choose to elect Matt Bevin as governor, a man who ran on the platform of dismantling the state-run exchange? How did opinions about President Obama contribute to Bevin's triumph? What effect has Bevin's anti-ACA agenda had on the state over the past four years? All of these questions and more will be answered in my presentation on the way Kentucky has related to healthcare since the passage of the ACA in 2010.

"After Hurricane Maria: Addressing the Gap in Relief Efforts from the Federal Government "

DAVID ZULETA, PROVIDENCE COLLEGE | 2019

LAUREN GUERRA, PROVIDENCE COLLEGE | 2019

On September 16th 2017, Puerto Rico was hit by Hurricane Maria, a category 5 hurricane that left the island in havoc. To understand what happened on the ground, our research team traveled to Puerto Rico to conduct ethnographic interviews on what health professionals experienced during and after the hurricane. Various interviews illustrate that many of the attitudes and behaviors health professionals brought to their work that allowed them to continue delivering care despite crisis was due to their commitment to their community. This finding led for us to research the question of whether discrepancies exist between what aid the federal government claimed to have given to Puerto Rico and what health professionals experienced. To do so, we first seek to use federal statements and reports from FEMA, as evidence for what support the federal government stated they provided. Next, we will use evidence from our ethnographic interviews and various news articles to illustrate what support health professionals in fact received. Ethnographic interviews offer a unique perspective on understanding the impact Hurricane Maria had on health professionals. Ultimately, we seek to highlight whether the aid provided by the federal government was received by health professionals effectively.

"Confronting the Crisis: The Misrepresentation of Women Living with AIDS and the New Jersey Women & AIDS Network"

OLIVIA BROWN, BOSTON UNIVERSITY | 2019

In the 1980s and 1990s to receive a diagnosis of Acquired Immune Deficiency Syndrome (AIDS) was a death sentence. Not only would the contraction of AIDS eventually ravage and kill the body, but the life once lived would instantly and irreversibly be impossible to sustain. In response to huge numbers of dying people, primarily from communities that experienced histories of marginalization, grass roots activism became popular to fight the disease and the social conditions experienced by HIV/AIDS positive people. Of the total population in the U.S. in 1996 diagnosed with AIDS, the national average of women infected was 15%. Some of the larger organizations had small committees devoted to women's issues, but it was rarely sufficient. The New Jersey Women and AIDS Network, or NJWAN, was a group born in May of 1988, out of the frustration many female activists in New Jersey felt while seeing women's issues pushed to the side. This research paper proves the AIDS epidemic was envisioned and is remembered almost exclusively as a man's disease, and the impact that had on women with AIDS and female activists fighting for women with AIDS.

"Reducing Health and Healthcare Disparities Among Latino/Hispanic Communities in the US: An Application of the Social Ecological Model"

JOHNATHAN TRAN, MCPHS UNIVERSITY | 2020

Latino/Hispanic communities make up a large proportion of the US population, especially most of its workforce; however, despite their high levels of employment, most of these are low-wage jobs lacking in occupational benefits. As a result, the health of many underserved Hispanic communities is not only poor, but they suffer inequities in their access and quality of medical care. This paper reviews and analyzes many barriers and risk factors of health disparities that affect large portions of the US Latino/Hispanic population, such as personal beliefs, healthcare affordability, education, and nearly inescapable poverty. Realizing that healthcare disparities are multifaceted issues, it is suitable to utilize the Social Ecological Model (SEM) to best understand these problems to converge public health attention

toward mitigating them. Following the literature review are suggestions of interventions revolving around components of the SEM - individual, interpersonal, organizational, community, and policy level - that seek to reduce and ultimately eliminate the inequities in access and quality of healthcare for many underprivileged and underserved Latino/Hispanic communities. I will also discuss my progress in pursuing one of the interventions proposed in this paper, a youth/community-focused involvement, and its proven successes and the need for its further and similar implementation.

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