UNC Gillings Minority Student Caucus Presents
The 44th Minority Health Conference

Practicing Health as a Human Right

February 24th, 2023

In-Person and Virtual

Policy, Ethics and the Law

Gillings School of Global Public Health
WHAT DOES PRACTICING HEALTH AS A HUMAN RIGHT MEAN TO YOU?

Questions for Keynote Speakers?
Scan the QR code or send in your questions at go.unc.edu/KeynoteQA23
When the Minority Health Conference was established in 1977 by the Black Student Caucus (now Minority Student Caucus), its major objectives were to highlight the health issues of concern among people of color. Since then, it has been broadened to be inclusive of other minority populations. Initially the conference was held in UNC Gillings' Rosenau Auditorium, but when conference attendance increased from 300 to 400 during the 1990s, the conference moved to the William and Ida Friday Continuing Education Center. Thousands of UNC students and advisors have contributed to the planning of the conferences. However, the three pillars of the conference - Dr. Bill C. Jenkins, Dean William T. Small Jr. and Dr. Victor J. Schoenbach - are honored for their significant contributions.

In 1977, Dr. Bill C. Jenkins, a UNC student at the time, led the Black Student Caucus to create the conference. Dr. Jenkins was an extraordinary leader in public health, a lifelong advocate for addressing racism and eliminating health disparities and an enthusiast in building the ranks of ethnic minorities in biostatistics and epidemiology. Among his many accolades and groundbreaking work in public health, he served as Manager of Minority Health Activities in the Office of the Director and Manager of the Tuskegee Participants Health Benefits Program, which assured medical services to the survivors of the Tuskegee Study. While working at the Centers for Disease Control and Prevention, Dr. Jenkins was one of the first public health scientists to investigate HIV/AIDS in African Americans and served as Manager of the CDC's National Minority Organizations HIV Prevention Program. He founded Morehouse College’s Public Health Sciences Institute and the Project IMHOTEP, which together, have been a source for recruiting underrepresented minorities to the public health profession. Dr. Jenkins returned to Chapel Hill in 2010 as a senior scholar at the UNC Institute of African American Research and in 2014, became an adjunct professor in the UNC Department of Epidemiology.

His passing in 2019 was especially poignant for many at the Gillings School, given its proximity to the School’s 40th-anniversary Minority Health Conference. Dr. Jenkins stressed the significance of knowing and valuing the history of public health and its treatment (and mistreatment) of minority populations. As a pioneer and phenomenal educator, he taught the importance of investing in people and not exploiting people. We honor his legacy and vision for the conference by continuing to use our skills, passions and talents to work on behalf of marginalized communities and remembering how words and data can be a tool for social change.
In 1971, William T. Small, Jr. came to the UNC School of Public Health as Coordinator of Minority Affairs with the charge to increase minority student enrollment in the school’s graduate programs. He later became Assistant Dean for Students and then Associate Dean for Students. For over a quarter of a century, Dean Small worked on behalf of public health students as well as faculty, staff and administrators. Students involved in the conference’s early years describe how Dean Small pulled the Conference together – identifying people, shepherding Conference activities and gathering feedback. Each year, a new group of students would organize a successful conference, and Dean Small was a constant force that made that possible. A member of the 1991 Conference Planning Committee recounted, “Bill Small’s diverse and masterful contributions ... his advice, experience, judgment and commitment — as well as large amounts of his time and energy — were indispensable to the Conference’s success. The Dean’s Office could not have been represented more effectively, diplomatically and graciously.” Dean William Roper named the Keynote Lecture after William T. Small Jr. in 1999, the same year of his retirement from UNC. He passed in April 2021, shortly after the 42nd MHC.

In 1980, Dr. Victor J. Schoenbach joined the UNC Gillings faculty in the department of Epidemiology. From 1998 to 2018, he led the UNC School of Public Health Minority Health Project, which presents interactive broadcasts on health equity topics and works with the Minority Student Caucus on its annual Minority Health Conference and webcast. In 1991, Dr. Schoenbach worked with then Assistant Dean Small to revive the Minority Health Conference after a two-year hiatus and continued to work with the conference planning committee until his retirement. Dr. Schoenbach also served as a faculty advisor to the Minority Student Caucus from 2004 to 2018, and he helped to initiate the interactive Keynote Lecture broadcast and the partner conferences. He continues to maintain websites for the Minority Student Caucus and the Minority Health Conference. From 2014 to 2017, Dr. Schoenbach taught a seminar with Bill Jenkins on social justice in public health and created a “virtual library” on the history of minority health activities at UNC in conjunction with the course. In 2012, the Minority Health Conference’s afternoon keynote lecture was named the “1st Annual Victor J. Schoenbach Health Disparities Keynote Lecture” in recognition of Dr. Schoenbach’s commitment to minority health in the community.

The Minority Health Conference is eternally grateful for the leadership and unwavering service of Dr. Jenkins, Dean Small and Dr. Schoenbach to advancing the health of marginalized people and eliminating health inequities and racial injustices, work embedded in the mission of the Minority Student Caucus and the conference. The Minority Student Caucus is honored that the names of these champions of health equity are woven into the history and legacy of the caucus and conference.
The Minority Student Caucus (MSC) was initially founded as the Black Student Caucus in 1971 by a group of Black students at the Gillings School of Global Public Health. The founding members of the Caucus created this organization to increase the attention given to health disparities while also advocating for recruitment, support and retention of Black students and faculty at the School. Over the years the Caucus used several names but eventually settled on “Minority Student Caucus” in late 1977, to ensure that all students of color would know they were welcome.

Today, MSC consists of all students of color at Gillings who wish to join and anyone else who is interested in supporting the Caucus’s mission. Since its founding, MSC has been charged with bringing the concerns of people of color to the attention of the school’s administration and with working to attract and retain more students and faculty of color to the School. Further, the Minority Student Caucus promotes research, policies and programs aimed at addressing public health issues that affect people of color.

The Minority Student Caucus founded the Minority Health Conference (MHC) in 1977 and has conducted it nearly every year since. The Caucus works with the Gillings community on all levels to advocate for the needs of students of color by developing strategic partnerships and advocating for change. As a member of the Dean’s Council at the Gillings School of Global Public Health, MSC is able to have meaningful dialogue with various members of the School’s administration in promoting the success and wellbeing of students of color. To accomplish the initiatives of increasing and promoting racial and health equity, the primary goals for MSC are the following:

- To increase recruitment, intake and retention of students and faculty of color
- To ensure the employment of an antiracism focus in the Gillings curriculum
- To develop strategic partnerships across campus and in the community
- To create sustained mechanisms and resources that provide support to students of color

The Minority Student Caucus welcomes you to our 44th Minority Health Conference and we hope you will join us on this journey towards achieving racial and health equity.
January 19, 2023

Dear UNC Minority Health Conference Participants:

On behalf of more than 50,000 members and affiliate members, the American Public Health Association extends warmest wishes to the University of North Carolina-Chapel Hill Gillings School of Global Public Health on another successful year organizing the annual Minority Health Conference.

Congratulations to the Minority Student Caucus, Minority Health Conference Co-Chairs, planning committee, advisors, and all others involved in coordinating the 44th annual Minority Health Conference. Our values at APHA are an extension of our members’ beliefs and include science and evidence-based decision making, prevention and wellness, community and health equity—all of which are reflected in the work of the Minority Health Conference. For these reasons, APHA proudly endorses this year’s Minority Health Conference.

The University of North Carolina-Chapel Hill Gillings School of Global Public Health is a tier one research institution, and the involvement of students is what makes Gillings great. The Minority Health Conference perfectly encapsulates the institution’s dedication to its students. As the longest-running student-led health conference in the nation, the Minority Health Conference continues to bring salient public health topics to a community of students, researchers, and practitioners. This year’s theme, “Practicing Health as a Human Right: Policy, Ethics, and the Law” is both timely and necessary to everyone in the field of public health. I hope you will be able to gain valuable tools and information to help create healthier communities inclusive of all persons.

Congratulations again to all the hard-working students and supporters of the Minority Student Caucus in celebrating 50 years!

Sincerely,

Georges C. Benjamin, MD
Executive Director
CONFERENCE CO-CHAIRS
Callia Cox
Rhea Jayaswal

MINORITY STUDENT CAUCUS
CO-PRESIDENTS
Asia Carter
Kiara Tompkins

PLANNING COMMITTEE
COORDINATORS
Ciera Thomas
Raven Walters

COMMUNICATIONS
COMMITTEE
Zara Mehta, co-chair
Danielle Owens, co-chair
Halima Hasan, graphic designer
Jessica Davidson
Checkna Diawara
Jaquayla Hodges
Alexa Ziegler

SPEAKERS COMMITTEE
Mercy Adekola, co-chair
Tumi Akeke, co-chair
Aaron Carpenter
Veronica Cifuentes
Sara Joly
Olivia Ojugbeli
Molade Otushso
Alexandra Simpson

EXHIBITORS COMMITTEE
Christina Frederick, co-chair
Dorian Ho, co-chair
Rotimi Kukoyi
JeMya McClendon
Ashka Shah
Wendy (Shirou) Wu

FUNDRAISING COMMITTEE
Talia Kieu, co-chair
Manish Nayak, co-chair
Raimah Hossain

POSTERS COMMITTEE
Tatum (Shamiso) Kodzai, co-chair
Ashya Smith, co-chair
Esha Agarwal
Sarah Musa
Ruth Nwefo

EVALUATION COMMITTEE
Beryl Bortey, co-chair
Anna Wakita, co-chair
Amma Agyemang-Duah
Ese Aikhuele
Jasmine Hodges
Jiona Mills

ADVISORS
Kia Barbee
Chandra Caldwell
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Michael Lowery
O.J. McGhee
Ryan McGuirt
Branson Moore
Patsy Polston
Kim Ramsey-White
Jennie Saia
Charletta Sims Evans
Cherelle Whitfield
The Minority Health Conference, which is the largest and longest-running student-led health conference in the country, aims to raise awareness around minority health and mobilize students, academics, and community members to take action for change. The conference was founded and is led by students at the Gillings School of Global Public Health, UNC-Chapel Hill.

We are excited to announce that this year’s theme is:

**PRACTICING HEALTH AS A HUMAN RIGHT: POLICY, ETHICS AND THE LAW**

The World Health Organization declared “the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.” The past year has revealed how global and domestic political, legal, economic, and health systems are failing to support the highest attainable health.

**Practicing Health as a Human Right** recognizes that human rights provide a framework upon which we can ensure that equity and justice are routinely protected and upheld in the law. Practicing Health as a Human Right acknowledges that the public health problems of today are often structural, stemming from racism and other discriminatory practices and policies that have been codified into law, and therefore require legal and policy solutions. If public health practitioners, policymakers, and healthcare providers utilize human rights principles in the execution of their work, we stand a better chance of improving health outcomes and quality of life for all people.

This year’s conference seeks to examine the factors that have created and impacted health inequities across gender, race, economic status, and other social determinants of health. The goal of the conference is to conceptualize a human rights framework as a tool to center our public health discussions around policy, ethics, and the law. We hope that the theme, Practicing Health as a Human Right, will connect us around shared values of equity and justice that can enable us to build a stronger future for all.
Dear Conference Attendees,

On behalf of the Minority Student Caucus, the Minority Health Conference Planning Committee, and the Gillings School of Global Public Health, we welcome you to the 44th Annual Minority Health Conference.

In 1971, the Minority Student Caucus was founded to draw attention to health inequities and to support students of color here at the UNC Gillings School of Global Public Health. Six years later, the Minority Health Conference was established, and it has become the annual hallmark event of the Caucus. Nearly every year since 1977, we have convened thousands of community members, professionals and students to address health disparities and to reshape a more equitable society for minority health. Together, we connect multidisciplinary champions working at the local, regional, national, and global levels – and support communities everywhere.

This year’s theme – Practicing Health as a Human Right: Policy, Ethics and the Law – seeks to examine the factors that have created and impacted health inequities across gender, race, economic status, and other social determinants of health. The goal of the conference is to conceptualize human rights as a tool to center our public health discussions around policy, ethics, and the law. We hope that the theme will connect us around shared values of equity and justice that can enable us to build a stronger future for all.

Practicing Health as a Human Right recognizes that human rights provide a framework upon which we can ensure that equity and justice are routinely protected and upheld in the law. The public health problems of today are often structural, stemming from racism and other discriminatory practices and policies that have been codified into law, and therefore require legal and policy solutions. If public health practitioners, policymakers, and healthcare providers utilize human rights principles in the execution of their work, we stand a better chance of improving health outcomes and quality of life for all people.
We would like to recognize the dedication and hard work from our exceptional leadership team and planning committee that made this year’s conference possible. Planning a high-quality conference of this magnitude is no easy task, especially while being a student. We are also appreciative of our new and long-standing conference sponsors that have supported and ensured a sustainable conference from year to year.

We would like to thank Dean Nancy Messonnier and the Dean’s Office at the Gillings School of Global Public Health for their continued support. To our advisors: Kia Barbee, Chandra Caldwell, Matthew Chamberlin, O.J. McGhee, Ryan McGuirt, Benjamin Mason Meier, Michael Lowery, Patsy Polston, Jennie Saia, Branson Moore, Charletta Sims Evans, Kim Ramsey-White and Cherelle Whitfield, we are eternally grateful for your guidance and unwavering support as we navigated the planning process. We want to give a huge thank you to the Minority Student Caucus Co-Presidents, Asia Carter and Kiara Tompkins, for their deep commitment to the mission of the Caucus, steadfast leadership, and dedicated support.

Finally, to the conference attendees, breakout session speakers, exhibitors, and poster presenters, we are thankful for your support and enthusiasm towards the conference’s vision. Your passion for and commitment to racial justice and health equity is an indispensable factor in the success and sustainability of the conference.

Callia Cox
Department of Nutrition
Minority Health Conference Co-Chair

Rhea Jayaswal
Department of Nutrition
Minority Health Conference Co-Chair

FIRST AMENDMENT STATEMENT FROM THE UNIVERSITY

All sponsored speaking engagements at the University fall under the protection of free speech laws and policies. The University is governed by the U.S. Constitution’s First Amendment, the North Carolina Restore Free Speech Act, enacted by the General Assembly in 2017, and the campus Facilities Use Policy. Additionally, providing a free speech forum for a range of ideas is part of the UNC Gillings School of Global Public Health’s commitment to inclusion.

We would like to remind everyone attending the conference to please remain respectful of fellow attendees and our speakers. Individuals who disrupt the event by interfering with the protected rights of attendees or speakers will be asked to leave.
# CONFERENCE AGENDA (MORNING)

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
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<tbody>
<tr>
<td>7:30 AM</td>
<td>Open Registration</td>
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| 9:00 AM    | **Opening Remarks | Grumman Auditorium**  
Indigenous Land Acknowledgement  
Raven Walters  
UNC Gillings Minority Health Conference Co-Chair Remarks  
Callia Cox & Rhea Jayaswal  
UNC Gillings Minority Student Caucus Co-Presidents Remarks  
Asia Carter & Kiara Tompkins  
UNC Gillings School of Global Public Health Remarks  
Dean Nancy Messonnier, MD  
UNC Office of Diversity and Inclusion Remarks  
Vice Provost Leah Cox, PhD |
| 9:30 AM    | **William T. Small Jr. Keynote Speaker | Grumman Auditorium**  
Cynthia Greenlee, PhD  
“She went to the Negro doctor”: Black Physicians, Surveillance and Abortion in the Jim Crow South |
| 10:15 AM   | **Keynote Q&A Session | Grumman Auditorium** |
| 10:45 AM   | **Exhibitors and Posters | Atrium and Willow Lounge**  
Exhibitors: Atrium  
Posters: Willow Lounge |
| 11:15 AM   | **Morning Breakout Sessions**  
Improving Healthcare by Addressing Ableism From an Intersectional Lens | Leah Smith, Maureen Van Stone, & Rhonda Holliday  
Location: Sunflower  
From Reporting to Supporting: Creating Equitable Futures for All Families | Kamaria Excell & Jasmine Wali  
Location: Dogwood  
Let's Talk: Justice, Equity, Diversity, Inclusion, and Accessibility | Kevin M. Coleman  
Location: Mount Laurel  
Redlining Maternal Health: An overview of the lasting impact of historically racist housing policies on the health of birthing people of color in North Carolina | Alyssa Crawford & Ta’Jalik Morgan  
Location: Redbud |
12:15 PM  | Lunch

1:30 PM  | Victor J. Schoenbach Keynote Speaker | Grumman Auditorium  
         | Matiangai Sirleaf, JD  
         | White Health as Global Health

2:15 PM  | Keynote Q&A Session | Grumman Auditorium

2:45 PM  | Exhibitors and Posters | Atrium and Willow Lounge  
         | Exhibitors: Atrium  
         | Posters: Willow Lounge

3:30 PM  | Afternoon Breakout Sessions
         | Disrupt the Status Quo: Mitigating Bias in the Delivery of Menopause Healthcare | Taniqua Miller  
         | Location: Mount Laurel (Virtual Presentation)

         | Eating Right, or the Right to Eat?: Centering Culture, Agency, and Equity in Nutrition | Adante Hart & Jasmine Westbrooks  
         | Location: Dogwood

         | A Community-Based Approach to Addressing HIV and Social Determinants: The ID Youth Council | Judith Rivera, Allysha Maragh-Bass, Orion Chambers, & Eyerys Corely  
         | Location: Sunflower

         | First in Flight: Stop Trying to Fly Unbuilt Planes and Calling It Equity | Cornell P. Wright  
         | Location: Redbud
Note: A gender nonspecific restroom is located on the second floor
Dr. Cynthia R. Greenlee is a historian and journalist based in North Carolina. A former editor at Rewire.News, she is a noted expert on reproductive health, particularly abortion among Black and Southern Americans. Her journalistic work has appeared in publications as diverse as The Atlantic, The New York Times, Smithsonian, Vox, and others. She was the lead editor of “The Echoing Ida Collection,” (Feminist Press), an anthology of Black women and nonbinary writers exploring reproductive and social justice. Dr. Greenlee is a two-time UNC-Chapel Hill graduate with bachelor's degrees in international studies and history as well as a master’s in journalism and mass communication. She earned her PhD at Duke. She is also an alumna of the Morehead Scholars (now Morehead-Cain) program at UNC and a winner of a coveted James Beard Award, the highest honor in American food writing.

In the days before Roe v. Wade, women often crossed many lines to get abortions. They traveled across states and sometimes state lines, and they often traveled across racial boundaries. Pregnant and trying not to be, many white abortion seekers sought out Black abortion providers — some medical professionals and others not — in hopes that those workers were more likely to provide the service and to increase the likelihood of privacy by going to another community. The reality, however, was often quite different — and particularly for Black abortion workers who became dangerously visible when they accepted white clients. In this talk, Dr. Greenlee sheds light on the costs of the illegal era by discussing the cases of two 20th-century Black physicians caught in legal crosshairs. Each wound up in North and South Carolina courts precisely because they were suspected of terminating white pregnancies. Also, each was uniquely vulnerable to prosecution in Jim Crow’s racial state, as one of a few Black doctors operating in their respective spaces and, in one case, due to civil rights activism in the 1950s.

Questions for Keynote Speakers?
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Professor Matiangai Sirleaf is the Nathan Patz Professor of Law at the University of Maryland School of Law. She writes and teaches in the areas of global public health law, public international law, and international human rights law, and researches the disproportionate distribution of highly infectious diseases and the role of international law in facilitating this result. Professor Sirleaf’s scholarly agenda is to make visible the extant hierarchies in international law and to remedy the inequities reflected in it. Professor Sirleaf has received a number of prestigious grants, awards, fellowships, and other honors. These include the University of Pittsburgh Chancellor’s Distinguished Research Award (2019), the American Society of Law, Medicine & Ethics Health Law Scholar Selection (2019), the New York University Martin Luther King, Jr. Humanitarian Award (2014) and a Fulbright Fellowship (2004). A graduate of Yale Law School, the University of Ghana Legon Center for International Affairs, and New York University College of Arts and Sciences, Professor Sirleaf has served in a number of attorney and fellow roles prior to entering academia.

European imperial expansion meant that public health concerns became globalized and required cooperation with other imperial powers for the treatment and prevention of diseases. This lecture will trace the role of race and racism in the development of global public health law. It explores the connections, legacies, vestiges, and important disjunctions between tropical medicine and global public health. This reflection considers the primacy given to White health as one of the animating purposes behind the emergence of the global public health regime. The centrality of protecting the health of White people and interests then and now continues to inform the global health agenda.

These remarks will surface the role of international law through omission and commission in structuring and reifying racialized hierarchies of care and concern. The COVID-19 pandemic has created an opening to not only recognize, but to potentially reshape the relationship between race and global health. This talk will discuss recent efforts at reform and assess whether they provide a path to address past and continuing effects of racism in global public health. It concludes with the hope that burgeoning efforts to decolonize global public health and to address racial inequities will not be ephemeral.
1. Improving Healthcare by Addressing Ableism from an Intersectional Lens
   SPEAKERS: Leah Smith, Rhonda Holliday, & Maureen Van Stone
   LOCATION: Sunflower

2. From Reporting to Supporting: Creating Equitable Futures for All Families
   SPEAKERS: Kamaria Excell & Jasmine Wali
   LOCATION: Dogwood

3. Let’s Talk: Justice, Equity, Diversity, Inclusion, and Accessibility (JEDIA)!
   SPEAKER: Kevin M. Coleman
   LOCATION: Mount Laurel

4. Redlining Maternal Health: An overview of the lasting impact of historically racist housing policies on the health of birthing people of color in North Carolina
   SPEAKERS: Alyssa Crawford & Ta’Jalik Morgan
   LOCATION: Redbud
Disrupt the Status Quo: Mitigating Bias in the Delivery of Menopause Healthcare
SPEAKER: Taniqua Miller
LOCATION: Mount Laurel (Virtual Presentation)

Eating Right, or the Right to Eat? Centering Culture, Agency, and Equity in Nutrition
SPEAKERS: Jasmine Westbrook & Adante Hart
LOCATION: Dogwood

A Community-Based Approach to Addressing HIV and Social Determinants: The ID Youth Council
SPEAKERS: Judith Rivera, Allysha Maragh-Bass, Orion Chambers, & Eyerys Corely
LOCATION: Sunflower

First in Flight: Stop Trying to Fly Unbuilt Planes and Calling It Equity
SPEAKER: Cornell P. Wright
LOCATION: Redbud
As the National Center for Disability, Equity, and Intersectionality, the presenters believe that structural ableism and stigma are some of the biggest healthcare inequities that face people with disabilities, and even more so for those with multiple marginalized identities. Unfortunately, these biased views towards disability are not limited to the healthcare system alone. The presenters will share how access to housing, education, employment, and community living are also drivers of health inequity. In this session, the presenters will address how public health practitioners, policymakers, and healthcare providers can address implicit and explicit bias towards people with disabilities to ensure improved healthcare outcomes and a more accurate perspective on how we perceive quality of life for people with disabilities. Our methodology focuses on the lived experiences of multiply marginalized disabled people. We gain this perspective from our advisory committee and community of practice, which is comprised of a broad spectrum of community members with disabilities that also hold other marginalized identities.
Family separations happen every day in clinics and hospitals; sometimes, newborns are ripped from their parent hours after being born. Implicit and explicit biases inform the practice of mandated reporting, which can trigger these traumatic family separations. In places like New York City, the hospitals with the highest number of reports to child protective services also have the highest rates of Black Maternal mortality. The practice of mandated reporting discourages many patients from feeling safe seeking care, even if they need it, and particularly if they are using substances, creating a culture of fear for both families and providers. Mandated Supporting is a framework that shifts our professions away from positions of surveillance and fear to that of agency and humanity; moves our professions away from responding with punitive measures to reflecting the true responsibility of providers as supporters to the families and communities we serve.
Let’s Talk: Justice, Equity, Diversity, Inclusion, and Accessibility (JEDIA)!

In this very interactive session, attendees will look at Justice, Equity, Diversity, Inclusion, and Accessibility and apply what they learn to work together in a cohesive environment using proven communication and connection strategies. Throughout the session, attendees participate in role-playing using real-life examples to help us recognize our own unconscious bias and how it impacts the organization. These examples will help us consider “How that situation made us feel?” “what you thought about while the situation was happening,” and “what did you learn about yourself and others?”. We will talk about microaggressions and macroaggressions and their impacts on the work environment. You will gain best practices to remove misconceptions and stereotypes and engage in dialogue that will be the catalyst for change and acceptance in this high-octane social unrest environment. You will receive practical tips that will help you handle situations positively and productively.

Speaker: Kevin M. Coleman
Location: Mount Laurel
Policy holds immense power in our society. For many, policy is the difference between thriving and surviving. Unfortunately, much of the policy that has been enacted over time has been quietly disadvantageous for people of color, creating a series of generational domino effects that impact the health outcomes of entire communities. Specifically, the housing policies enacted throughout North Carolina at the start of the 1950s, known widely as “Urban Renewal Programs”, changed the landscape of housing access for Black families. As the government pursued the seizure of land owned by Black families for public development and implemented what is now known as “redlining”, communities of color were pushed into planned communities built to accommodate low-income residents. Oftentimes, land seized was utilized to construct major highways or other transportation infrastructure. This practice erased thriving Black and minority communities from cities like Durham, Greensboro, and Asheville. These communities were often isolated from necessities, such as grocery stores, hospitals, and good schools. Lack of access to nutrient-dense, fresh food, safe housing, quality education, and affordable health care created a cycle of poverty and resulted in persistently poor health outcomes for residents of these communities. Over time, maternal and infant health has suffered, sparking questions about the connection between inequitable Urban Renewal policies, and the health of birthing people of color. This presentation seeks to explore some of these connections and encourage participants to examine how
Disrupt the Status Quo: Mitigating Bias in the Delivery of Menopause Healthcare

Speaker: Taniqua Miller, MD, FACOG, NCMP
Location: Mount Laurel (Virtual Presentation)

Nearly 1.3 million persons in the United States will enter menopause this year. However, equitable management of menopausal symptoms remains a problem. Most notably, African American/Black persons in the United States are less likely to be treated for symptoms that adversely affect their quality of life and have long-standing deleterious consequences on overall health. Implicit bias and racism are well-established factors that contribute to these disparities. In this interactive session, participants will examine the role that implicit bias and racism have on medical outcomes broadly and in the delivery of menopausal care for Black/African American patients. In acknowledging our own implicit biases, participants will then be presented with strategies that they can immediately implement in their practice to disrupt bias in their health practices.
In this session, we will explore various systemic nutrition-related issues that currently exist in the U.S. and their relationship to social determinants of health that disproportionately impact communities of color. We will focus on the value of nutrition programming that is culture-focused, acknowledges existing health inequities, and actively addresses issues of access while emphasizing personal agency and self-sufficiency. Additionally, the session will address personnel issues that contribute to these inequities, namely the fact that only 2.7% of dietitians are African American and only 3% are Hispanic/Latinx. For communities of color, working with dietitians that don’t necessarily model cultural competency and/or humility may cause them to feel that their food and food preferences are misunderstood. This statistic, along with other anecdotal accounts further highlights the need for a more diverse field of nutrition and dietetics. We will highlight examples of effective nutrition programs/interventions, including the programs from EatWell Exchange and Oldways’ “A Taste of African Heritage,” that emphasize culture and heritage and provide evidence that they are positively impacting minority health.
A Community-Based Approach to Addressing HIV and Social Determinants: The ID Youth

The purpose of this presentation is to 1) describe a youth council formed to uplift the needs of BIPOC Queer, trans, and gender non-conforming folx and 2) describe the Council’s work to design community-centered and data-driven interventions to prevent HIV and STDs at the speed of care. The ID Youth Council is a space for BIPOC Queer, trans, and gender non-conforming folx to address HIV, infectious disease, and social determinants in the Durham community. Using the perspective of lived experiences, the group utilizes consensus decision-making in all Council activities.

Speakers: Judith Rivera | Allysha Maragh-Bass, PhD, MPH | Eyerys Corely | Orion Chambers*
Location: Sunflower

*Not pictured
Far too often in public health we hear or use the phrase, “we are flying the plane while building it”. This seems like an appropriate use of resources that are often limited and time-sensitive, causing our systems to act swiftly to address the needs of communities. These systems often place speed above equity and cause further imbalances in communities that are already unstable and fragile. The fact remains that this stance and approach may cause more inequities, especially in Historically Marginalized Populations and Communities by the simple fact that this approach doesn’t allow for those communities to ever gain substantial leverage in addressing systemic and current issues. This presentation looks to explore this flawed ideology and call for more practical approaches to serve our communities so no one must board an unbuilt plane on our journey to achieve and sustain equitable outcomes in health.
Poster Presentations will be held at **Willow Lounge**

**Morning: 10:45 AM - 11:15 AM | Afternoon: 2:45 PM - 3:30 PM**

*Note: Posters will be available to view throughout the day of the conference*

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**A New Life: Exploring Somali Refugee Women’s Maternal Healthcare Experiences in North Carolina**

Mohamed, Amina*, BA, Graduate Student, Gillings School of Global Public Health, MPH, Global Health Concentration

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**A North Carolina Zip Code Specific Analysis of Community and Environmental Social Determinants of Health Variables and Health Outcomes: Mortality and Ambulatory Care Sensitive Conditions**

Alicia Primus*, DHA, MPH, CHES (MUSC), Mary Dooley, PhD (MUSC), Kit Simpson, DrPH (MUSC), and Jiebing, Wen, PhD (MUSC)

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**Agency or not for Sexual Negotiation among young African American women in North Carolina: Context or Communication**

Ekene C. Osakwe* (Duke University, Isa van der Drift (RTI), Claudia Opper (RTI), William Zule (RTI), Felicia A. Browne (RTI), Wendee Wechsberg (RTI)

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**Analyzing Patient Odds of Receiving Dental Care within a Given Year Based on Racial/ Ethnic Background, Poverty Level, and Geographical Information**

Everingham, Hope L.*, Prospective BS & BA, Department of Biology, East Carolina University

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**Assessing and Addressing Access to Sexual Health Preventative Care Among Young African American Women in North Carolina**

Opper, Claudia A.*, BA, RTI International; Browne, Felicia A., ScD, MPH, RTI International, Gillings School of Global Public Health; Bonner, Courtney P., PhD, MS, RTI International, Gillings School of Global Public Health; Ndirangu, Jacqueline, MS, RTI International; Wechsberg, Wendee M., PhD, MS, RTI International, Gillings School of Global Public Health, North Carolina State University, Duke University School of Medicine

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**Centering the Margins: Applying Public Health Critical Race Praxis in Exploring Black Adolescent and Young Adult Fatherhood**

Kiara Hunter*, Undergraduate student, Elon University, Public Health Studies, Dr. Stephanie Baker, Elon University, Public Health Studies

**Community Based Participatory Research: Collaboration Between an Academic and Community Partner to Reduce Gun Violence in Charleston, South Carolina**

Sarah B. Maness*, PhD, MPH Assistant Professor of Public Health College of Charleston; Butch Kennedy, Tri-County Gun Violence Coordinating Council Founder

**Examining HIV Risk and Prevention Strategies in the Arab American Community in the United States**

Syreen Goulmamine*, BS, George Mason University

**Effects of State-Level Unemployment Insurance Accessibility and Policy Features on CVD Rates in the United States**

Phenesse Dunlap*, MPH, Emory University, Melvin Livingston, PhD, Regine Haardoerfer, PhD, Amit Shah, MD, Kelli Komro, PhD

**Making Sense of Medical Gaslighting: A Qualitative Study of the Experiences of BIPOC Women with Health Care Professionals in the United States**

Llanos-Taminez, Simone* & Fair, Cynthia, LCSW, DrPH, Elon University

**Re$ourcing The Village: Using Small Community Engagement Awards to Build African American Commercial Tobacco Control Community Capacity and Power**

Cummings, Camille A.*, BS, African American Tobacco Control Leadership Council, McGruder, Carol, BA, African American Tobacco Control Leadership Council; Burris, Y’Lonn, MPH, African American

**Research Team Perspectives on Engaging Black Patients with Cancer in Biospecimen Research**

Aaron Carpenter*, Hayley Morris, Annabella Opoku, Alison Hilton, Jessica Carda-Auten, Randall Teal, Jeenn A. Barreiro-Rosado*, Lauren Matthews, Oluwatunmilara Akeke, Ashley Rankin Collins, Marjory Charlot

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<td><strong>Self-Rated Health and Limited English Proficiency Among LatinX Young Adults: Mediating and Moderating Factors</strong></td>
<td>Rauh, Carmen*, BS, Duke University School of Medicine; Gonzalez-Guarda, Rosa, PhD, MPH, RN, FAAN, Duke University School of Nursing</td>
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<td><strong>“Simply ask and explain”: Perspectives from Black Patients with Lung Cancer on Strategies to Address Racial Disparities in Biospecimen Research Participation</strong></td>
<td>Jeenn A. Barreiro-Rosado*, Oluwatumilara Akeke, Annabella Opoku, Alison Hilton, Jessica Carda-Auten, Randall Teal, Aaron Carpenter, Hayley Morris, Lauren Matthews, Ashley Rankin Collins, Marjory Charlot.</td>
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<td><strong>Social &amp; Community Barriers to a Breastfeeding Family Friendly Community</strong></td>
<td>Love Anderson*, BS, CHW, CLE, LLL, Board Member of Breastfeeding Family Friendly Communities, Cofounder of Breastfeed Durham</td>
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<tr>
<td><strong>Using Community Advisory Boards to Culturally Tailor Diabetes Outreach Targeting Latino Men</strong></td>
<td>Wade, Jeannette*, PhD, Department of Social Work and Sociology, NC A&amp;T State U/Rivas, Thais, student, Department of Biology, NC A&amp;T State U/Owens, Kennedy, student, Department of Social Work and Sociology, NC A&amp;T State U/ Robinson, Kayliah, student, Department of Social Work and Sociology, NC A&amp;T State U</td>
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