



Shared Mission: Priorities, Practice, and Performance

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ABSTRACT

With funding from the Academic Health Grant, the Loma Linda School of Public Health (SPH) compiled data on multiple projects undertaken in partnership with the San Bernardino County Department of Public Health (DPH) over the past decade. The projects highlighted here, although not exhaustive, document the history and nature of this longstanding relationship. A section on student and alumni case studies offers additional insight into the other aspects and breadth of this collaboration. The value of partnerships between academic and public service institutions clearly resonated through interviews with students, faculty, and community health practitioners in the public sector. Positive outcomes on program evaluations of community-based initiatives, formulated and conducted jointly by the SPH and DPH, further illustrate the many benefits of joining forces. Collaboratives that actively engage academics, public service practitioners, and community residents often boast a great deal of sustainability. Additionally, these partnerships cultivate leadership and teamwork skills essential for propelling students into future public health leadership roles.

I. INTRODUCTION

The efficacy of partnerships between academic and public service health institutions is clearly illustrated in the series of collaborative projects between the Loma Linda University School of Public Health (SPH) and the San Bernardino County Department of Public Health (DPH). In addition to the development of a research- and action-based discourse around disease prevention, assessment, and education, the SPH and DPH have modeled the essence of partnerships in public health research by basing their work on community change and awareness building.

In the 1980's, with the implementation of national Prevention Research Centers that would merge public health research with direct community interests, the call for alliances between public service and academic institutions was imperative. This paradigm shift from isolated think tanks to joint, multi-layered collaboratives effectively paired education with field practice. By integrating research and teaching with mainstream public service, practitioners and academics alike could proffer an efficient, action- and solution-oriented method of confronting health concerns among specific communities.¹

The recent model of “healthy citizen, healthy community” bears heavily on the concept of multi-level communal change, in its facilitation of dialogue and shared decision-making authority among stakeholders in the community, academia, and public service. This is a model with obvious benefits to all parties involved; both public service and academic institutions have a great deal of knowledge to share with each other. Public service institutions like the DPH have access to the health status of communities and jurisdiction over target populations. They are continually monitoring data and activity about disease rates, prevalence, incidence, mortality, and morbidity. In addition, they have the resources and experience to provide superior program evaluation and implementation. Academic institutions like the SPH can provide informed methodologies and complex intervention recommendations based on their research. They also have the ability to conduct further investigations to determine the grounds for specific community health trends and techniques to successfully address these trends. Finally, community involvement ensures a larger overall awareness of the health issues that affect various populations; it not only enables smooth facilitation of dialogue and action with public service and academic institutions, but it also offers an opportunity for sustainable social change by those populations directly affected by the work.

¹ A report published by the Institute of Medicine in 1988, entitled *The Future of Public Health*, pointed to this

The ownership granted to SPH students is especially operative in the collaboration model, which establishes foundational leadership skills for all involved parties. In collaboration with various projects funded by the DPH and research carried out in connection with the DPH, students have industriously participated in internships, professor-led research, community health initiatives, and the development of field practica and dissertations. Many of these projects have resulted in employment with the DPH, thus ensuring a highly trained, knowledgeable, and methodologically adept crop of future leaders.

With projects ranging from diabetes prevention to child safety awareness to addressing health disparities among underserved communities, SPH students and faculty have teamed up with the DPH and organized everything from the compilation and evaluation of data to securing continued funding. The skills and experiences gleaned by SPH students—grantwriting, community mentoring, collaborative learning, sharing findings at esteemed events such as the annual American Public Health Association (APHA) conference, being published in prestigious scientific journals, and administering and implementing community health initiatives from start to finish, to name a few—are demonstrated in the case studies below.

II. COLLABORATIVE PROJECTS

A. Academic Health

The anthology of projects embodied in this document was borne out of a concerted effort between the SPH and DPH to overcome limitations in achieving a mutually beneficial and sustainable relationship between the two agencies. These previously identified obstacles included: 1) the absence of a formal system of engagement between the SPH and DPH, 2) insufficient monetary support for student involvement, and 3) the absence of record keeping which articulate the findings, recommendations, and lessons learned from joint efforts. SPH and DPH staff implemented proactive measures in each domain of concern, which consisted of the construction of a formal system of engagement to facilitate cooperation and collaboration between the DPH and SPH, as well as the establishment of four funded 10-week MPH internships, one 40-week DrPH research project, and a labor pool of 300 student hours allocated as requested by the DPH.

Since funding was procured, James Felton, County DPH Administrator and Juan Carlos Belliard, SPH faculty, attended a meeting sponsored by the Centers for Disease Control and Prevention (CDC) on August 27 of 2004 to inform the CDC of the nature of the relationship and activities associated with the SPH-DPH partnership, and to possibly garner support for additional funding.

i. Families Fighting Diabetes

Latino residents of San Bernardino County have exceptionally high rates of diabetes-related mortality and morbidity. Despite a number of programs set up to address the prevention and control of diabetes, many Latinos face a number of barriers to these services. For instance, Latinos encounter greater limitations to accessing existing services, such as lack of knowledge of their options and available resources in the community. The goal of the Families Fighting Diabetes project was to establish ongoing collaborations between the community and the DPH to create a community-driven program centered on diabetes education and prevention/control. This joint venture was carried out over a six-month period in three distinct phases, ending in September, 2004.

Catherine Oliveros, MPH a doctoral student in Preventive Care at the SPH, was the program's coordinator, and worked under the supervision of DPH Chief of Disease Control and

Prevention and Interim Health Officer for the San Bernardino County of Department of Public Health, Eric Frykman, MD, MPH, MBA. The project was designed to further assess the County's composition and determine where San Bernardino County residents are in terms of diabetes incidence, knowledge, and behavioral lifestyle practices. The DPH, through Loma Linda University, provided technical and educational support for the training of community members and, in collaboration with the Home of Neighborly Services, set up a resource and educational program open to community members.

In Phase One of the Families Fighting Diabetes project, program staff compiled qualitative data on San Bernardino's Latino community through baseline surveys and focus groups designed to assess diabetes knowledge, wellness, preventive practices, and barriers to such. During Phase Two, data obtained from the qualitative analysis provided the County with insight necessary to understand their residents and develop an approach that was culturally appropriate and community-centered. Phase Three involved the implementation of a community-based intervention intended to improve the lives of people with diabetes and aggressively educate the community on risk factors and behaviors that are key for prevention.

ii. Mentoring Pregnant and Parenting Teens

Recent studies have explored the specific relationship between new adolescent mothers and postpartum depression in an attempt to determine whether this age group is at an increased risk for mental illness when compared to their older mothers. Research indicates that adolescent parenting may motivate some young mothers to improve their lifestyles, while for others it may create stress and depression. Frequently agreed upon associations with adolescent pregnancy are abandonment, feeling unprepared to be a parent, isolation, and rejection. Adolescent girls who become pregnant before they reach their full potential height usually become stunted. Due to the rapid growth changes that naturally occur in females during adolescence, the fetus usually becomes malnourished because the mother's body cannot adequately mobilize fat. The fetus also depletes specific maternal nutrient supplies and stores such as iron and calcium respectively. It is because of these health complications that adolescent pregnancy is a major maternal and child health concerns, both nationally and internationally.

For her field practicum, Mildred Leatham, MPH, CHES, served as the Program Planner and developed a grant proposal to fund a mentoring program for pregnant and parenting teens under the direction of Linda Levisen, R.N., M.S., Section Manager of the Perinatal and

Adolescent Life Section (PALS).

Increasing social support can help identify and decrease the occurrence of postpartum depression among parenting adolescents. However, the current literature indicate a lack of social support programs that specifically employ mentorship to pregnant and parenting teens as a means for decreasing the occurrence of postpartum depression among this population. As a result, Leatham's field practicum looked to develop a program that applies mentorship as a means for increasing social support to pregnant and parenting teens in the local community.

iii. Food Security Program

In January of 2004, Jacob Shellman, a Master's level student, initiated the process of establishing a food security program in concert with the DPH Nutrition program. Shellman engaged in community trust-building activities with members of the International Neighborhood Cluster Association, conducted a preliminary asset assessment, and solicited training interests among group members. The Association expressed a strong interest in exploring supplemental income sources, particularly through sales of home-produced goods, ranging from cakes to home garden produce. Shellman will begin exploring legal issues of this venture, such as acquiring a business license, and assisting the group members in identifying the physical resources.

iv. Food Facilities Risk-based Inspection System

Under the guidance of Corwin Porter, MPH, Michelle Hoag, a Master's student, is developing a risk-based inspection system for food facilities for the DPH Environmental Health Division. The inspection of food facilities is a crucial public service to prevent foodborne illnesses among consumers of retail food. A desire to improve the food inspection program in San Bernardino County has led to research concerning risk-based food inspection programs. This research sought to determine how various jurisdictions incorporate risk in their food facility inspection programs and led to the development of a risk-based food inspection program in which food facilities are categorized into high, moderate, and low risk groupings. Food facilities are placed in a risk category based on food property risks, population at risk, food facility history, and food facility operational risks. The risk categorization of food facilities then allows for the determination of the frequency of inspections and permit fee schedules for food facilities based on their placement into a risk category.

The risk-based food inspection program may be applied by various jurisdictions interested in addressing risk in their food safety program or wishing to update their program. Risk can be gauged by several components of the risk-based food inspection program. The developed program includes a risk assessment form that allows jurisdictions to place the food facilities in categories based on risk level. Other aspects of the program include the determination of the frequency of inspection as well as determining the permit fee schedule for food facilities.

v. *Norton Neighborhood Nutrition Network (NNNN)*

The goal of the Norton Neighborhood Nutrition Network (NNNN) is to prevent nutrition related chronic diseases in Spanish-speaking women with children attending schools within the San Bernardino Joint Unified School District. In conjunction with community members, Jeanne Silberstein, MPH, RD, and Sonia J. Vega, and Eddy Jara, MPH, RD, of the DPH Public Health Nutrition Program, identified the behavioral objective for a 2003 campaign of increasing dietary consumption of vegetables by one serving per day. Participatory formative research was conducted to identify campaign strategies, message, and materials that were later piloted with members of the target audience. The lead agency, core group and advocates, or *promotoras*, disseminated messages promoting vegetable consumption through multiple channels, conducted a series of workshops that included nutrition education and vegetable gardening, and facilitated changes in school policy. Campaign evaluation consisted of pre and post intercept surveys, case studies and activity documentation, which revealed an increase in the target behavior and success in identifying policy change goals.

In 2004, Silberstein and Vega later guided the NNNN in applying a program-planning model, the Spectrum of Prevention, to empower Latino mothers in this low-income primarily Spanish-speaking neighborhood to change the school environment and social norms around foods offered to improve health by impacting policies driving food choices in schools. The Spectrum of Prevention includes: strengthening individual knowledge, promoting community education, training/educating providers, fostering coalitions and networks, changing organizational practices, and influencing policy and legislation. The mothers who had been attending parenting, ESL, nutrition and gardening classes sponsored by the district and public health increased their awareness, knowledge and skills about the benefits of growing, preparing and serving nutritious foods to their families at home. Flushed with the success experienced at home in making these changes, the mothers discerned a disconnect between what was taught to them in class and what

was served at their parent meetings and in the school cafeteria. The Latino moms became advocates of healthy eating and physical activity promotion at the school. They advocated for the adoption of the Healthy Food Option Policy, which influenced what is served at parent meetings and sold by the PTA for fundraisers. The Latino moms held the principal accountable to following through on the policy. As a result a decision to sell an alternative item instead of candy for the annual school fundraiser was made by the principal. Lastly, the Latino mothers organized and advocated for the establishment of a salad bar at their children's elementary school despite barriers of space and labor.

B. Healthy Communities Together

In 1995, the California Wellness Foundation awarded a total of \$404,000 over a three-year period to the SPH. The funding was granted to deliver a program to the underserved community surrounding Loma Linda University. The program was coordinated by Patti Herring, PhD, RN, Professor of Health Promotion and Education at the SPH. She was assisted by Cherry Patulot, a Master's degree candidate of Public Health within the Department of Health Promotion and Education, along with many other faculty and students from the SPH. The titles of the four components were: Recipes for a Healthy Family; Healthy Women in Motion; The Healthy Heart Hispanic Cook Book project; and Smart Moves. Recipes for a Healthy Family was headed by Juan Carlos Belliard, PhD, MPH, Assistant Professor of International Health and Director of Students for International Mission Services (SIMS), with the assistance of students from the schools of nursing, dentistry, social work, and public health. The goal of the program was to improve the quality of life for the entire community; participants received support and guidance to empower them with sharp decision-making skills, which they can practice to improve their families' health and wellness. The three other programs are described below:

i. The Healthy Women in Motion Program

The Healthy Women in Motion Program provided a ten-week exercise unit with Latin music and various incentives (e.g.- free shoes, gym socks, redemption vouchers for other California Wellness grant-sponsored activities, health screenings, and medical referrals), located at the SAC-Norton Clinic and directed by community resident Deeya Smith. During its initial phases, the program primarily targeted the Spanish-speaking residents in San Bernardino County Norton neighborhoods. However, over time and development of the program, the name was changed from “Hispanic Aerobics Class and Hispanic Music Aerobic Exercise Program” to “Healthy Women in Motion,” to include every female resident of the community without being ethnically exclusive. The change in name had a positive outcome, increasing attendance and morale among participants and creating an atmosphere of solidarity and enjoyment, as well as building a stronger community.

In addition to the change in the program’s name, there were also changes in leadership. The planning phase was directed by Herring, who recruited Master’s level candidates in Public Health to conduct comprehensive needs assessments and Knowledge, Attitude, and Practice (KAP) surveys before establishing guidelines and policies for the program. The implementation portion of the program was first directed by Marianne Torchia-Mason, MPH, who also adopted the role of aerobics class instructor; and later, by Michele Can Wormer, MPH.

Three community members who started as participants in the exercise classes volunteered to join an aerobics training program in order to conduct their own classes, which encouraged the vital need for community involvement and leadership and would provide future sustainability for the program.

This program has documented much success, showing the positive impact the program has had on the participants. There has been increased health-related knowledge and self-esteem, weight loss, the development of new friendships and support networks, and a high turnout of new participants at the end of every session.

ii. The Healthy Healing Hispanic Cook Book

The Healthy Healing Hispanic Cook Book was an idea introduced by Maximo A. Mejia, DrPH, MA, a Seventh-Day Adventist pastor who wanted to share knowledge regarding diet and its effects on health, and provide people with necessary information about nutrition and cooking skills. With generous funding and support from the California Wellness Foundation and many

colleagues at Loma Linda University, Dr. Mejia became a nutrition and cooking instructor in the Hispanic community. He shared many culturally appropriate recipes that included ingredients and preparation styles familiar to the population he was serving. Dr. Mejia developed a training curriculum and conducted training seminars for Hispanic peer nutrition instructors within the community so that they, in turn, could train others in their church or community-based groups.

The goals of the program were to empower the volunteer team to develop a culturally relevant cookbook; prepare healthy and culturally acceptable foods and reach out to their communities with nutrition education to reduce the incidence of preventable nutrition-related diseases. Due to its success in recruitment, the program far surpassed its goal of training 20 peer nutrition educators and now has 42 graduates and continues to generate interest from new participants at the end of every session.

The Healthy Healing Hispanic Cook Book continuously undergoes revisions by a committee of peer nutrition instructors representing 12 Latin American countries, a number of islands in the Caribbean, and the United States. The final edition will comprise a key tool used by trainers to promote nutrition and healthy eating in targeted communities.

iii. Smart Moves

Smart Moves is a free program that offers weekly activities, nutrition guidance, and weight management. The program draws on the increased distress around childhood obesity and the decrease in the nutritional status of children. These dilemmas drew Ella Hasso-Haddad, DrPH, Associate Professor in the SPH Nutrition Department, to become involved in the Smart Moves program to offer her extensive experience in the primary prevention of childhood obesity and research on dietary fats and obesity. .

The adolescent weight loss program is free of charge and offered by Loma Linda University's Nutrition Department and the San Bernardino County Child Health and Disability Prevention (CHDP) division of the DPH.² The objectives of the program are to increase nutritional status by consuming fruits and vegetables and low-fat or non-fat milk and foods; increase physical activity; increase self-esteem and self-motivation; and offer instruction on meal planning, eating on the go, self-control flexibility, healthy bodies, the importance of breakfast, and taking pulse rates. There have been many benefits in implementing the program for both adolescent participants as well as Master's candidates in Public Health in the Nutrition and Health

Promotion and Education departments. Due to the success of the program, a new component was added, providing individual intervention and counseling to youth and their parents.

C. Geographic Information Systems (GIS)

Geographic Information Systems (GIS) is a cutting edge technology that's widely applicable to the improvement of public health practices. GIS is an agglomeration of computer hardware and software that is used to store, update, analyze, display, and manipulate all forms of geographic location. Typically used for representing maps as layers of data that can be studied and used for performing analyses, GIS has become a major component of progressive public health practices. Because it offers a simplified means of managing spatial information on habitats, resources, and the environment, it is an excellent tool for development planning and environmental monitoring. In the context of public health practices, GIS offers an efficient method of collecting and presenting data on large populations, how they live, who they are, and what their health needs may be. The ultimate goal of collecting such data is finding optimal solutions for public health problems in the communities under examination.

The SPH has recognized the need for building a comprehensive program for this widely growing technology, and is the only school in the nation to offer a Bachelor of Science degree of public health in Health Geographics.³ The program is meant to introduce the benefits of GIS to both health practitioners and those who are still in training.

Samuel Soret, PhD, is director of the GIS Programs, whose research has involved the application of spatial analysis and GIS technology in public and environmental health, namely with the GIS regional modeling of air pollutants and the spatial analysis of infant mortality rates using GIS technology. His other roles at LLU include Assistant Professor at the School of Public Health and Assistant Professor in preventive medicine at the Loma Linda School of Medicine. His research interests include the application of spatial analysis and GIS technology in public and environmental health, namely with the GIS regional modeling of air pollutants, and the spatial analysis of infant mortality rates using GIS technology. Soret shared some of his expertise on the place of technology in public health when he served as one of four featured panelists for a continuing education course in 2000 entitled "GIS in Public Health: Using Mapping and Spatial

² It has been implemented at the SAC-Norton Clinic and local public schools, targeting youth ages 13-17.

³ The school recently added a certificate in Health Geoinformatics in addition to a new learning lab that will be used

Analysis Technologies for Health Protection.” The course was beamed by satellite and co-sponsored by the CDC and the Agency for Toxic Substances and Disease Registry. Courses currently taught by Soret include Geographical Techniques for Health and Environmental Analysis (ENVH 557), Outdoor Air Quality and Human Health (ENVH 566), and GIS in Public and Environmental Health (ENVH 437).

Seth Wiafe, MPH, is an alumnus of the SPH and instructor of several GIS courses, including Principles of GIS (ENVH 422/522), GIS Technology and Methods (ENVH 424/524), Practical Issues in GIS (ENVH 423/523), and Seminar in Environmental Health (ENVH 605). Wiafe’s research interests in geoinformatics and related geographic analysis as applied to both public and environmental health, coupled with his extensive GIS training, have helped the SPH stay abreast of such technological advances and valuable public health tools. A scholar who is accredited by the American Council on Education for Public Health, Wiafe also received his BS in Health Geographics from the SPH in 2002 before obtaining his MPH in Environmental and Occupational Health, also from the SPH.

Currently, Wiafe holds a position as a Health and Human Services Solutions Analyst for the Environmental Systems Research Institute (ESRI), the company that oversees the development, testing, and distribution of GIS software. Over the past years, he has introduced aspects of GIS at a host of national and international conferences to enhance public health efforts in areas such as reducing the transmission of HIV/AIDS in South Africa, and improving the kidney transplantation program in the state of California. Wiafe and Soret are currently involved in several projects together, which include constructing and managing the database for the African American Health Initiative (AAHI) Health Planning Project of San Bernardino County, and creating a GIS-based Spatial Decision-Making Support System (SDSS) for the High Blood Pressure Prevention and Control Demonstration Project of San Bernardino County. Their highly specialized knowledge of GIS and demonstrated expertise have made them particularly valuable in the process of seeking optimal community health solutions in the two projects described below:

i. African American Health Initiative Health Planning Project of San Bernardino

The African American Health Initiative (AAHI) is a partnership of the DPH, the San

Bernardino County Medical Society, Inland Wellness Information Network, and over 30 community-based organizations and individuals in San Bernardino County committed to improving the health of African Americans. Through an active Advisory Council, these members form a network of coordinated health services and expertise to effectively address the health disparities among African Americans. The approach used by AAHI is one of collaboration among key stakeholders, representatives of the African American community, public and private medical service providers, local government, and the education community, to develop and implement long-term strategies that address specific gaps and needs within the health delivery system.

Diane Woods, a Preventive Care doctoral candidate at the SPH, is the current director of AAHI. Dr. Herring of the SPH, Preventive Care doctoral student Tamarra Jones, MPH and Ron Graybill, MD, of the Loma Linda University Medical Center, are also active members of AAHI. Representatives serving on AAHI Advisory Council from the San Bernardino County Department of Public Health include: Asuncion Abbott, Heather Goss-Cockerill, MPH, CHES, Teslyn Henry, Michele Jacknik, Eric Frykman, MD, MPH, MBA, Vanessa Long, RN, MSN, Joyce Moore, Joshua Olagunju, PhD, Jeanne Silberstein, Bruce Smith, MD, Jennifer Baptiste-Smith, MPA, Joan Sainthorse, Eugenia Turner, Bernadette Beltran, and Disep Obuge, MPH.

Wiafe and intern Alicia Ibarra Martinez, MPC, of the SPH Department of Environmental and Occupational Health, were recently brought on board by members of the AAHI to assist in the completion of their database construction and management. The task involves the creation and maintenance of a geodatabase designed to identify all current prevention and treatment services, as well as programs and providers relative to heart disease, high blood pressure, breast and prostate cancers, and HIV/AIDS in San Bernardino County. The geodatabase was built using datasets containing over 300 surveys, best practice recommendations, healthcare providers in the County, demographic information, and basemaps. Available data was consolidated into GIS.

The first data batch of the project was received in April, 2004, and included demographic information and information about attitudes, prevention, perceptions and treatment, community resources, and patient satisfaction. The data was gathered from 20 cities in the county. Surveys from both key informants and healthcare providers, focus groups, resident interviews, and public forums were components of the data gathering process. Key outcomes in the Database Construction and Management also include system maintenance, the updating of protocols, and the creation of a CD containing the entire database.

In November 2004, AAHI Director Diane Woods presented a paper entitled “Community

Participatory Research: Building Social Ecological Sustainability for Healthier Afrocentric Communities,” which delineated the mixed-methods approach that was utilized in the investigation of the healthcare delivery system in African American communities. Data analysis from GIS revealed that African Americans expressed a desire to be active participants in healthcare decision-making; to have prevention programs that are respectful of personal choice; and to have culturally appropriate quality medical treatment. As a result of this assessment, an Afrocentric countywide strategic plan was developed, which included recommendations for policy change, and especially stressed the viability of community participatory health in creating effective healthcare strategies.

ii. High Blood Pressure Prevention and Control Demonstration

Through funding from The California Endowment, the High Blood Pressure Prevention and Control Demonstration Project was developed in 2001, in partnership with the California Heart Disease and Stroke Prevention (CHDSP) Program of the State Department of Health Services. The project was given \$25,000 to conduct a six-month planning project that would address San Bernardino County’s high rate of heart disease and stroke.

Risk factors around heart disease and stroke include high blood pressure, high cholesterol, tobacco use, and a sedentary lifestyle. From 1996 to 1998, San Bernardino County suffered from the highest age-adjusted heart disease death rate in the state, at 279 deaths per 100,000 (the state rate is 210 deaths per 100,000). The data stirred concern among community groups and leaders, including the African American Health Initiative (AAHI) and the Community Health Coalition (CHC) of San Bernardino County, who are significantly focused on the control and prevention of heart disease and high blood pressure. In partnership with the CHC, the High Blood Pressure Prevention and Control Demonstration Project was created. The project entailed the enhancement of existing educational programs, and also provided blood pressure screenings and services to low-income participants. The project was created to benefit the general public, but focused specifically on African Americans, Latinos, senior citizens, and women, who all have a disproportionate prevalence of high blood pressure.

Sam Soret, Seth Wiafe, and GIS intern and International Health major Chahn Chess consolidated information on health resources in the County into a GIS system in February, 2002. The completion of this asset mapping was instrumental to finding resources that would support

the Project. The GIS team met with the DPH Program Analysis and Statistics Division, the Community Health Coalition of San Bernardino County, the Evaluation & Research Unit of the SPH, and the San Bernardino Geographic Information Management System. With this extensive communication network, the GIS team was able to work in cooperation with various entities in order to make informed mapping decisions.

At the end of February, 2002, the team presented a plan to the Community Health Coalition of San Bernardino County. The plan included the creation of a GIS-based Spatial Decision-Making Support System (SDSS), which would include tools and data for mapping resources in the County. The system would also examine socioeconomic status, age, race/ethnicity, language, level of education, and populations at risk.

In April 2003, the first of six planning phase meetings for the project's advisory committee took place. The 14 members of the advisory committee included the targeted populations. Members issued from the DPH, AAHI, SPH, Inland Empire Health Plan, community-based organizations, and faith-based organizations. The meetings ran through December 2003, resulting in a clear project agenda; best practices, presented by SPH scholar John Kelly, MD, MPH; and a literature review on health intervention effectiveness among African Americans, presented by the AAHI. Throughout the meetings, the committee invited guest speakers to present, and identified collaborative partners in the County and beyond. The committee derived valuable information from target populations through focus groups, community forums, and surveys. In promoting the awareness of high blood pressure, the committee participated in meetings with various entities, including the Molina Healthcare Advisory Committee and the Health Collaboratives of San Bernardino and Riverside Counties.

From March to November, 2003, the GIS Committee, including Wiafe; DPH public service employee Evelyn Trevino, MPH; and Dr. Eric Frykman met and identified cities that were suitable areas in which to implement intervention strategies—primarily for the African American population.

The Project also coordinated a formative research committee that provided valuable input toward developing a community health survey and content questions for focus groups and key informant interviews. With the assistance of Margie Akin, MD, from the Molina Healthcare Advisory Committee, 260 surveys were collected; and focus groups were conducted with the African American and Latino populations.

The implementation phase included: a high blood pressure coordinating team represented

by the African American population and faith-based community; the purchase of materials, including the most recently updated guidelines for hypertension and pre-hypertension blood pressure levels; and an increase in doctors' offices and hospitals as a part of community outreach efforts to increase awareness of the program in the public eye.

D. SAFE KIDS

In an attempt to reduce the number of preventable accidents suffered by San Bernardino County children (as evidenced in reports from 1999 and 2000), the DPH, Loma Linda University Children's Medical Center SAFE KIDS Campaign, the County's Children's Network, and the Inland Empire SAFE KIDS Coalition, in cooperation with other regional organizations, launched a "SAFE KIDS Summer 2001" program. In 1999, at least 591 children in the county suffered serious injuries or death. Each summer, nearly three million children are rushed to emergency rooms for serious injuries from traffic collisions, drownings, bicycle crashes, heat exposure, and other hazards. The campaign attempted to raise awareness on a variety of children's safety issues, such as correct use of child car seats, bicycle helmet use, pedestrian safety, playground equipment safety, and drowning prevention.

The campaign was part of a national SAFE KIDS campaign including the DPH and Loma Linda University Children's Medical Center SAFE KIDS Coalition. Various SPH students completed their field practica in conjunction with their work for the County campaign, which further enabled the strategic implementation of child protection programs in the community. Rhonda Lee, under the supervision of Connie Cunningham, RN, MS, developed the curriculum for the SAFE KIDS project by implementing a safety program in community schools from March to June, 1998. Nima Abraham-Zadel, also under Cunningham's supervision, developed a program on safety education involving proper bicycle helmet use that was successfully conducted in various schools in the County. The work in San Bernardino County has also extended to other counties. Most recently, Kimberley Patrick, the Inland Empire SAFE KIDS Coordinator at Loma Linda University Children's Medical Center, and Kristin Goffman, Program Coordinator with Injury Prevention Services for the Riverside County Public Health Department, presented at the Partners in Prevention 2004 Conference. Their presentation was entitled "Riverside County Submersion Incident Reporting System" and showcased a new data collection project, including a training video and checklist for first responders.

E. First 5 of San Bernardino

The First 5 of San Bernardino Program, created in December, 1998, by the Children and Families Commission for San Bernardino County, was established to combat two basic issues faced within San Bernardino County: putting in place efforts to help decrease ill effects on children, from the prenatal stage to the age of five, who were not achieving the proper maturation of brain development; and intervening in the lives of young children to significantly impact their physical, social, and mental growth, in keeping with Loma Linda University's mission of healthy human development. First 5 of San Bernardino's contracted service agencies boast a number of success stories that illustrate the impact of their work on the community, including the Safety Angels free car seat safety distribution program, which instructs families on how to correctly use and install child restraint devices in their automobiles. Another successful program is the Chaffey Joint Union High School District Valley View Infant Center, which offers parenting education and medical services to teen mothers and fathers, and fosters well-being and awareness of issues affecting young parents.

Susanne Montgomery, PhD, MPH, Professor of Health Promotion and Education, and Preventive Medicine Director at Loma Linda University Center for Health Research, led a systematic needs assessment to better understand if the funding given by First 5 was meeting the needs of children and their families. The work was conducted in association with the Department of Health Promotion and Education, Evaluation and Research Unit at the SPH. Leandra Peters of the Evaluation and Research Unit served as a consultant on the project and developed the parent survey, which was distributed to key informants. Graduate student Julie Pham was an Assistant Qualitative Research Director for the First 5 Qualitative Needs Assessment. Preventive Care doctoral student Heather Diaz, MPH was a project director and researcher on this consultant team. Esther Suarez and Janisse Maxwell, MPH students, also worked as research assistants.

The team presented their findings at the American Public Health Association (APHA) conference this year and in 2003. They were part of a strategic process in January, 2003, to identify outcome indicators that would measure and appraise the needs of families and children ages 0-5. Six advisory teams identified key informants to assess perceived needs of the target population, with 18 focus groups, 72 key informant interviews, and more than 500 surveys. Final results will help to assist more informed policy recommendations to guide the Proposition 10

Commission's allotment of future funds.

In 2004, the team presented at the APHA and Children Network conferences on the need for empowering, focused service delivery for families in San Bernardino County, based on their county-wide assessment in February, 2003, which was aimed to identify needs in four key areas: child health; child development; family functioning; and school readiness. They discovered that parents need more assistance in being prepared and informed, as well as more health care services that are culturally competent and supportive. Increased awareness around the issues, as well as empowerment techniques associated with delivering the services, was also needed, since access and understanding of the services by families were limited. Like many of the collaborative projects already mentioned, First 5 has been a prime site for the field practica of SPH students like Vicki Walker, who, through the DPH and under Elaine Fleming, MPH, examined the barriers to the implementation of a 5-a-day workshop in public schools. Her data collection and analyses were compiled from March to July, 2002, and December, 2002.

F. People and Communities Changing Tomorrow (imPACCT)

The People and Communities Changing Tomorrow (imPACCT) project involved Susanne Montgomery, PhD, MPH, Ron Graybill, MD, student Ivy Lewis, Preventive Care doctoral student Heather Diaz, MPH, Janet Flores, MPH, and Master's student in International Health Sharon Rushing, MPH from the SPH Department of Health Promotion and Education. The project applied four programs for teens and parents within San Bernardino, with the collaboration of area non-profit organizations: Latina Youth Diabetes Project; Peer Factor; Building Bridges; Alliance to Opportunity 2002; and the Eco-Elite Neighborhood Youth Empowerment. In 2003, the team presented some of their findings at the national APHA conference.

All four programs found permanent housing in local youth serving agencies, and some continued to receive funding. Significant effects were seen around awareness, future protective behavior intentions, and self-reported risk factors. The use of a community coalition model that involved local organizations directly impacted the youth and their families. In the process, evaluation tools, curriculum guides, materials, and staffing and financial sustainability guidelines were produced. Some of the aforementioned projects affiliated with imPACCT are described below:

i. Latina Youth Diabetes Project (Phase One)

The Latina Youth Diabetes Project, in particular, exemplifies the collaborative nature of imPACCT's project management. As a part of this work, members of the imPACCT team, including Diaz, Montgomery, Herring, student Elizabeth Castillo, and former student Martine Polycarpe, now director of Students for International Service Missions (SIMS), presented steps toward securing a diabetes-free future by examining a primary prevention teen pregnancy empowerment model for high-risk Latinas. In looking at the proliferation of Type 2 diabetes among Latina youth, and its contribution to increased morbidity and mortality, it is clear that prevention models are key in San Bernardino County, where Latina teen pregnancy rates are also soaring. In the Summer of 2002, a pilot intervention was conducted in San Bernardino County. Funded by the Centers for Disease Control and Prevention (CDC), the project indirectly addressed issues of teen pregnancy as an avenue for creating awareness around Type 2 diabetes. Historically, reaching Latina youth through programs like these has proved difficult due to their reluctance to participate in activities that label them as "high risk" for teen pregnancy and chronic health diseases.

During the program, young women enthusiastically received culturally appropriate training on healthy eating, proper weight control, and the overall benefits of healthy lifestyles and behavior. They also participated in a three-day empowerment workshop, which emphasized the importance of pride in one's cultural identity; promoted a healthy body image; and helped them explore their role as women in Latino culture. This portion of their training concluded with individual presentations by the young women, ranging from poetry recitation to a fashion show, where they proudly displayed ethnic garments made from scratch.

As a result of the project's success and its implementation of a family-oriented empowerment model over a high-risk model, the Latina Youth Diabetes Project was re-funded in January, 2004. Program participants were trained to be empowerment leaders and recruited two to three peers to complete the same 20-hour training they initially received. The training was curriculum-based and enabled youth to comprehend the unexpected consequences of risk behaviors; they then made presentations in the respective communities. This sort of community interfacing, while focusing on vital prevention tactics, also triggered a marked interest among community members and led to the development of invaluable leadership skills outside the typical constituents.

i (a). Latina Youth Diabetes Project (Phase Two)

This second phase of the Latina Youth Diabetes Project spread across all strata and closely engaged both academics and students. Under the close supervision of Project Director, Heather Diaz, MPH, Master's level students from the SPH joined the project staff. Yeira Rodriguez, Fermin Fierro, Ana Hernandez, Marlon Minera, Patricia Escobar, and Jarmelle Mathews are SPH students who became involved in the Fall of 2003 through their required enrollment in HPRO 589: Qualitative Research Methods, HPRO 590: Qualitative Research Analysis, and HPRO 537 A&B: Community Programs Lab. These courses, taught by Susanne Montgomery and Patti Herring, enrich students' training in the areas of research, data analysis, and implementation of health promotion programs by allowing students a hands-on opportunity to actualize their ideas. Previously-taught students have designed and evaluated a five-session didactic that followed the three-day empowerment workshop, which was delivered to a new group of high-risk Latina youth. The project was housed at the Boys and Girls Club, under the direction of Clifford Hackney, and supported by imPACCT project funds from the DPH.

Students participated individually and collectively in their selected program. For instance, Yeira Rodriguez, a student pursuing a dual Master's degree in Public Health and Maternal and Child Health, served as secretary and editor for her group and conducted qualitative interviews with health professionals, parents, and minors in the needs assessment phase of the project. Once the needs were determined, she then continued to work with her team to develop a curriculum for the project.

The goal of these students' project was to present young Latinas with a familial history of Type 2 diabetes with preventive educational materials in a creative and interactive manner. In turn, the teens were to present the information they learned to a group of their peers and also serve as *promotoras* in their families and communities. The intervention not only provided the youth with vital educational material but also with encouragement, empowerment, and mentorship skills.

As previously mentioned, a lengthy needs assessment was created along with other documents, such as a comprehensive literature review, detailed plan, evaluation, and final report. The assessment included research that took ethnographic observations into account. Eighteen key informant interviews were also conducted with youth, parents, and professionals; and a focus group with teens supplemented these findings. Through various research methodologies, it was concluded that fear of diabetes and concerns around both body image and weight management

motivated the youth to seek more information.

The implementation portion of the project allowed the group to create a personalized five-session curriculum that covered topics in diabetes, nutrition, reproductive health, fitness, and skill building. The first session, “Diabetes-Free is the Way to Be,” was taught by Ana Hernandez; the second session, “Nutrition 101,” by Patricia Escobar; the third session, “Let’s Talk About Reproductive Health,” by Rodriguez; the fourth session, “Fitness Facts,” by Fermin Fierro; and the final session, “What Does it Take to be a Healthy Me?” was led by Marlon Minera. The five sessions were preceded by the three empowerment and cultural awareness lessons given by Diaz.

Pre- and post-test surveys of the five education sessions revealed that teens demonstrated a 7-84% increase in knowledge of the presented topics. The teens responded favorably to the sessions, and collectively, viewed the workshop on diabetes as the “most important.” The combination of the empowerment and cultural awareness lessons and the five student-run sessions resulted in enhanced knowledge and cognition, as well as positive quality of life (QOL) changes as measured by QOL indicators. Abstracts for the two distinct program components have been accepted for presentation at the 2004 APHA conference in Washington, DC.

ii. Peer Factor

Peer Factor was a pilot project targeted toward at-risk teenagers in San Bernardino County. The program trained teens to disseminate health data to other teens and to develop vital leadership and critical thinking skills around at-risk behaviors such as the consumption of drugs and alcohol, and unsafe sex. From July to September, 2002, project coordinators trained ten County teens to be peer health educators, who then reached another ten teens in the surrounding community. Sharon Rushing, MPH, was Peer Factor’s Project Director. Other project members included Montgomery, Katrina Ball, MPH, and student Ivy Lewis, all from the SPH Department of Health Promotion and Education, Evaluation and Research Unit.

The teenagers underwent 20 hours of training over a three-week period and studied topics such as alcohol, designer drugs, street drugs, STD’s, and parental and peer pressure. The teens were also instructed on how to develop engaging program activities and outreach materials. They were also in charge of planning a “teen health challenge booth” activity at Pharaoh’s Lost Kingdom, a popular entertainment locale for youth. The activity was designed to teach health and behavior issues to participants. The challenge booth consisted of four different activities: STD

Basketball; Hip-Hop Challenge; Rap Challenge; and Intoxicated Barbie. STD Basketball entailed asking participants true or false questions about STD's, having them guess the correct answer, and then letting them shoot a ball through a basket to accumulate points. Hip-Hop Challenge encouraged participation in the other three activities available to teens. Rap challenge allowed participants to use facts about STD's, drugs, and alcohol to create a positive message that they would deliver to teens in the form of a rap song. Intoxicated Barbie had participants wear blindfolds and try to get balloons into bins of water, demonstrating that alcohol consumption, analogous to being blindfolded, impairs motor skills.

Qualitative results demonstrated that peer health educators came away from the experience with a positive outlook and a conviction that they had the power to change their peers' perceptions of at-risk behavior. The peer health educators also displayed an increase in confidence and knowledge of STD's, alcohol, and drugs. Results demonstrated an increase in knowledge by 55.6% to 77.8%, which proved statistically significant in non-parametric Wilcoxon Signed Ranks Tests.

Out of those who participated in the health challenge booth activity, 110 teens asserted that they would recommend the activity to friends and participate in similar future activities. The peer health educators also received multiple requests from community organizations, parents, churches, schools, and other institutions to perform at various functions and receive additional information, such as implementing similar peer health educator programs in their own communities.

ii (a). Peer Factor II

Phase II of the Peer Factor Project was developed in the Summer of 2003, as an extension of the work that was completed the previous year. Peer Factor II provided additional training for five of the original peer health leaders. In this component, teens evaluated the impact of the previous training in their lives, examined retained knowledge, reinforced this knowledge, and recruited and trained an additional three teenagers each. In the focus group that was conducted with the teenagers, it was revealed that the training they received the previous year enabled them to become more aware of their surroundings, choose friends more wisely, improve their self-esteem, and learn things they wouldn't otherwise learn in their schools.

The teenagers' additional training was provided by People's Choice, Incorporated. The 16 teenagers recruited by the peer health leaders were all at-risk youth, primarily from the African American and Latino communities. The peer health leaders utilized a Train the Trainer Model in preparing and presenting topics for their trainees. Each of the five trainers was given a topic to share with their trainees. During the course of the 20-hour training, the peer health leaders fostered an interactive training environment for their peers by using a combination of lectures, skits, role-play activities, and video. Shared testimonials from the trainees demonstrated that the knowledge they gained in this environment affected them profoundly; and in some cases, led to the diminishment of at-risk activities in these teens.

At the end of the training, each trainer was assigned a group of four teens to plan activities at Pharaoh's Lost Kingdom at end, each trainer assigned group of four teens to plan activities for another "teen health challenge booth" at Pharaoh's Lost Kingdom. The activities mirrored the ones from the prior year, but two of the activities underwent name changes: "STD Basketball" became Sports Trivia; and "Intoxicated Barbie" became Topsy Toss. Sixty-one teens participated in the activities and ranged from 11-18 years old. Quantitative results from surveys demonstrated that 95% of the participants would recommend the program to a friend, 97% would participate in similar future activities, and 87% would use the information they learned for future decision-making.

In assessing the Train the Trainer Model used by the peer health leaders, it was indicated that 94% of the trainers and trainees felt they knew the health issues enough to teach their peers; and over 90% of the trainers expressed an increase in confidence after providing training to their peers.

iii. Eco-Elite Neighborhood Youth Empowerment

The Eco-Elite Youth Empowerment program was launched in July, 2002, and is directed by Ron Graybill, MD, Community Outreach Coordinator for the Loma Linda Medical Center. The program is an after-school collaborative that is part of the Norton Neighborhoods Initiative, also directed by Graybill. The Norton Neighborhoods Initiative is focused on improving the health and quality of life in the San Bernardino and Highland neighborhoods in the County. A part of the Association for Community Health Improvement, the Initiative desists from a needs and deficits assessment of the community it serves, instead focusing on Asset -Based Community Development (ABCD). In building on existing neighborhood networks and skills, the Initiative's programs are culturally and linguistically appropriate and are often directly related to cultural

competence and diversity.

After-school programs such as the Eco-Elite Youth Empowerment program offer tutoring and mentoring, local transportation, food security, and safety. Eco-Elite consists of middle and high school students from the Valley View neighborhood, which comprises approximately 350 households. The program empowers teens to better understand and impact their natural, social, economic, and political environments in order to increase their sense of place, pride, and hope for the future. Some of the ways in which this is done include becoming familiar with the flora and fauna along the Santa Ana River; exploring the history of their neighborhood and the people who live there; learning about child safety and child abuse, and discovering ways to work with the children in their neighborhood; examining potential careers in environmental science, city politics, and health and human services; learning about safety issues related to firearms, automobiles, and CPR; and delving into other subjects that merge from their discovery of their community's ecology. The students in the project are trained to empower their younger peers in getting more involved in accessing city services and impacting their communities. They also learn how to assist their communities in complying with city codes around animal control, safety, and environmental protection; cleaning up the Santa Ana River bottom; creating a Native California Plant garden and discovering the original native uses of these plants; and creating an asset map of their neighborhood. All work is accessible in both Spanish and English.

G. Families Organized for Community Unification and Success (FOCUS)

The Families Organized for Community Unification and Success (FOCUS) project reflects an eight-year collaborative effort between the DPH, Loma Linda University, the San Bernardino City Parks and Recreation Department, the City of San Bernardino Mentoring Program, the San Bernardino Arts Council, and the San Bernardino City Unified School District. In 1996, the Perinatal and Adolescent Life Section (PALS) program office at the DPH was approved for funding from the California Office of Community Challenge Grants (CCG) to implement the FOCUS Project. The project has been coordinated by Karen Zukrow, MSW, and is based out of the PALS office at the DPH.

The mission of the FOCUS project is to collaboratively reduce teen pregnancy through prevention education and youth development activities. FOCUS provides youth programs to promote positive adolescent growth and development, family programs to promote positive interaction, and community programs to provide youth with support and information. The goal is to reduce teen and unplanned pregnancy and to increase parent involvement with their children. FOCUS serves youth 10-17 years old and their families living in the cities of Colton, Highland, Redlands, San Bernardino, and the high desert communities of Victorville and Apple Valley.

The role of the SPH Evaluation and Research Unit, led by Susanne Montgomery, PhD, MPH, was to develop the evaluation piece for the grant proposal; design tools to assess the program's outcomes; collect and analyze the data; and produce written summaries of the results. Janet Flores, MPH and DrPH candidate, is a member of the Evaluation and Research Unit who came on board in the Fall of 1999. Up until 2002, Flores and members of the Evaluation and Research Unit produced quarterly reports to CCG on behalf of the FOCUS Project. For the past year, Disep Obuge, MPH, of the Program Analysis and Statistics Section in the DPH, has been the statistical analyst for the FOCUS project. However, the Evaluation and Research Unit, including Montgomery and Flores, has remained active in the evaluation efforts of the FOCUS Project. The DPH Statistical Analysis Department manages the FOCUS data, maintains the program's database in-house, and conducts outcomes analyses, while Flores interprets the statistical results and summarizes the outcomes with written narrative reports.

The FOCUS Project is delivered through seven subcomponents: FOCUSed Youth; Streetwise to Sex Wise; FOCUSed Youth Arts Residency Program; San Bernardino City

Mentoring Program; After School Youth Development Program; Job Skills Development; and the Parent Involvement Project.

i. FOCUSed Youth

The FOCUSed Youth is a ten-hour youth development curriculum developed by DPH staff targeting 11-14 year old students attending Curtis Middle School in the San Bernardino City Unified School District. The curriculum addresses issues pertinent to adolescence, such as peer pressure, conflict resolution and problem solving, values clarification, self-concept, diversity awareness, interpersonal communication, and outlook to the future.

Program evaluation results for 2003-04 showed that although the FOCUSed Youth participants began with high scores in knowledge of health-related issues and awareness of the fundamental requirements in making healthy and positive life choices, they still experienced gains in these areas. Youth also demonstrated significant improvements in areas of interpersonal communication of feelings, communication with adults, and locus of control over self-improvement.

ii. Streetwise to Sex Wise

Streetwise to Sex Wise provides sex education to high-risk teens attending alternative schools. The instruction is carried out by California State University, San Bernardino social work PALS interns who are supervised by Zukrow.

Sexual attitudes improved following the Streetwise intervention for 23 of the 36 matched participants in the last year. In addition, more students considered birth control the mutual responsibility of sexual partners than did before the intervention. Overall, the *Street Wise* curriculum has proven to have a positive effect on sexual attitudes, beliefs and knowledge.

iii. FOCUSed Youth Arts Residency Program

FOCUSed Youth Arts Residency Program is an innovative program, directed by the Arts Council that connects youth with the arts to improve their self-confidence and promote positive attitudes about the future. Muralists, musicians, writers, photographers, and other artists from the community are invited to serve as *artists in residency* for a six-week period, during which they lead a group of FOCUS students in an intensive art project. Each residency offers secondary

school-aged youth of all ethnicities, opportunities to express themselves through art and to build self-esteem. Past students have painted murals and showcased their writing and dramatic skills.

The FOCUSed Youth Arts Residency Program was associated with a number of statistically significant changes in the youth participants of the program. A comparison of surveys conducted before and after the intervention indicated significant gains in self-concept, self-confidence, positive outlook, and learning about oneself.

iv. The Mentoring Program

The Parks and Recreation Department for the County directs the City of San Bernardino Mentoring Program, in collaboration with FOCUS. High-risk teens ages of 10 and 17 with truancy problems are brought to the attention of social workers, often siblings of PALS participants, through the PALS project and then referred to the mentoring program. The Mentoring Program provides the mentor training, matches the target youth with trained mentors, and tracks, monitors, and supports the mentoring relationships. Over 50 youth have been mentored since the mentoring program was launched. Within the last three years, the mentoring program extended its services to educate the parents of mentees on issues of parenting, wellness, safety, and prevention.

The overall picture of the mentor/mentee relationship is positive, with mentees rating the qualities of youth centeredness, emotional attachment, and satisfaction with these relationships very highly. Mentees perceived their mentors as more engaging over time. Positive changes included higher mentee ratings of self-confidence, and of mentors soliciting mentees' thoughts, inputs, and opinions over time. More parents were reported attending parenting classes at posttest, which attests to the recruitment efforts of the program staff. Mentees' increased ratings of how alike they and their mentors were indicated a deepened understanding of themselves and of their mentors, and pointed to the programmatic successes in matching mentees to mentors.

v. FOCUSed Youth II - After School Youth Development Program

FOCUSed Youth II program was an after-school youth development program held throughout the year at Curtis Middle School. The program includes after-school mini-courses focusing on friendships, conflict resolution, anger management, and communication skills, volunteer activities, and self-improvement support groups for middle school students that promote healthy life choices, and a sense of meaningful community involvement. In the 2003-04 period,

57 students completed 3 hours or more of after-school activities, despite fluctuating and seasonal attendance. Over half of participants achieved a 20% knowledge increase, demonstrating a better grasp of conflict resolution, healthful behaviors, and social relationships.

vi. Job Skills Development

The FOCUS Job Skills Development intervention is a 3-hour career exploration experience that pairs FOCUS youth from community day schools with local business professionals. The purpose of the job skills development intervention is to expose youth to a variety of career options, make youth aware of the importance of education, training, and professionalism to their future employment, and help them to realistically plan to enter the world of work. Alternative school students attending Colton Community Day School and Apple Valley Community Day School were targeted for this intervention.

According to the program's evaluation results for 2003-04, 66% of the matched group reported that career exploration was a positive learning experience for them, reflecting enhanced understanding at posttest of possible future job options, skill requirements, and qualifications for these jobs. Nearly 95% of participants listed appropriate educational objectives for themselves that would prepare them for future employment. Further, participants significantly increased their understanding and awareness of possible future careers, of what people do in the jobs they shadowed, and of what it takes to find a gainful employment.

vii. Parent Involvement Project

The Parent Involvement Project has evolved over the past three years as a vehicle to involve more parents in activities sponsored by FOCUS. The City of San Bernardino Mentoring Program, one of several FOCUS project components, began to offer courses to improve their parenting skills, including teen pregnancy risk reduction; poison control; seat belt safety; and osteoporosis. Qualitative data reveals that both parents and their families have expressed more consciousness about their health and safety, and that gathering together for the courses enabled them to garner support from other parents.

In 2002, Flores, Susanne Montgomery, PhD, MPH, and Amy Binggeli, MPH, RD, CHES, identified barriers to parent involvement in a family support program. During a year-long qualitative evaluation; data from six key informant interviews; data from two focus groups with both youth and parents; and data from Project staff, it was revealed that both parents and youth

seek improved connection and communication with each other, but that pragmatic barriers in parent involvement persist. These barriers exist in family support programs, including those created by FOCUS staff. The Parent Involvement team recommended skills training and support for service providers who are responsible for parent recruitment in inner-city neighborhoods.

The team also examined parental involvement and its effect on teen sexual behaviors. It was discovered that positive parental involvement is instrumental in delaying teen participation in sexual behaviors. The qualitative study included 12 key informant and 2 focus group interviews for teens 14-20 years old, and 13 key informant and 2 focus group interviews for parents 30-48 years old. The study revealed the importance of identifying positive factors of parent involvement in their teens' lives, which is invaluable in public health program planning efforts.

Two focus groups, one in English and one in Spanish, were conducted with parents of mentees through the Mentoring Program to examine parent learning and support outcomes of participants of the parenting education portion of the mentoring program. Salient themes that emerged in the English-language discussion included (1) issues of single mothers and single grandmothers raising children and grandchildren, (2) difficulties finding effective methods of discipline for pre-teen and adolescent children, (3) problems with male children acting out violently at home and at school, (4) domestic violence, and (5) mothers' lack of self-esteem possibly relating to domestic abuse and/or divorce, and (6) difficulties finding the time to enjoy relaxing activities as a single mothers. The second focus group of Spanish-speaking participants revealed that parents had learned a great deal about nutrition the prevention of osteoporosis and cited several examples of how they were making healthier choices at home, such as switching from whole milk to lower fat milk.

After some concern that parent participation and interest was lacking across the existing modalities, project leadership set out to investigate possible causes. The Evaluation and Research Unit coordinated an extensive needs assessment that revealed unexpected findings. More than learning how to reduce their teens' risk for pregnancy, parents were eager to learn how to improve their teens' education and expressed frustration with being unable to navigate the U.S. educational system – a challenge for many immigrant Spanish-speaking families. In response to this important feedback, members of the FOCUS Project and the Evaluation and Research Unit enlisted the help of the Parent Institute, who trained 120 Spanish-speaking parents on how to understand the educational system with a nine-week curriculum. This curriculum defined the role that parents must play in their children's education to ensure academic success in the U.S.,

covering key topics such as interpreting a report card; maximizing meetings with teachers; helping their teen establish a four-year plan for college; and locating finances for college. The Parent Institute demonstrated a marked improvement in parents' knowledge of the educational system and comfort in traversing it to benefit their teens. These well-received steps to engaging parents transcended the major FOCUS modalities.

H. Faith-Based *Promotora* Model for the Reduction of Heart Disease in Latinos

In 2002, Patti Herring, PhD, RN, Susanne Montgomery, PhD, MPH and many of the other SPH students who participated in the impACCT Project's module on diabetes in the Latino community (including Heather Diaz, MPH, and Christy Inskip, BA) further utilized the *Promotora* Model in churches to reach Latinos at high risk for heart disease. These efforts were brought forth as a result of the collaboration between Diaz and Lourdes Vizcaino of the American Heart Association, who were supported by Drs. Herring and Montgomery. This was as a result of past collaborative efforts.

In comparison to Whites and Asian Americans, Latinos tend toward higher rates of heart disease. This project, which was entirely volunteer-based, set out to examine issues related to heart disease prevention among the parishioners of St. Catherine's, a predominantly Latino church community in San Bernardino County. The targeted geographical area ranked sixth in the County for heart-disease-related deaths. The American Heart Association and Pfizer conducted health screenings for cholesterol and hypertension at a health fair that was held at the church. Out of 200 participants, 50% demonstrated high cholesterol and hypertension. This discovery led to collaboration with the SPH, who assessed the needs of the community and ways to reduce high disease risk factors.⁴

SPH staff and students implemented a training and outreach program at St. Catherine's Church. Sonia Vega, MPH, RD, of the Public Health Nutrition Program at the DPH, led a cooking demonstration and disseminated 5-a-Day educational materials to participants. In addition, Vega aided in translating these materials into Spanish.

Topics covered in the training's workshops include nutrition, hypertension, exercise and

⁴ The assessment utilized elements of Social Cognitive Theory and consisted of windshield surveys, 15 key informant interviews, a focus group, and literature reviews. The needs assessment phase of this project was conducted as a

stress, smoking cessation, diabetes, understanding the signs of heart attacks and strokes, and cholesterol reduction. Five to six participants decreased their weight after participating in the program, while others saw reductions in their cholesterol and glucose levels. Twelve participants became *promotoras* in their communities and volunteered for the program, which ended in March, 2004, and was renewed by the American Health Association in June, 2004. One community member, Cecilia Ruiz, was a *promotora* in the first round of the program, and has since been hired by the American Health Association on a part-time basis to help run the program during its current period.

Results from the assessment and training reveal a demonstrable increase in knowledge. It was discovered that the target population revealed a preference for holistic health preferences; and cultural barriers to exercising and eating were also exhibited. The desire for an advisory board and a program based upon the *Promotora* Model, which provides positive reinforcement through social networks and personal relationships, stemmed from the initial analysis of the community. The community's desire for a working knowledge of heart-healthy lifestyles in the context of their lives was presented as a model for future intervention programs targeting similar populations.

I. Diabetes Self-Management for Independent Living Senior Education (S.M.I.L.E.)

The Diabetes Self-Management for Independent Living Senior Education (S.M.I.L.E.) project arose from the need for better self-management of aging African American and Latino diabetics in the city of San Bernardino. The SPH Office of Public Health Practice was granted funding for this project in 2001 by the Association of Schools of Public Health through the Health Resources and Services Administration. Key goals for the project were to provide culturally appropriate health promotion and disease prevention services to underserved African American and Latino seniors with Type 2 diabetes in the city, and to incorporate a model that combined community and university collaboration with service learning opportunities for future public health professionals. Heather Diaz, MPH, was the project director, and worked under the guidance of Patti Herring, PhD, RN, and Susanne Montgomery, PhD, MPH.

The impetus for the project was establishing trust in the African American community. Additionally, many immigrant populations, especially elderly Latinos, display a lack of utilization

of community-based health resources. The project attempted to dissolve these historical barriers and foster community collaboration and trust to improve the quality of life among seniors in the area.

Graduate students in the year-long Community Programs Lab course at the SPH gathered needs assessment data. The course provides crucial methods for planning health education curricula with target populations and evaluating subsequent program impacts. The needs assessment revealed that participants desire information for self-management of diabetes, and also want more information about community resources and required medication assistance. It was qualitatively determined that three independent curricula and health education trainings were necessary to reach the African American and Latino populations in culturally competent ways.

In order to connect the communities with diabetes management resources in their area and to facilitate proper diabetes care, three curriculums were instituted to target specific populations: The Plaza; The Black/African American Health Committee; and Monterey Elementary Parenting Group.

The Plaza is a senior living facility in San Bernardino, with seniors of various nationalities who are afflicted with Type 2 diabetes. The seniors were presented with a series of courses that would help them to identify community resources and receive valuable health guidance.

The Black/African American Health Committee issued from a health committee comprising members of the local Inland Empire Concerned African American Church Consortium (IECAAC). In a Train the Trainer Model, the curriculum instilled valuable health mentorship skills in community members. Curriculum materials included comprehensive health education and computer disks for personal usage and study.

Lastly, the Monterey Elementary Parenting Group included mothers of elementary school children who attend parenting classes at this local school. The program was sponsored by the DPH and included materials in both English and Spanish translation. The group of mothers was chosen due to their previously established family orientation; the women involved stated that, in addition to caring for their young children, they also cared for husbands and aging parents who were afflicted with diabetes. With qualitative evaluation findings from interviews and surveys, it was discovered that the three programs were helpful in allowing participants a down-to-earth and empowering understanding of diabetes management.⁵

⁵ Students from the Community Programs Lab course measured program impact by using a mixed methods approach. An increase in knowledge above the baseline was indicated in their results, and it was demonstrated that 71.4% of

A key impact of the project was the implementation of a service learning and community collaboration model, which engaged graduate students and promoted a community and university partnership. The collaborative also enlisted the expertise of a DPH Advisory Board, including Sonia Vega, MPH, RD, of the DPH Nutrition Department; Eddy Jara, MPH, RD, of the DPH Nutrition Department; and June Hibbard, RN, BS, MPH, the Public Health Manager in the County's Department of Adult and Aging Services. The Advisory Board aided in the identification of community resources and offered valuable guidance in developing curricula and implementing programs.

The partnership model created by the Advisory Board provided crucial opportunities for collaborations on future chronic disease prevention programs. This resulted in a physical office managed and housed in the Office of Public Health Practice at the SPH. Funds from the grant also facilitated the development of a website featuring collaborative past, present and future projects, as well as an on-site location for community members to access university resources.

The largest impact of the project was the partnerships created among the American Heart Association, American Diabetes Association, Inland Empire Concerned African American Church (IECAAC), Community Hospital of San Bernardino, and The Plaza. These alliances served to solidify the partnership between the SPH and DPH, particularly with the Nutrition department, which sustained a close relationship with the DPH. The American Diabetes Association partnered with the Latina Youth Diabetes Project for an extensive year-long health education program.⁶ A program entitled "Working for and With Seniors" was formed for The Plaza. All of the aforementioned projects were accepted for presentation and publication at the APHA conferences in 2003 and 2004.

J. Preventive Care for San Bernardino's Aging Population

Among the academic programs offered by the Health Promotion and Education Department at the SPH is the distinctive Preventive Care doctoral program, whose novel curriculum and approach to training have drawn national attention in public health academia. The program is designed to prepare students in confronting a range of health and lifestyle issues with

program objectives were met.

⁶ See Section F: imPACCT.

a special emphasis on chronic disease prevention. Other components include nutritional assessment, exercise testing, and substance abuse counseling. As the program's coordinator, Edward Fujimoto, DrPH, plays a crucial role in helping to prepare these specialists in wellness and lifestyle intervention. He specializes in health education, preventive care, nutrition, health promotion, and lifestyle medicine. Fujimoto has also been active in furthering research on dioxin, a hormone-disrupting chemical that increases the risk of cancer and other chronic health problems. His research has been aired on various news channels, including FOX and Toronto Television.

In early 2004, the Department of Aging and Adult Services of the DPH awarded \$64,000 to a multi-school collaborative project between the School of Medicine, the School of Pharmacy, and the SPH. Fujimoto and his colleagues, Lee Berk, DrPH, MPH, CHES, FACSM, and Brenda Rea, DrPH, MPT, ACSM, formed part of the SPH-based research team to screen approximately 100 older residents in the previously neglected communities of Trona, Newberry, and Needles. Students and staff from the three LLU schools screened the older adults at multiple senior centers using the Health Age Plus computerized health screening system.

Berk is Associate Director for the Center of Neuroimmunology, as well as Assistant Professor in the Health Promotion and Education department of the SPH. Berk's influential research in psychoneuroimmunology, or mind/body medicine, has received international attention. His research on the impact of mirthful laughter and exercise on neuroendocrine and immune functions has been featured on countless TV shows, including *Good Morning America*, *60 Minutes*, and most recently, *Oprah*.

Rea is Coordinator of the BSPH Wellness Management Program and Assistant Professor in the Health Promotion and Education department. Her research interests include health promotion in physical therapy and dietary analysis and prescription. Rea is a registered dietitian and a Certified Health and Fitness Instructor with more than eight years of personal training experience.

Fujimoto, Berk, and Rea offered their expertise in lifestyle assessment, chronic disease prevention, and health promotion to effectively implement the pilot project. In addition, they coached four Preventive Care doctoral students - Ken Stewart, Anuj Bhatia, Eileen Guerrero, and Heather Diaz - on the proper administration of the Health Age Plus program. Billy Manasseh, a first-year Preventive Care doctoral student, provided further technical training on the special features of the Health Age Plus system to ensure proper inputting and processing of data. This

intricate program incorporates two key components: lifestyle assessment and health screening. The Lifestyle Assessment portion consists of questions on physical activity, smoking, diet, overall happiness, sleep habits, and social support. The Health Screening section evaluates blood pressure, waist girth, percentage of body fat, strength, hand grip, total cholesterol, HDL cholesterol, blood glucose level, aerobic capacity, resting pulse, and heel bone density. Data is entered manually for each participant into the system, which then computes individuals' BMI (body mass index) and produces a "Lifestyle, Health, and Longevity Appraisal" that offers suggestions for modifying key lifestyle factors known to influence health and longevity.

The research team and student volunteers aided the seniors in interpreting their computer-generated output, responded to their questions and concerns, and connected them to needed services through referrals. Although program evaluation results are still in progress, the positive response from seniors and enthusiasm from community leaders have urged the research team to pursue further funding for similar endeavors in these and nearby medically disadvantaged communities.

K. Perinatal and Adolescent Life Services (PALS)

Perinatal and Adolescent Life Services (PALS) is a common site at the DPH that provides students from the SPH with a pivotal opportunity to gain experience during their schooling in the area of maternal and child health. The PALS program was developed after a comprehensive community needs assessment and focus groups were conducted in underserved communities of San Bernardino. The program was directed for almost 20 years by LLU alumna Linda Levisen, MSW, RN, up until her recent retirement, and is now under the direction of Vanessa Long, RN, MSN, program manager of maternal and child health. During her tenure, Levisen served as a member on the SPH Health Promotion and Education Advisory Board for maternal and child health programs. PALS offers high-risk adolescents case management services to provide them with assistance in getting their basic needs met (e.g. food, shelter, clothing). The success of the program has attracted more funding, and the PALS team was able to begin providing support services to adolescent fathers and siblings of pregnant teens. PALS case managers and social workers are also going to local high schools to facilitate education and promotion of positive alternatives and options for youth during lunchtime.

Under the supervision of Andy Ndela, MPH, CHES, student Amanda Frye, who is now

completing a degree in nursing, completed her Public Health field practicum with the PALS program from September to December of 2001. Her responsibilities included the development of key presentations for adult training; she also attended a series of workshops and prepared a comprehensive resource list.⁷

L. Tobacco Use Reduction Now (TURN)

The Tobacco Use Reduction Now (TURN) program provides comprehensive county-wide tobacco control prevention services and education, media campaigns, policy suggestion and implementation, volunteer recruitment, teacher training, sponsorship of community events, toll-free information, a referral hotline, and investigation into the violation of State and County anti-smoking laws.

Eileen Guerrero, a doctoral student in Preventive Care, completed her field practicum for TURN, after which she went on to become a part-time public service employee with the DPH. As part of her practicum, she assisted fellow student Laurie Mazzei and Kay Adkins, MPH, in evaluating smoke-free doorways policy among colleges and trade and vocational schools from April to August of 2003. Her work involved the advocacy and adoption of tobacco policies; developing county-wide comprehensive tobacco control services; and securing funding and support for the updating and adoption of policies in schools.

Over the years, TURN has attracted several SPH student interns including James Jo, who completed his internship in January to March of 1998. Under the supervision of Lilia Fontamillas, MPH, Jo assisted with the project's information booth at health fairs and visited businesses to discuss indoor smoking. In 2002, Fontamillas also supervised another SPH alumnus, Rutsuko Kinjo, who updated TURN's library and helped program staff increase the number of offices in the region. Student Laurie Mazzei, under Kay Adkins, MPH, disseminated educational material to the public and conducted workshops on smoking prevention in the workplace, and helped enforce the California Smoke-Free Workplace law.⁸

M. Winter 2004 Public Health Seminar

⁷ See Section IV: Field Practica.

⁸ See Section IV: Field Practica.

Several DPH employees spoke at the Winter 2004 Public Health Seminar. The quarter long seminar was designed to calibrate SPH students to goals, objectives and realities of life at the county DPH. Approximately 75 students attended each session.

- ◆ January 6, 2004 - Eric Frykman, Health Officer, “Everything you wanted to know about the Health Department but were afraid to ask.”
- ◆ January 13, 2004 - Allison Rue, Epidemiologist, “Public health disease control”
- ◆ January 20, 2004 - Alex Taylor, HIV/AIDS Program Manager, “ HIV/AIDS in San Bernardino”
- ◆ January 27, 2004 Scott Rose, REHS, DPH Environmental Health Specialist, “Food and housing issues in San Bernardino”
- ◆ February 9, 2004 - Joe Krygier, Supervising Environmental Health Specialist, Vector Control, “Vector control: West Nile and Hanta Virus”.
- ◆ February 16, 2004 - Betsy Cline, Public Health Manager, Women, Infants, and Children Nutrition Program, “Issues and efforts in San Bernardino”
- ◆ March 2, 2003 - Thomas Prendergast, M.D. MPH, Health Officer (ret), “Advice from the front lines in public health”.

The following DPH employees have faculty appointments with the SPH:

- ◆ Carol J. Abiden, B.S. - Assistant Clinical Professor of Nutrition
- ◆ Eric Frykman, M.D., MPH - Assistant Clinical Professor of Environmental Health
- ◆ Lorrie L. Hinkleman, Dr.PH - Assistant Clinical Professor of Nutrition & Health Promotion
- ◆ Michele A Jacknik, M.S., Assistant Clinical Professor of Health Promotion & Education
- ◆ Marilyn Kraft, MBA, REHS - Assistant Clinical Professor of Environmental Health
- ◆ Linda L. Levisen, M.S.N., Assistant Clinical Professor of Health Promotion & Education
- ◆ Corwin Porter, MPH, REHS - Assistant Clinical Professor of Environmental Health

- ◆ Thomas Prendergast, M.D., MPH, Associate Clinical Professor of Epidemiology
- ◆ Bruce E. Smith, M.D., MPH Assistant Clinical Professor of International Health

III. BUILDING FUTURE LEADERS: Student and Alumni Case Studies

The DPH employees, whose case studies are presented below, all have one thing in common – they are current students or alumni of the SPH. Their stories epitomize the value of academic and public health service partnerships. For these individuals, the early adoption of research and leadership roles with the DPH through field placements by the SPH proved to be an important conduit toward future employment with the DPH.

A. Rebecca Nanyonjo

Prior to becoming a Public Health Epidemiologist in 2002 in the AIDS/STD Control Program, and more recently, a Supervising Epidemiologist, Rebecca Nanyonjo was a public service employee (PSE) with the DPH for 13 months. During that time she assisted epidemiologists with the investigation and reporting of HIV/AIDS cases, running various epidemiologic reports, helping with several projects, such as the “Get Tested!” Project sponsored by the California Department of Health Services and offering her assistance with the 2000 Annual AIDS Report. Her time spent as a PSE met the field practicum requirements for her pursuit of a dual Master’s degree, in Epidemiology and International Health. As an epidemiologist, she has been responsible for working more collaboratively with different disciplines within the program; such as running data requests for the community, running internal reports necessary for grants, presentations and pamphlet material and project coordination for various assignments.

In fulfilling her field practicum requirement, Nanyonjo analyzed a previously administered survey to examine why certain subgroups did not take precautions when engaging in risky sexual practices. Using a cross-sectional study design, a convenience sample of all participants from San Bernardino County STD clinics was studied to test the survey instrument, KABB—Knowledge, Attitude, Beliefs and Behaviors—used in 1998. The KABB survey consisted of questions relating to practices and behaviors deemed risky in contracting HIV/AIDS or sexually transmitted diseases. Another objective of the survey was to gather information on beliefs and whether certain factors placed an individual at high risk, low risk, or no risk at all.⁹

Nanyonjo is currently a candidate for the doctorate in Preventive Care at the SPH, in the

⁹ See Section IV: Field Practica.

Department of Health Promotion and Education. Her projected dissertation will involve a secondary analysis of infant cohort data collected by the California Department of Vital Statistics. Nanyonjo is occasionally invited to present at the SPH weekly seminars alongside health education staff, and give presentations for Jayakaran Job's EPDM 544 course, Epidemiology of Infectious Diseases.

B. Anuj Bhatia

Anuj Bhatia, now a doctoral candidate in the Preventive Care program at the SPH, completed 400 hours in the Department of Epidemiology/Bioterrorism as a student intern, where he worked under the supervision of Dr. Geneva Sagun, a public health epidemiologist, and Dr. Alison Rue, a public health epidemiologist and Program Coordinator for the BioTerrorism/Infectious Diseases program. Since his field practicum placement, Bhatia has transitioned to a full-time public service employee, where he is involved in data entry, investigating minor outbreaks, and helping to develop various databases for these outbreaks. Bhatia's investigations have included following a questionnaire protocol and interviewing people afflicted by the disease in question, as well as professionals who are involved in treatment and identification of the illness after an outbreak.

Bhatia has worked on the enhanced surveillance project at the Route 66 Convention in San Bernardino County, distributing to and collecting questionnaires from various emergency rooms in hospitals across the County, as well as monitoring the hospitals in their respective emergency rooms and interviewing patients in the waiting room. In addition, he volunteered on behalf of the DPH for those displaced by the fires that occurred in the Fall of 2003 in the County. Bhatia and his colleagues traveled to the old airport hangars where displaced families and individuals were being housed, and updated medical records for the public health nurses on duty. They also helped organize these records into a system where the nurses could easily access them. In addition, Bhatia worked with the Health Age Plus program, under Edward Fujimoto, DrPH, funded by the Department of Aging and Adult Services DPH Grant. Bhatia aided staff and LLU faculty from the School of Medicine, School of Pharmacy, and the SPH in screening senior citizens in neglected San Bernardino County communities. Bhatia also attended various lectures

and workshops, such as the Epi Exchange of Southern California, and Standardized Emergency Management System lectures.¹⁰

C. Stephen Nozaki

A 2003 alumnus of the SPH, Nozaki worked as a Public Health Epidemiologist in the DPH AIDS/STD Control Programs from January, 2001 through July, 2004, leaving the department to pursue dentistry back at Loma Linda University in the Fall of 2004.

For his required field practicum for the MPH in Epidemiology, Nozaki worked on the “Get Tested!” Chlamydia Screening Study. The study was conducted in two parts from April, 2001 through September, 2001, and then received new funding from October, 2001 through March, 2002. The goal of this cross-sectional study was to assess the prevalence of *C trachomatis* and *N gonorrhea* infections and identify predictor variables among wards of the court in an attempt to initiate routine screening of sexually transmitted infections.¹¹

One thousand consecutive admissions to juvenile hall were screened by a health services assistant for *C trachomatis* (Chlamydia) and *N gonorrhea* (gonorrhea). *C trachomatis* infected 9% (93) of the juveniles screened, and 88% of this number were asymptomatic. *N gonorrhea* infected 2% (16) of the juveniles. Thirty-three percent of the youth had received medical care in the past 12 months from the juvenile justice system, but purportedly without receiving routine screening for *C trachomatis* and *N gonorrhea*, which must be incorporated into care standards for incarcerated young people.

While at the DPH, Nozaki has promulgated the mentorship tradition between the SPH and DPH; where he supervised James Lee, a student intern from the SPH from January through September, 2003. Lee is now starting his second year of dental school. While at the DPH, Lee assisted the epidemiologists with reporting HIV/AIDS and incorporating data entry into the state-run sentinel surveillance study. Lee also kept a running log of lab results, which included viral loads and CD4 counts/percentages.

¹⁰ The Epi Exchange brings together epidemiologists from across southern California to discuss current topics in epidemiology, including the spread or condition of various diseases, new breakthroughs in conducting Syndromic Surveillance, and cases of specific diseases that impact the way in which epidemiology protocols are conducted. The conference is coordinated by all southern California university Epidemiology departments, although conference organizers have regularly been meeting in the Orange County headquarters.

D. Eileen Guerrero

Eileen Guerrero, a doctoral student in Preventive Care at the SPH, completed her field practicum with the Tobacco Use Reduction Now (TURN) program at the DPH from April to August 2003. Under the guidance of Kay Adkins, MPH, she participated in advocacy activities to advocate for the adoption of smoke-free doorway policies in colleges and trade and vocational schools.¹²

When Guerrero's practicum was completed, she was hired as a public service employee to help complete the activities of TURN's objectives for the 2001-2004 Scope of Work. Namely, this focused on charting secondhand smoke exposure among patients in San Bernardino County, which ensured an increase in physicians advising and promoting smoking cessation services for their patients. Currently, Guerrero is working toward meeting an objective for the 2004-2007 Scope of Work, which projects that by June 30, 2007, a minimum of two key organizations, golf tournaments, fairs, cultural or community events in San Bernardino County will adopt and implement a policy to ban tobacco company sponsorship. Guerrero is also aiding her colleagues in promoting a 25% increase in compliance with smoke-free bars in three cities within the County by June 30, 2007.

Guerrero's duties with TURN include responding to community requests for tobacco prevention education presentations or health fairs. While her colleagues have extensive community connections and experience with community health advocacy, Guerrero's training in program evaluation and research brings a different vantage point to the program. In the next year, Guerrero hopes to establish relationships with Asian and Pacific Islander community organizations in San Bernardino, who remain demonstrably absent as target groups for community health outreach efforts.

E. Corwin Porter

Corwin Porter, MPH, a Supervising Environmental Health Specialist with the DPH, earned his Master's degree in 2001 from the SPH with a dual concentration in Environmental

¹¹ See Section IV: Field Practica.

Health and Epidemiology. In 1999, Porter selected the DPH Division of Environmental Health Services to complete his required Master's field practicum, which focused on food-borne illness outbreak investigations.¹³ He later used findings and presentations from this project to train students and EHS staff on the correct procedures for handling a food-borne illness outbreak. Currently, Porter also teaches a course at SPH, ENVH 515 Food Quality Assurance in the Environmental and Occupational Health Program, for Dr. David Dyjack.

Following the tradition of mentorship, Porter currently oversees the work of two SPH interns, Michelle Hoag and Jovianne Lewis, who came on board in June of 2004. Hoag's project involves the risk-based food inspection and grading of food facilities, while Lewis' tasks center on the testing swimming pools for harmful chemicals.

Porter's committee memberships include the International Association for Food Protection and the California Environmental Health Association. On occasion, Porter delivers lectures to community groups, such as restaurant operators and chambers of commerce. Annually, he delivers one-hour lectures at the SPH on how environmental health functions help protect the public's health, for Jayakaran Job's EPDM 544 course on Epidemiology of Infectious Diseases.

F. Bruce Smith

Bruce Smith, MD, MPH, an alumnus of the Loma Linda School of Medicine and SPH is the Medical Director of Maternal and Child Health at the DPH. In 1994, Smith helped form a coalition of health professionals from several institutions interested in encouraging lactation to promote, protect, and preserve breastfeeding throughout the Inland Empire. In addition, Smith is one of several DPH leaders actively engaged in the African American Health Initiative (AAHI), a network of health service providers and community members committed to improving the health of African Americans in the County.

Smith has been an avid supporter of student training for the SPH for several decades. For instance, he coordinates an annual one-day visit for undergraduate SPH students to the DPH to learn about public health and the functions of the department. Smith is also a regular guest lecturer for the MCH Epidemiology course, and currently serves on the community advisory board for the department of Global Health at the SPH. Furthermore, he has facilitated numerous

¹² See Section IV: Field Practica.

¹³ See Section IV: Field Practica.

SPH student field placements, oftentimes taking students under his own wing, including Kofi Adade-Boafo, whose project assessed the effects of social support on infant mortality from August 1997 to March 1998; Carolyn Melcher, on a breast-feeding research project entitled “Investing in the Infrastructure” from March 1998 to May, 1999; and Tonya Howard-Taylor, who helped devise a model in 1994/1995 for reducing fetal lead poisoning in pregnant women seeking prenatal care from the DPH.

The School of Public Health is considered the Department of Community Medicine at the Medical School, and medical students are required to complete half-day “selectives” in diverse areas ranging from restaurant inspection to HIV clinics. Smith is responsible for overseeing the selection of public health courses for medical students. In order to pass the selective portion of Ambulatory and Community Medicine, students must complete: two Public Health selectives; one Community Health selective; one other Health selective; one Physical Medicine and Rehabilitation selective; one Dermatology selective, and two other selectives from any area.

Public Health selectives include Epidemiology, HIV, Immunizations, STD/TB Clinic, Environmental Health, and Food and Waste Inspection. As part of the epidemiology selective, students’ objectives are to understand the role of a county epidemiologist, basic disease surveillance systems, and important factors in acute disease outbreaks. The HIV/STD clinic selective presents students with an overview of the clinical and legal procedures for diagnosing, treating, tracking, and reporting HIV and common STD’s. The Immunizations selective is designed to help students understand the principles of “catch up” immunizations, the economics of immunizations, and the recommended pediatric and adult immunization schedules. Students at the TB clinic learn about the recommendations for positive PPD treatment and its eradication.

Community Health Services selectives include Disability Care, Home Health, Hospice, Food Kitchen, Nutrition, Pharmacy Outpatient, and 12-Step Programs. Home Health’s objectives are to: understand the basic principles of home visiting; understand the full range of services available through home health; and understand the funding mechanisms behind home health. In Nutrition courses, students: review basic caloric requirements and food categories; understand the basic principles of nutrition counseling; and acquire at least four focused tools for nutrition counseling. The 12-Step Programs courses enable students to: understand the variety of 12-Step groups and programs available; review the 12 steps and understand their underlying philosophy; and list at least four tools used to acquire and maintain sobriety.

Other Health Services courses include Alcohol Treatment Unit, Complementary and Alternative Medicine, Health Care Administration, Health and the Media, Health and the Law, Occupational Medicine, Prison Health, and School Health.

G. Eric Frykman

Eric Frykman, MD, MPH, MBA, has been the Chief of Disease Control and Prevention for the DPH since June 2001 and is currently serving as Interim Health Officer for the County of San Bernardino. He has been actively involved in the development of local response plans for bioterrorism and the local prevention of further threats to the public health. Frykman graduated from the Loma Linda School of Medicine in 1996, and completed his MPH in International Health from the SPH in 1999.

Frykman completed his Master's field practicum with the Social Action Community Health System (SACHS) Stop Smoking Program, which serves an impoverished area in San Bernardino County. Frykman conducted a survey to determine why the program been plagued by low attendance and retention. He combined his survey results with previously collected demographic and smoking-related data to perform the analyses. Apparent from the results was that the surveyed group, mostly White females, did not reflect the general SACHS patient population, comprised mostly Hispanic females. Analyses also revealed that components most desired were group support, stress management, and medication access. Frykman suggested that the program place an emphasis on increasing intra-clinic marketing and word-of-mouth advertising to increase Hispanic attendance.

Key projects that Frykman has worked on include the 2001-2002 "Madhu" project on childhood anemia; the Fall of 2001 Migrant Farm Worker Project; the Fall of 2001 assessment of high-risk pregnancies; the 1998 STD section on analyzing data for 1997-1998 6C/Chlor; and his 1998 work on communicable disease reporting while he was a resident at the DPH.

IV. FIELD PRACTICA

The Master's field practicum is the apex of a student's educational experience and demonstrates both the research skills and the practical knowledge accrued by the student during his or her residence at Loma Linda University. A list of SPH students and their respective field practicum projects over the last decade, conducted in collaboration with the DPH, can be found below. The range of subjects covered by the students attests to the diversity of knowledge garnered and put to use through the practical application of research methods and community-oriented solutions. The students, with the mentorship of SPH educators and DPH officials, conducted their projects competently and thoroughly, oftentimes discovering creative solutions to community health predicaments and going on to tender their services in both the private and public sectors.

BioStatistics & Epidemiology Department

Field Practicum Coordinator: John W. Morgan, MPH, DrPH

- **Francois, Marie-France Noel**, “Assessment of Factors Related to Patient Satisfaction”; Advisor: Jayakaran Job, MBBS, MD, DrPH (Department of Global Health)
Francois conducted an assessment of factors related to patient satisfaction at the maternal Health Program of the DPH. She used a convergent assessment strategy to improve the program's prenatal care delivery system.
- **Hubbard, Glenda, RN**, “Investigation of a Cluster of Chronic Fatigue Syndrome”; April, 1996
Hubbard's study was conducted in association with the DPH to examine a cluster of cases of chronic fatigue syndrome (CFS) at the University of Redlands. She determined that various conditions, including sarcoidosis, a recent history of substance abuse, and irritable bowel syndrome, can all contribute to CFS symptoms.
- **Matsuo, Tsuyoshi**, “An Analysis of the Women, Infants and Children (WIC) Participant Satisfaction Survey Data for June, 1999”; March, 2000; Advisor: Kristian Lindsted, PhD (Department of Environmental and Occupational Health)
Matsuo conducted a survey in June, 1999, to assess levels of satisfaction among patients with the Women, Infants and Children (WIC) branch of the DPH. Surveys in both English

and Spanish were distributed to 15 County clinics.

- **Nagakawa, I. Sharon**, “Descriptive Study of Gastroschisis Cases and Incidence in Riverside and San Bernardino Counties, 1985-1995”; December, 1999; Advisor: John W. Morgan, DrPH (Department of Epidemiology & BioStatistics)

In this study, Nagakawa determined the distribution and demographic characteristics of gastroschisis cases from 1985 through 1995 in Riverside and San Bernardino Counties. The study suggests that the condition occurs in young mothers of low socioeconomic status, marking an urgent need for early prenatal care.

- **Nanyonjo, Rebecca**, “A Survey Analysis of Knowledge, Attitudes, Beliefs and Practices Among San Bernardino Public Health STD Clinics”; July, 2003; Advisors: Kristian Lindsted, PhD (Department of Environmental and Occupational Health), Jayakaran Job, MBBS, MD, DrPH (Department of Global Health)

In association with the DPH, Nanyonjo helped analyze a survey in their Public Health clinic in an attempt to delineate the reasons for the observed increase in sexually transmitted diseases in the County, specifically HIV/AIDS.

Nozaki, Stephen, “ ‘Get Tested!’ Chlamydia Screening Study”; September, 2001, March, 2002
In this project, conducted in two parts, Nozaki studied the prevalence of C trachomatis and N gonorrhea infections. He also aided in the identification of predictor variables among wards of the court in order to initiate a routine screening of STD’s among this population.

- **Porter, Corwin**, “Analysis of a Food-Borne Illness Outbreak in San Bernardino County”; June, 2000

Porter formed part of the research team at the DPH Division of Environmental Health and Epidemiology that investigated an outbreak in the County. The study investigated a suspected common source outbreak of Norwalk-like viruses, known to play a significant role in food-borne illness outbreaks.

- **Sherwin, Jon C.**, “Summary of Field Practical Work Completed at San Bernardino County Department of Public Health”; November, 1993; Advisor: John W. Morgan, DrPH (Department of BioStatistics and Epidemiology)

Sherwin’s field practicum involved participation in various projects, including the investigation of Shigella outbreak in the high desert; the investigation of food-borne illnesses at a local hospital and a wedding reception; and a database cleaning for the AIDS Surveillance Program at the DPH.

- **Tan, Magdalene**, “Job Satisfaction and Self-Esteem in Public Elementary School Teachers”; 1995

Tan’s study examined the relationship between job satisfaction and self-esteem among public elementary school teachers in order to determine work factors that enhance teachers’ self-esteem.

Environmental and Occupational Health

- **Soyoung Han, Theresa**, “Will the Implementation of Electronic Data Transfer (EDT)/Write-On Program Increase the Efficiency of Water Quality Monitoring System for San Bernardino County Environmental Health, Safe Drinking Water Program?”; June, 1997; Supervisors: Dick Hornby and Scott Rose, San Bernardino County Department of Public Health, Environmental Health Sciences Unit

In this study, Han attempted to increase the efficiency of the County’s water quality monitoring system by implementing EDT/Write-On between the labs and County, and reducing the paper trail and number of key strokes in manual entry of the water quality data.

- **Howard-Taylor, Tonya**, “Low Level Lead Exposures in San Bernardino County Women”; June, 2002; Supervisors: Bruce Smith, MD, Thomas Pendergast, MD, Terri Carlson, MPH, San Bernardino County Department of Public Health

This study devised a model for 752 pregnant women seeking prenatal care from the DPH during 1994 and 1995, who were examined for blood lead levels to undercut fetal lead poisoning, which has been shown to have deleterious effects on cognitive function and blood pressure.

- **Porter, Corwin**, “Analysis of a Food-Borne Illness Outbreak in San Bernardino County”; June, 2000

Porter formed part of the research team at the DPH Division of Environmental Health and Epidemiology that investigated an outbreak in the County. The study investigated a suspected common source outbreak of Norwalk-like viruses, known to play a significant role in food-borne illness outbreaks.

Global Health Department (formerly International Health Department)

- **Chess, Chahn**, “Synthesizing African Dance and Nutrition Together: To Combat Obesity in the African American Community of San Bernardino and Rialto, California”; June, 2003; Advisor: Emmanuel Rudatsikira, MD, MPH (Department of Global Health); Supervisors: Jeanne Silverstein, San Bernardino County Department of Public Health; Reverend Broncia Martindale

In this project, the Families of African American Ancestry manifesting our Excellence (FAME) program was synthesized to respond to the challenge of decreased African American health in the County. The program promoted increased physical activity levels and nutrition, and developed a community-based social marketing plan to guide project implementation.

- **Gourlay, Alison**, “HIV/AIDS Prevention and Education”; June, 1995; Advisors: Gordon Buhler; Supervisor: Christine Leon, University of California, Irvine (UCI)

Gourlay’s practicum involved working on an HIV/AIDS prevention and education program at the UCI. Her internship consisted of three projects: Sexual Health Focus Group; AIDS Walk; and Speakers Bureau, which all enabled her to reach various underserved minority groups with outreach information.

- **Jara, Eddy, RD**, “Goal for Health Nutrition and Fitness Project”; March, 1997; Advisors: Juan Carlos Belliard, PhD, MPH (Departments of Global Health, Environmental and Occupational Health), Elaine Fleming, MPH (Department of Nutrition); Supervisor: Robin Ronkes, MPH, RD, San Bernardino County Department of Public Health, Nutrition Program

In this project, Jara functioned as the Project Coordinator for the Goal for Health: Nutrition and Fitness Project. The Project’s goal was to promote physical activity and optimal nutrition of low-income youth participating in the Colton Youth Soccer Organization (CYSO).

- **Patrick Munongo, Kalenga**, “Client-Centered Care for STD’s and HIV/AIDS Patients in San Bernardino County”; November, 2003; Advisors: Juan Carlos Belliard, PhD, MPH (Departments of Global Health, Environmental and Occupational Health) Emmanuel Rudatsikira, MD, MPH (Department of Global Health); Supervisor: Melissa German, HES I, San Bernardino County Department of Public Health

This project examined the County’s comprehensive care outreach efforts in the County’s AIDS/STD control program. Munongo examined the County’s effort to reach

impoverished populations, and also disseminated information on modes of transmission and prevention of the diseases.

- **Nanyonjo, Rebecca**, “A Survey Analysis of Knowledge, Attitudes, Beliefs and Practices Among San Bernardino Public Health STD Clinics”; July, 2003; Advisors: Kristian Lindsted, PhD (Department of Environmental and Occupational Health), Jayakaran Job, MBBS, MD, DrPH (Department of Global Health)

In association with the DPH, Nanyonjo helped analyze a survey in their Public Health clinic in an attempt to delineate the reasons for the observed increase in sexually transmitted diseases in the County, specifically HIV/AIDS.

- **Nkemdilim Ogbueze, Kenneth**, “Interagency Guidelines for the Surveillance of Rodent-borne Pathogens”; August, 2002; Advisor: Jayakaran Job, MBBS, MD, DrPH, (Department of Global Health), David Dyjack, DrPH, CIH (Department of Environmental and Occupational Health); Supervisors: J.W. Wekesa, PhD, Chris Nwadike, REHS II, San Bernardino County Division of Environmental Health, Vector Control Program

This project examined the establishment of proactive operational-based surveillance as well as response levels of action to alleviate the health impact of rodent-borne pathogens (hantavirus and plague) both nationally and internationally.

Health Administration Department:

Field Practicum Coordinator: Eric Anderson, PhD, MBA

- **Cockerill-Goss, Heather**, “Programmatic Analysis of the San Bernardino County STD Control Program Clinic”; June, 2003; Advisor: S. Eric Anderson, PhD, MBA (Department of Health Administration); Supervisor: Alexander F. Taylor, MPH, San Bernardino County Department of Public Health Epidemiology Department

In this project, Cockerill conducted a patient study time flow to identify and recommend strategies for improving clinic efficiency, and recognizing and eliminating unnecessary resources and expenses.

Health Promotion & Education Department

Field Practicum Coordinator: Naomi N. Modeste, DrPH, CHES

- **Omolara Akinpelu, Oluwatoyin**, “Sudden Infant Death Syndrome (SIDS) Study”;

December, 2000; Supervisor: Terri Carlson, MPH, San Bernardino County Department of Public Health, Program Analysis Section

Akinpelu's field practicum was developed from work at the Program Analysis and Statistic section of the DPH. In this project, Akinpelu investigated the possible association between infant deaths from SIDS and the previous contact of their parents with the Criminal Justice System of San Bernardino County.

- **Frye, Amanda**, "Perinatal and Adolescent Life Section (PALS) Youth Development Study"; December, 2001; Supervisor: Andy Ndela, MPH, CHES, San Bernardino County Department of Public Health, Perinatal and Adolescent Life Section (PALS)

Frye worked with the Perinatal and Adolescent Life Section (PALS) of the DPH to develop teaching competency in health education. Frye co-facilitated health education classes emphasizing youth development for teens and adults in school and community settings, with themes including sex education for high-risk youth.

- **Guerrero, Eileen**, "Advocacy and Adoption of Tobacco Policies," August, 2003; Supervisor: Kay Adkins, MPH, San Bernardino County Department of Public Health Tobacco Use Reduction Now (TURN)

Guerrero worked with the DPH-sponsored Tobacco Use Reduction Now (TURN) Young Adults Crushing Tobacco Appeal Project (YACTAP) in targeting young adults ages 18-24 attending colleges, trade, vocational and adult schools.

- **Hackett, Yvonne Rene**, "Health Promotion and Education Materials Development"; June 2000; Supervisor: Carol Abadin, MPH, San Bernardino County Department of Public Health, Women, Infants and Children (WIC) Program

Hackett focused on increasing the knowledge of specific nutrients among the County's Women, Infants and Children (WIC) branch by making changes to the well-known "Food Guide Pyramid" developed by the U.S. Department of Agriculture and the Food and Drug Administration.

- **Hernandez, Sara**, "Childhood Lead Poisoning Prevention Program"; March, 2002; Supervisor: Micki Spencer, MPH, San Bernardino County Department of Public Health, Child and Adolescent Health Program

Hernandez worked in the DPH Child and Adolescent Health Program and studied services provided by the Childhood Lead Poisoning Prevention Program (CLPPP). Hernandez also participated in case management, environmental follow-up investigations, and health

education.

- **Mazzei, Laura**, “Tobacco Use Reduction Now (TURN) Program,” December, 2001; Supervisor: Kay Adkins, MPH, San Bernardino County Department of Public Health, Tobacco Use Reduction Now (TURN)

Mazzei worked with the DPH-sponsored Tobacco Use Reduction Now (TURN) program in enforcing the California Smoke-Free Workplace Law and educating the public about the health ramifications of smoking tobacco.

- **Mickens, Astrid D.**, “Child Health Disability and Prevention Program”; July, 2002; Supervisor: Marcela Aguirre, MPH, San Bernardino County Department of Public Health, Child and Adolescent Health Program

Mickens was involved with the DPH Child and Adolescent Health Program in providing medical screening and preventive health services designed for the early detection and treatment of potentially disabling conditions to children and youth throughout the County.

- **Walker, Vicki I., RD**, “Eat Your Way to 5 a Day: Barriers to Implementing A Voluntary Nutrition Education Program”; December, 2002; Advisor: Elaine Fleming, MPH (Department of Nutrition)

In this study, Walker helped determine the barriers to implementing a voluntary nutrition education program in fourth and fifth grade classrooms in San Bernardino County public schools. She used questionnaires and interviews to examine key beliefs among teachers and health administrators.

Nutrition Department

Field Practicum Coordinator: Elaine Fleming, DrPH(c), MPH, RD

- **al-Dandachi, Lara**, “An Overview of a Community Internship at the San Bernardino County Department of Public Health Nutrition Services”; August, 2003

In this project, al-Dandachi worked with the Child Health and Disability Prevention Program (CHDP), and researched, wrote, and developed educational materials for physicians and their patients on the topic of the link between teenagers and calcium intake. She also wrote four position papers on maternal health and drug abuse, alcohol, and smoking and breastfeeding.

- **Aldaz, Vanessa**, “Medical Nutrition Therapy Resource Guide: A Supplement to Women, Infants and Children Program (WIC)”; March, 2004

Aldaz worked on the Medical Nutrition Therapy (MNT) Resource Guide, a list of healthcare providers within the County that have access to a Registered Dietician (RD) and/or lack access to this type of healthcare professional.

- **Bui, Tuyen (Rick)**, “Women, Infants and Children (WIC) Anemia Prevention Program”; May, 1996

Bui worked with the Special Food Program for Women, Infants and Children (WIC) to address the problem of anemia and the WIC population. An anemia lesson plan was developed and implemented in five WIC clinics in the County.

- **Hall, Felicia P.**, “Thrifty Meal Plan & Health Education”; November, 1999; Supervisor: Paula de Silva, RD, MPH, San Bernardino County Department of Public Health, Thrifty Meal Plan Project (TMPP)

Hall worked with the DPH Thrifty Meal Plan Project (TMPP) to devise a menu and recipes and to generate the shopping list. This packet then acted as a resource guide to help families plan their meals and give them an opportunity to learn about proper nutrition.

- **Henry, Teslyn**, “The Legacy Cookbook: A Tool for Behavior Change”; November, 1999

The broad goal of this project was to decrease the number of deaths within the African American community due to diet-related diseases. The Legacy Cookbook was developed as a culturally appropriate intervention tool to provide African American families with skills needed to make better nutrition choices.

- **Hwang, Sophie J.**, “The Goal for Health Nutrition and Fitness Project”

This project promoted optimal nutrition and physical fitness of low-income Latino youth participating in Colton Youth Soccer Organization (CYSO). Hwang’s field practicum including organizing an annual play day; editing and producing a “Goal for Health” newsletter; developing materials for a Physical Education class; writing a Workshop Lesson Plan for team mothers and coaches; and writing a recipe guide for children and parents.

- **Korsvall, Melissa**, “5-a-Day Power Play! Campaign”

The aim of Korsvall’s project was to encourage children ages 9-10 to eat a minimum of five servings of fruits and vegetables per day, and to raise nutritional awareness and encourage low-income children to develop healthy eating habits. Korsvall used a variety of games and activities to reach the children through schools, community youth organizations, farmers’ markets, and supermarkets.

- **Martono, Yolanda N.**, “Community-Based Social Marketing Norton Neighborhoods Nutrition Network (CBSM/NNNN)”;

July, 2002
Martono worked with the DPH Nutrition Services in collaboration with other agencies that launched the CBSM/NNNN to foster nutrition and health education among Spanish-speaking mothers who are WIC participants with school-age children attending Monterey Elementary School in east San Bernardino.

- **Peters, Heba**, “Aerobic Program for Latino Women”;

May, 2003
Peters worked with this program to help reduce the incidence of chronic diseases due to obesity among Latino women in Monterey Elementary School in east San Bernardino, by providing nutrition education and school gardening for one year.

- **Pinge, Pallavi**, “Pamphlet Project”;

December, 1998
In this project, Pinge helped create products for the California Nutrition Network that promote low-cost healthy eating and physical activity. Pinge’s project also included documentation of products, documentation of taste testing, and documentation of target populations.

- **Sassower, Barbara**, “San Bernardino County Nutrition Curriculum for Middle School”;

March, 1996
In this project, Sassower worked with the DPH Goal for Health Nutrition and Fitness Project, and developed a nutrition curriculum for the eight grade math and science classes

at Colton Middle School, which was piloted in April, 1996.

- **Dilip Shah, Neha**, “Worksite Wellness”; September, 2003

Shah completed the majority of her practicum with the 5-a-Day Power Play! Program to develop nutrition policy tools that would promote their Worksite Wellness program, which would implement a positive health culture in the worksite and aid to the overall improvement of work community health.

- **Skoretz, Chantelle**, “Organizational Profile of San Bernardino County of Public Health Nutrition Program”; September, 2003

Skoretz worked with the Nutrition program of the DPH to understand the organization structure and system of public health; enhance learning about various public health agencies; interact with a range of health professionals; observe nutrition-related programs, and be aware of the policies and regulations of the organization.

- **Srisa-Ard, Tosaporn**, “5-a-Day Power Play! Program Planning”; September, 2000

Srisa-Ard worked on this statewide nutrition initiative in implementing the program in two schools similar in demographic and socioeconomic status. Results and scientific studies were then used to support the benefits of adequate fruits, fruit juices, and vegetable consumption.

- **Swanson, Deborah**, “Anemia Reduction in San Bernardino County: An Education Program”; July, 1999

Swanson helped to create an education program that would contribute to reducing the incidence of anemia in children less than five years of age in the county. She created an outline and draft of six lessons, each based on the Health Belief Model of Health Education, that were implemented in 2000.

- **Vincent, Patricia**, “Building Childhood Immunity”; December, 1997

Vincent’s project including educating parents of WIC participants on the importance of immunizations and good nutrition in order to prevent childhood diseases. This was accomplished by presenting a class to WIC participants and establishing immunization protocols.

- **Windsor, Cindy**, “Development of a Visioning Tool for Public Health Departments”; January, 1997

In this product, in collaboration with the Nutrition program of the DPH, Windsor helped to create a tool investigating the strengths, weakness, and values of the organization and to

determine a vision statement in order to more efficiently secure grant monies.

- **Wolf, Pamela**, “Jax’s Market Service Deli Intervention: An Ecological Approach”

In this project, Wolf worked with the DPH and California Nutrition Network (CNN) to increase nutritional awareness, education, and low-fat food choices among Jax’s customers. A goal and non-goal based evaluative process was then used to assess the efficacy of this intervention.

V. SUMMARY

The faculty of the Loma Linda School of Public Health (SPH) and public service employees of the San Bernardino County Department of Public Health (DPH) have recognized the many benefits of their partnership in various collaborative projects, which have demonstrated several ways of ensuring project sustainability in the community and promoting further collaborations (e.g., inviting DPH speakers to lecture at seminars, or supporting field practicum placements at the DPH). One of the greatest strengths of such a partnership is the collaborative cross-training that occurs between research institutions, equipped with sophisticated methodologies and assessment practices, and public service institutions, who have extensive demographic information at their disposal and continuously monitor such data to scrutinize trends and rates of prevalence. In addition to providing a solid foundation for training students (e.g. with the development of field practica and internships in association with the DPH and other community organizations), it has been demonstrated that SPH students who are involved in this partnership are likely to take on important leadership and policy roles later in their careers.

Additionally, the partnership between the SPH and DPH has resulted in the implementation of policies that support community participatory health. This non-hierarchical model of community health planning, when effected by both research institutions and public agencies, provides a viable means of sustainability and programmatic success, as evinced in the aforementioned examples. Over the years, the partnership between the SPH and DPH has gained in momentum and become influential in securing funding for various collaborative projects and tightening the gap between public health practice and education. Therefore, the ability to sustain an open dialogue and foster enduring alliances with each other is essential for both the SPH and DPH.

VI. ACKNOWLEDGMENTS

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VII. APPENDICES

A. Collaborative Projects

Project	Key Players	Project Input	Results	Impact/Benefits
Academic Health – Families Fighting Diabetes 2004	DPH; SPH/Preventive Care doctoral student; Home of Neighborly Services	Analysis of County composition; community surveys; technical and educational support for community organizations	Created a community-driven resource program to enhance diabetes education, prevention, and control	Expected benefits include increased access to and better coordination of existing diabetes education, prevention, and management services
Academic Health – Mentoring Pregnant and Parenting Teens 2004	DPH/Perinatal and Adolescent Life Section (PALS); SPH student intern	Literature review; needs assessment	Submitted program proposal	Social support offered through proposed program is expected to decrease depression in adolescent mothers
Academic Health – Food Security Program 2004	DPH Nutrition Program; SPH student intern; International Neighborhood Cluster Association	Conducted preliminary asset assessment; explored use of supplemental income sources; researched logistics of program implementation	Garnered support and identified potential mechanisms for establishing the food security program	The program will help reduce food insecurity in vulnerable SB County residents, such as home-bound seniors
Academic Health – Food Facilities Risk-based Inspection System 2004	DPH Environmental Health Division; SPH student intern	Evaluated methods used by jurisdictions to incorporate risk	Implemented risk-based food inspection program	Facilitates the determination of frequency of inspections by DPH and permits fee schedules, which enhance the surveillance of food-borne illnesses
Academic Health – Norton Neighborhood Nutrition Network 2004	DPH/Public Health Nutrition; SPH faculty and nutrition students	Participatory formative research; piloted campaign strategies; pre and post intercept surveys; case studies; activity documentation; application of the Spectrum of Prevention program planning model	<i>Promotoras</i> disseminated messages promoting vegetable consumption, conducted a series of nutrition workshops, vegetable gardening, and facilitated changes in school policy	Increased consumption of vegetables and empowered low-income Latino mothers to advocate for policy changes in the San Bernardino Joint Unified School District to reduce nutrition related chronic diseases
Healthy Communities	Faculty and students from	Comprehensive needs	Ten-week exercise unity with	Community members benefited from

Project	Key Players	Project Input	Results	Impact/Benefits
Together – Healthy Women in Motion 1995-present	SPH/Health Education and Promotion and SPH/Nutrition; SAC Norton Clinic	assessments; Knowledge, Attitude, and Practice surveys	Latin music and various incentives	increased morale and atmosphere of solidarity and community building, opportunities for leadership, increased health-related knowledge and weight loss
Healthy Communities Together – The Healthy Heart Hispanic Cook Book 1995-present	SPH/Nutrition alumnus and faculty members	Developed training curriculum; conducted training seminars for peer nutrition instructors	Developed culturally relevant cookbook; implemented successful and comprehensive peer nutrition educator program	Community members benefited from nutrition education and opportunity to be health advocates directly in their communities
Healthy Communities Together – Smart Moves 1995-present	DPH/Division of Child Health and Disability Prevention; SPH/Nutrition faculty	Objectives to improve nutritional status, physical activity; self-esteem and self-motivation	Education on meal planning, healthy bodies, importance of breakfast, and pulse rates; provided individualized intervention and counseling to youth and parents on weight management; held weekly activities	Community members benefited from increased self-esteem, motivation, and nutritional guidance
African American Health Initiative (Geodatabase); 2003 - present	DPH; SPH/Environmental Health faculty; SPH GIS Lab; SPH Preventive Care doctoral students; School of Medicine; community organizations; faith-based organizations	Development/maintenance of geodatabase, identifying prevention/treatment services; interviews with key informants; best practice recommendations; consolidation into GIS system; data collection on attitudes, perception, and treatment	CD of database created and disseminated to identify resources for African Americans with health problems; Afrocentric county-wide strategic plan for healthcare access developed	African Americans benefited from information on programs/providers relative to heart disease, high blood pressure, breast and prostate cancers, and HIV/AIDS; faculty and students benefited from community enrichment practices and leadership roles
High Blood Pressure Control and Prevention Project 2001-2003	DPH; SPH/Environmental Health faculty and students; SPH GIS Lab; community organizations; faith-based organizations	Asset mapping with GIS; consolidation of health resources into GIS; SDSS (Spatial Decision-Making Support System); focus groups; community forums; surveys	Identification of best practices; enhanced existing programs; provided blood pressure screenings/service to low-income participants; literature review on health intervention; high blood pressure coordinating team conducted outreach in community;	African Americans, Latinos, women, and senior citizens especially benefited from increased information about resources in the community and increased services/education; other organizations benefited from partnering with other organizations and creating valuable allies

Project	Key Players	Project Input	Results	Impact/Benefits
			purchase of materials	
Safe Kids 2001 Campaign 1998-2001	DPH; SPH/ Health Promotion and Education faculty and students; community organizations	Curriculum development for safety in community schools; safety education for community	Raised awareness about children's safety issues; strategic implementation of child protection programs in community; presentations at national conferences	Community members with young children improved in their awareness of safety issues for children
First 5 of San Bernardino 1998-present	SPH/Health Promotion and Education faculty and students; Children and Families Commission of San Bernardino	Identification of key informants; identification of outcome indicators; county-wide needs assessments; evaluation of culturally competent health services; interviews, surveys and focus groups; examination of program implementations	Free car seat distribution program; parenting services to teen mothers and fathers; presentation at APHA conference	Community families benefited from various programs offered to develop awareness around health issues; students benefited from in-depth project analysis; DPH benefited from understanding need for culturally competent programs
ImPACCT – Latina Youth Diabetes Project 2002-2004	DPH Perinatal and Adolescent Life Services (PALS); SPH/ Health Promotion and Education faculty and students; American Diabetes Association; Boys and Girls Club	Curriculum-based training models developed; prevention models assessed; qualitative interviews and focus groups; needs assessment	Pilot intervention to train young Latinas; curriculum guides; literature review; final report; workshops conducted by students for Latina youth; presented at APHA conference	Latina youth benefited from encouragement, empowerment, mentorship; students benefited from in-depth project analysis and leadership training
ImPACCT – Peer Factor July-September, 2002; July-September, 2003	SPH/ Health Promotion and Education faculty; students; People's Choice, Inc.	Trained youth on at-risk behaviors; qualitative interviews and surveys	Teen Health Challenge Booth led by teen peer health leaders; presented at APHA conference	Peer educators benefited from increased knowledge, confidence, and leadership skills; youth served by challenge booth benefited from increased awareness of at-

Project	Key Players	Project Input	Results	Impact/Benefits
				risk behaviors
ImPACCT – Eco-Elite Neighborhood Youth Empowerment 2002-present	SPH/ Health Promotion and Education faculty; Association for Community Health Improvement; Norton Neighborhoods Initiative	Trained youth to become familiar with natural, social, economic, and political environments through exploring ecology, exploring their neighborhoods, working with children, creating asset maps, and job shadowing	Asset-based Community Development after-school program; presented at APHA conference	Youth benefited from increased knowledge of their ecological environments through education activity, increased awareness of their communities and mentorship on how they can directly impact their surroundings
FOCUS Project – FOCUSed Youth 1996-present	DPH Perinatal and Adolescent Life Services (PALS); SPH/ Health Promotion and Education staff and student interns; SPH Evaluation and Research Unit; Curtis Middle School	Selected core concepts for curriculum; teacher involvement; pre/posttest evaluation on matched participants	Enacted 10-hr youth curriculum for 11-14 year-olds covering problem-solving, communication with adults, and peer pressure	Youth at Curtis Middle School experienced gains in knowledge on health-related issues and awareness of making positive life choices
FOCUS Project – Streetwise to Sexwise 1996-present	DPH Perinatal and Adolescent Life Services (PALS); SPH/ Health Promotion and Education staff and student interns; SPH Evaluation and Research Unit; alternative schools; California State University, San Bernardino	Pre/posttest evaluation on matched participants	Educated teens at risk for pregnancy or STD's on sexual attitudes and birth control	The program has proven to have a positive effect on sexual attitudes, beliefs, and knowledge in at-risk youth in participating alternative schools
FOCUS Project – Arts Residency Program 1996-present	DPH Perinatal and Adolescent Life Services (PALS); SPH/ Health Promotion and Education	Pre/posttest evaluation on matched participants	Muralists, musicians, writers, & photographers lead at-risk youth on 6-week projects	Youth improved in their self-concept, self-confidence, and gained a positive outlook through artistic expression

Project	Key Players	Project Input	Results	Impact/Benefits
	staff and student interns; SPH Evaluation and Research Unit; Arts Council			
FOCUS Project – San Bernardino City Mentoring Program 1996-present	DPH Perinatal and Adolescent Life Services (PALS); SPH/ Health Promotion and Education staff and student interns; SPH Evaluation and Research Unit	Pre/posttest evaluation on matched participants; youth aged 10 to 17 with truancy problems were identified and matched with mentors	Mentees rated quality of mentor/mentee relationship highly in areas of youth centeredness, emotional attachment, and satisfaction	Improvements in mentees' self-confidence was observed; program expanded to include education to parents of mentees on parenting, wellness, safety, and prevention
FOCUS Project – After School Youth Development Program 1996-present	DPH Perinatal and Adolescent Life Services (PALS); SPH/ Health Promotion and Education staff and student interns; SPH Evaluation and Research Unit; Curtis Middle School	Pre/posttest evaluation on matched participants; identified and coordinated after-school volunteer activities	Provided after-school volunteer activities and support groups on self-improvement; offered mini-courses on conflict resolution, anger management, and communication	Youth demonstrated better grasp of conflict resolution, healthful behaviors and social relationships
FOCUS Project – Job Skills Development 1996-present	DPH Perinatal and Adolescent Life Services (PALS); SPH/ Health Promotion and Education staff and student interns; SPH Evaluation and Research Unit; Colton Community Day School; Apple Valley Community Day School; local businesses	Pre/posttest evaluation on matched participants; identified interested local businesses for career exploration day with at- risk youth	Implemented 3-hour career exploration activity with local businesses to expose youth to career options and helped identify career and educational objectives	At-risk youth increased their understanding of skills and training required for future career options that helped them set individual future career goals
FOCUS Project – Parent Involvement Program 1996-present	DPH Perinatal and Adolescent Life Services (PALS) program; SPH/ Health Promotion and	Identification of barriers to parent involvement; interviews; focus groups	Courses for parents on various topics, including teen pregnancy risk education and seat belt safety; skills training	Parents of teenagers improved in their parenting skills and knowledge about their children's health and safety

Project	Key Players	Project Input	Results	Impact/Benefits
	Education; SPH Evaluation and Research Unit; Curtis Middle School		and support for service providers; presented at APHA conference	
Faith-Based <i>Promotora</i> Model for the Reduction of Heart Disease in Latinos 2002	SPH faculty and students; American Heart Association; Pfizer; Clinica Medica	Social Cognitive Theory windshield surveys; key informant interviews; focus groups; literature reviews; needs assessment	Outreach and education training at community church; bilingual workshops for community	Latino community benefited from knowledge on topics like nutrition, hypertension, exercise, and stress; they also benefited from leadership roles as <i>promotoras</i> in their communities
Diabetes Self-Management for Independent Living Senior Education (S.M.I.L.E.) 2001-2004	DPH/Public Health Nutrition; County Department of Adult and Aging Services; SPH faculty and students; American Heart Association, American Diabetes Association, Inland Empire Concerned African American Church (IECAAC), Community Hospital of San Bernardino, and The Plaza.	Needs assessment; interviews; surveys	Three independent curricula for targeted groups; information about community resources; physical office created by Advisory Board; on-site location for community members to access information; presentation at APHA conferences	Community benefited from increased information and awareness brought to them in culturally appropriate ways; larger academic and institutional communities benefited from collaborative model, which forged DPH/SPH partnership
Preventive Care for San Bernardino's Aging Population 2004	DPH/Aging & Adult Services; SPH/HPRO faculty and Preventive Care doctoral students; SM and SPH faculty and students	Lifestyle assessment/health screening computerized program; lifestyle appraisal	Health Screening interpretation for seniors; referrals offered	Seniors benefited from learning about areas of improvement; Preventive Care doctoral students benefited from training in preventive referrals/interpretation of results
Perinatal and Adolescent Life Services (PALS); ongoing	DPH/PALS; students completing field practica	Comprehensive community needs assessment; focus groups	Case management services for adolescents; positive alternatives workshops for high-risk youth; adult training; comprehensive resource list	At-risk youth benefited from increased services
Tobacco Use Reduction Now (TURN); ongoing	DPH/TURN; student field practica	Media campaigns; policy suggestion and implementation; volunteer	Tobacco control prevention education; increased community presence;	Community benefited from extended resources on tobacco reduction; students

Project	Key Players	Project Input	Results	Impact/Benefits
		recruitment; teacher training; sponsorship of community events; updating program information	workshops on smoking prevention; enacting anti-smoking legislation; toll-free information and referral hotline	benefited from advocacy/legislation standpoint

B. Student and Alumni Projects

	Previous and Current DPH/SPH Activities	Current Status
Rebecca Nanyonjo, received MPH in Epidemiology and International Health; doctoral student in Preventive Care	Analysis of infant cohort data for Preventive Care dissertation; completed Master's field practicum on HIV/AIDS with DPH; used KABB (Knowledge, Attitude, Beliefs and Behaviors) survey to assess risky behavior around HIV/AIDS; speaks in SPH seminars	Supervising Epidemiologist with DPH AIDS/STD Reproductive Health Programs
Anuj Bhatia, received MPH in Epidemiology; doctoral student in Preventive Care	Data entry; investigated minor outbreaks; helped to develop various databases for these outbreaks; questionnaires; interviews; screened senior citizens for health problems; updated medical records for displaced families and individuals; participates in various lectures and workshops	Public Service Employee with DPH Bioterrorism
Stephen Nozaki, received MPH in Epidemiology; currently in the School of Dentistry at Loma Linda University	Completed Master's field practicum in Chlamydia study through DPH; supervised student intern from SPH; assessed prevalence of STD's; identified predictor variables among subjects; screened admissions to juvenile hall for STD's; quantitative assessment	Public Health Epidemiologist with DPH DPH AIDS/STD Control Programs from January, 2001 through July, 2004
Eileen Guerrero, received MPH in Health Promotion and Education; doctoral student in Preventive Care	Completed Master's field practicum on secondhand smoking; charted secondhand smoke exposure; responded to community requests for preventive education; pushed for anti-smoking policy; completed Scopes of Work for TURN; conducts community health advocacy programs	Part-time Public Service Employee with DPH/TURN
Corwin Porter, received MPH in Environmental Health and Epidemiology	Data and presentations; staff training; research and expert findings; compiled detailed literature review into Noro viruses; supervises several student interns	Supervising Environmental Health Specialist with DPH
Bruce Smith, received MPH from Loma Linda University	Lectures for MCH Epidemiology course; teaches fourth year medical students about public health at the DPH; oversees medical students' selectives through the SPH; supervised several students and their research projects through the DPH and Maternal and Child Health Department	Medical Director for DPH Maternal and Child Health; AIDS/STD Control Programs
Eric Frykman, received MD and MPH from Loma Linda University	Involved in developing local response plans for bioterrorism; worked on childhood anemia project, Migrant Farm Worker Project, assessment of high-risk pregnancies, STD study, and communicable diseases project	Chief of Disease Control & Prevention and; Interim Health Officer with DPH