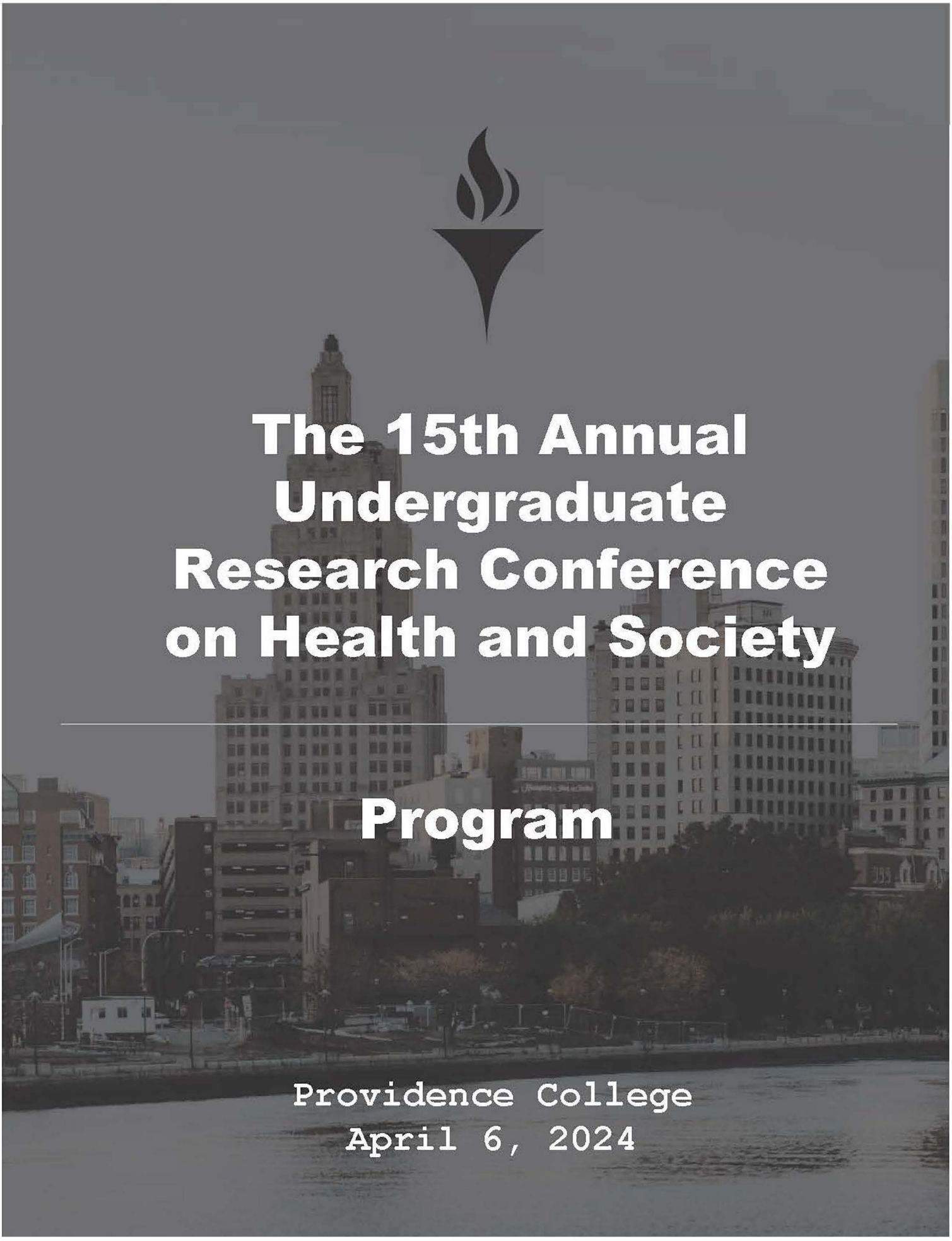

The 15th Annual Undergraduate Research Conference on Health and Society

Program

Providence College
April 6, 2024

15th Annual Undergraduate Research Conference on Health & Society

The Day at a Glance:

Welcome Breakfast and Registration (Science 206)	9:15am - 10:00am
Panel 1 Presentations	10:00am – 10:50am
Panel 2 Presentations	11:00am - 12:05pm
Lunch (Ruane Great Room)	12:15am - 1:15pm
Panel 3 Presentations	1:30pm - 3:00pm
Closing	3:00pm

PANEL 1 | Future Wellbeing Nurturing Health in the Next Generation

10:00am – 10:50am

Faculty Discussant: Dr. Amy Delaney

"Physical Activity from the Ground Up:: Policy Consequences and their Public Health Implications"

Haleigh St. Hilaire, Simmons University | 2024

This study examines the relationship between childhood physical activity (PA) and long-term exercise adherence, while simultaneously focusing on the impact of legislative policies such as Bill S.350: An act relative to physical and social recess in schools. By analyzing social determinants of health and their associated barriers, this research aims to highlight the importance of promoting PA across pediatric and adolescent demographics. In addition, this research seeks to explore how legislative policies, particularly those related to childhood PA, impact lifestyle and exercise behaviors from an early age. Through a systematic review of literature and empirical analysis, this research study will examine the benefits of childhood PA and its impact on public health outcomes in adulthood. Additional aims hope to identify strategies for increasing PA in children and adolescents, with the goal of improving long-term exercise adherence. Lastly, this research further aims to inform policymakers, educators, and public health professionals about the critical role of PA in childhood development, its importance in shaping lifelong exercise habits, and the established correlation across the healthcare spectrum in mitigating associated public health risks.

"Racial Disparities in Pediatric Literature"

Grace Gifford, Providence College | 2024

This project examines Boston Children's Hospital's nuanced use of Clinical Pathways to acknowledge and address racial language within its program. Employees identified racial biases, such as attributing higher UTI risks to white and non-Black patients, leading to disparities in care. A subsequent report, analyzing all pathways, revealed eight with racial references, prompting modifications to six and further review of three.

Comparative to other pediatric hospitals, my analysis of Boston Children's Hospital use of Clinical Pathways marks progress toward equitable healthcare. Addressing biases in clinical encounters is crucial, and examining medical language for racial implications is a foundational step to health equity. My research found racial disparities affect maternal and pediatric outcomes, with historical evidence of bias in treating flagged diagnoses like UTI, Diabetes Mellitus, Acute Viral Illness, and Weight Management. Fostering healthy relationships between families and pediatricians, can prevent long-term health impacts on children from discriminatory practices. Boston Children's Hospital's commitment to rectifying racial biases should inspire broader systemic change for equitable care.

PANEL 2 | Medical Racism: A History of Neglect

11:00am – 12:05pm

Faculty Discussant: Dr. Sarah Ahmed

"A Fluid Frontier: Cholera Throughout Latin American History"

Sarah Aluetta, Simmons University | 2024

The paper explores the persistent threat of cholera in Latin America from the 1800s to modern times, attributing its prevalence to systemic ignorance, racism, and classism. It examines key research on cholera epidemics, including Hutchinson's work in 1833 Mexico, the Pan American Health Organization's efforts, and Renaud's study on Haiti in the 2010s. Cholera, believed to have originated in ancient India, spread globally, devastating vulnerable populations. Historical accounts reveal governmental neglect and societal disparities that exacerbated outbreaks, hindering effective prevention and management. By examining cholera's trajectory in Latin America, the paper highlights the urgent need for equitable healthcare systems to undo centuries of injustice. It emphasizes learning from history to prioritize marginalized communities' health and ultimately save lives.

"Back-door to Scientific Racism: The Perpetuation of Racial Bias in American Medical Education"

Jamarc Simon, Yale University | 2024

In 2024, despite prevalent claims of anti-racism in medical schools and a focus on promoting racial and social justice, these concerns persist. Kathleen Hoffman's 2016 study revealed widespread misconceptions among residents and doctors regarding biological differences between Black and white bodies. Despite the implementation of anti-racist curricula and the establishment of minority affairs offices at schools, antiquated 17th and 18th century ideas about bodily differences persist and continue to influence medical education. In this work, I seek to understand the extent to which institutional efforts reify and reinforce 17th and 18th-century racialized ideas of bodily differences in medical school environments, even after the discontinuation of explicit racist teaching. Using Yale Medical School as a case study, I conduct oral history interviews with individuals such as Dr. James Comer and Dr. Forrester Lee, both of whom were around Yale during the 1960s and 1970s to uncover some of the informal ways these false ideas were spread. Interviews with Dr. Andrew Levey, who developed the eGFR equation and attached the racial correction factor, and the current associate dean for Yale Medical School curriculum reveal the more formal channels of idea dissemination. My findings suggest that the phenomenon of racial color blindness prevalent in the latter half of the 20th century led to a lack of critical examination of racialized ideas in medical literature. Consequently, this set the stage for medical journals to serve as conduits through which antiquated racialized assumptions are perpetuated and reinforced within medical school environments.

"The Role of the Obstetrician in Eugenics and It's Afterlives 1910-Present"

Emma Peterson, Yale University | 2024

This thesis examines the roles that obstetricians played in the eugenics movement from its origins in the 1910s to its afterlives in the present. By examining medical journals, summaries from professional conferences, and newspaper and magazine articles, this work challenges the idea that sterilization abuses in the later half of the twentieth century (as well as those happening recently in prisons and ICE facilities) simply the actions of individual bad actors, but, in actuality, are a result of a legacy of the way ob-gyns came to see their role as they were professionalizing and organizing throughout the twentieth century. In the first section, 1910 to 1945, I examine how the organized eugenics movement worked to convince doctors they had an important role to play in the eugenics movement and eugenic sterilization boards. In the second section, 1945 to mid-1970s, I examine how the obstetrician's role changed as the formal eugenics movement devolved, and decisions to sterilize patients became a more individual decision, intersecting with ob-gyns seeking to gain further professional and scientific authority and organization of professional societies and specialty medical journals. Finally, focusing on the mid-1970s to the present, I examine the legacies of the previous century in the present profession of ob-gyn and seek to use this historical background to answer the question of how sterilization and reproductive abuses continue, cases such as Madrigal v. Quilligan, and how physicians largely felt they had done no wrong when making unilateral decisions about which patients should be allowed to reproduce.

Lunch - Ruane: Fiondella Great Room (12:15-1:15pm)

PANEL 3 | Ethics and Health Equity Within and Beyond the Clinical Experience (1:30-3:00pm)

Faculty Discussant: Dr. Aishah Scott

"Muslims' Experiences with the Healthcare System in Massachusetts."

Leila Aydibi, Simmons University | 2024

Muslims around the world follow Islam as their faith. The Islamic faith may influence patients' decisions in receiving healthcare. Healthcare professionals in the U.S. are likely to encounter Muslim patients at some point in their careers. It is essential to know how to make patients' experiences better by understanding practices that many Muslims follow. Understanding Muslim patients' religious requirements encourages trust and ease of communication between the provider and patient. This leads to providing more equitable healthcare for patients. This research uses in-person interviews to get a better understanding of Muslims' experiences of getting care at healthcare facilities. A total of 20 individuals were interviewed, including a cross-section of Muslims of different races, genders, ages and ethnicities. These interviews allow us to explore the patient's point of view of their experience. This research study identified four main considerations Muslims addressed regardless which sect of Islam they follow. The themes include same gender preference of the healthcare provider and the patient especially among pregnant women, providing prayer spaces for patients and their families, understanding dietary restrictions of halal food, and having interpreters accessible when needed. Healthcare settings need to address these themes because they can have profound implications for Muslim patients when neglected. By shedding light on the challenges faced by Muslims within the healthcare system, it contributes to a more comprehensive understanding of healthcare disparities. It is crucial to understand these experiences for fostering inclusivity, improving healthcare delivery, and ensuring that the diverse needs of Muslim communities are considered.

“Faces (A Game Designed as Part of the Inequity Program)”

Kayla Smith St. Anslem College | 2024

Health is deeply impacted by social experiences. To influence emerging medical professionals’ understanding of medical history and contemporary experiences of the healthcare system, medical history can be incorporated into medical education. The area of biomedical ethics in particular can benefit from contextualizing medical history and contemporary healthcare challenges. The four bioethical principles – autonomy, beneficence, justice, and nonmaleficence – provide a foundational framework for ethical decision-making within the healthcare realm. Faces is a card-based educational tool where participants learn about two sides of medicine: the side that has harmed and the side that has healed. Each card represents an individual, institution, interaction, or piece of legislation that has either advanced or hindered the cause of these principles. Faces is intended to be used as a medical education tool, furthering efforts for public health and health equity; it aims to foster a deeper understanding of historical and contemporary issues within the healthcare system, acknowledging past wrongdoings and promoting a commitment to rectifying health disparities. The intention behind the project is that increasing knowledge of bioethics and ethical lapses in the healthcare domain will lead to more culturally competent providers who are better equipped to engage in efforts to further health equity. Through proactively addressing healthcare disparities, Faces seeks to foster a healthcare landscape that is not only ethically sound, but also sensitive to the diverse needs and backgrounds of individuals and communities. In doing so, it aspires to contribute to a more just, equitable, and patient-centered healthcare system.

“An Analysis of Public Health Within the NYCHA Projects”

Ryan Tao, Yale University | 2024

Living spaces are one of the most fundamental aspects of human living. These living spaces are unfortunately not all created equally. In particular, public housing differs from traditional housing due to the need to "mass produce" living spaces. The result is hastily done building and preparation, leading to potential public health risks such as lead painting, mold, arsenic in the water, or lack of proper filtration systems. This presentation will look into the specific public health concerns within these "mass produced living spaces" and analyze the effects of these conditions on the wellbeing of residents themselves. The end goal is to come up with a framework to bettering these spaces not just by creating guidelines but also by creating initiative to speak up and point out these public health deficiencies. This presentation will be complemented by case studies, interviews, and direct on-site observation.

"A Silent Sisterhood: The Women of the Mayer-Rokitansky-Küster-Hauser Syndrome"

Olivia Teare, University of Vermont | 2024

This research examines Mayer-Rokitansky-Küster-Hauser (MRKH) syndrome, a rare condition that manifests congenitally in females with a uterine absence and associated complications of the reproductive system. Also known as uterine agenesis or Müllerian aplasia, it affects approximately one in 4,500 newborns. A complete or partial absence of the female reproductive tract threatens the confines of the hetero-cis markers of value, excluding MRKH women from those who fit the typical male-female dichotomy. The medical industry promoting "reconstructive" methods to the MRKH community, such as the Vecchietti surgery or a uterus transplant, mistakes the lifelong condition as an issue that needs fixing. This belief is central to the societal interpretation of MKRH, as so little information exists about the syndrome outside of case studies that the typical view of these women is through a clinical lens. Since there is a lesser focus on the psychosocial well-being of MRKH individuals, they do not regularly receive the necessary emotional care during surgical reconstruction. Such procedures are a detriment to those with Müllerian agenesis, reinforcing the idea that healthy variations in female development are undesirable and resulting in negative self-evaluation and sexual dysfunction. This research will explore the harmful psychological burden of unnecessary operations and societal standards on the MRKH woman.

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Eliza Guard '27

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Thank you for attending the 15th Annual Undergraduate Research Conference on Health & Society Hosted by Providence College!

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