

Rural Health Equity Conference May 10, 2022 — Albuquerque, NM

Sessions in blue are available to live participants only
Sessions in green are also available to live participants and virtual attendees

7 – 8 a.m.
Check-In, Continental Breakfast
Poster Session
La Sala Foyer

8 - 8:15 a.m.

Conference Welcome (available to virtual attendees)

Picuris/Sandia

Alan Morgan, MPA, NRHA CEO David Line Denali, PhD, MPH, MSW, NRHA Health Equity Council Chair

8:15 - 9:30 a.m.

Opening Plenary

Racial Equity Begins at Birth (available to virtual attendees)

Picuris/Sandia

Mariana Tuttle, MPH, University of Minnesota Rural Health Research Center research fellow Julia Interrante, MPH, University of Minnesota Rural Health Research Center doctoral student Bridget Basile Ibrahim, PhD, MA, University of Minnesota Rural Health Research Center rural health equity postdoctoral associate

Phoebe Chastain, BA, University of Minnesota Rural Health Research Center research assistant

This session will describe evidence-based services and supports for maternal and infant health available in rural communities and highlight exemplary community-serving programs in rural hospitals that care for pregnant patients who are Black, Native American, Spanish-speaking, immigrant families, and other groups that experience additional risk because of both rurality and race.

9:30 – 9:45 a.m. Networking Break, Poster Session *La Sala Foyer*

9:45 – 11 a.m. Concurrent Sessions

1A. Philanthropy's Rural Innovations in Oral Health Equity (available to virtual attendees)

Picuris/Sandia

Eric Stockton, Grantmakers in Health senior program director
Frank Martinez Nocito, MS, Maine Health Access Foundation program officer
Sarah Borgida, M.Ed., Arcora Foundation Children's Programs and Tribal Partnerships director
Rachael Hogan, DDS, Swinomish Indian Tribal Community Dental Clinic and dəx^wxayəbus — Dental Therapy at Skagit
Valley College Director

Philanthropy has been turning its focus toward health equity, creating new opportunities to address rural health disparities and the social conditions underlying poor health. Learn about how members of the Funders Oral Health Policy Group and Grantmakers in Health are forging ahead with innovative, equity-oriented interventions in rural communities.

Black-led Public-Private Partnership Tackles Rural Health Equity (available to virtual attendees)

Carla Gibson, MPA, REACH Healthcare Foundation vice president of programs
Tonia Wright, BA, Grace Advertising and Consulting Inc. president and chief executive officer

REACH Foundation launched a novel experiment in 2011 that changed the face of health care in West Central rural Missouri. This resulted in a public-private partnership – led by 2 Black women – that continues to tackle health equity in rural Missouri. Learn how urban-rural partnerships monumentally impact rural health.

1B. Health and Well-Being of LGBT Rural Residents (available to virtual attendees)

Navajo/Nambe

Carrie Henning-Smith, PhD, MPH, MSW, University of Minnesota Rural Health Research Center associate professor and deputy director

Hannah MacDougall, PhD, MSW, University of Minnesota School of Public Health rural health equity postdoctoral associate

Courtney Sarkin, MBE, University of Minnesota Rural Health Research Center research assistant Mariana Tuttle, MPH, University of Minnesota Rural Health Research Center research fellow

Using results from nationally-representative surveys, key informant interviews, and case studies, this session will discuss rural/urban differences in health for lesbian, gay, bisexual, and transgender (LGBT) adults, as well as within-rural differences by socio-demographic characteristics. We will also share challenges and best practices for supporting rural LGBT health and wellness.

1C. Colocation of Medication Assisted Treatment and Behavioral Health

Isleta/Jemez

Athena Huckaby, MPH, Ideal Option New Mexico community outreach coordinator Celia Fisher, New Mexico Department of Health SE overdose prevention coordinator

This session will highlight the process of colocating an evidence-based medication assisted treatment (MAT) clinic within an established mental health resource through telemedicine to improve treatment access in eastern New Mexico. Topics include MAT for substance use disorders, rural partnerships, community outreach and strategies to improve specialty outpatient care access.

Dignity-Centered Collaborative Care for Perinatal Substance Use

Kari Earle, M.Ed., JBS International technical expert lead

Katrina Quick, M.D., Seneca Family Medicine Residency Program at Prisma Health core faculty physician Melicia Tanner, MS in Clinical Mental Health Counseling, Seneca Family Medicine Residency Program at Prisma Health behavioral health curriculum director

The Magdalene Clinic (SC) provides collaborative care for pregnant people with substance use disorders, integrating comprehensive services to provide a welcoming medical home for families. This session will demonstrate how this rurally adapted model is sustainably financed and achieves impressive outcomes for those who are often marginalized when seeking care.

11 – 11:15 a.m. Networking Break, Poster Session La Sala Foyer

11:15 a.m. – 12:30 p.m.

Concurrent Session

2A. Effective Indigenous allyship: Moving beyond mere cultural competence (available to virtual attendees) Picuris/Sandia

Mina Tanaka, MD, MPH, Northern Navajo Medical Center internal medicine physician

Indigenous allyship is a practice of working in meaningful partnership/solidarity with Indigenous people to advance equity. Well-intentioned acts can inadvertently cause harm as effective allyship is not always intuitive. This is particularly of interest to rural populations as Tribal lands and reservations are largely located in rural areas.

Improving provider support networks in Indigenous healthcare settings (available to virtual attendees)

Graham Ambrose, MPH, Cardea research and evaluation manager

Wendee Gardner, DPT, MPH, Good Health Tribal Public Health Consulting Services chief executive officer and founder

Drawing on findings from seventeen key informant interviews with healthcare providers in IHS, Tribal, and Urban Indian Health (I/T/U) sites across the U.S., this session will introduce participants to factors that fulfill, support, and challenge providers in rural/remote settings. Provider suggestions for promoting satisfaction, wellness, and retention will be shared.

Rural physicians' fellowships are stabilizing at-risk hospitals (available to virtual attendees)

Matthew Tobey, MD, MPH, Massachusetts General Hospital rural medicine program director

A growing community of teaching physicians have implemented physician fellowships with rural Indigenous communities to improve health equity and address the health harms of colonialism. The fellowships now staff 10-20% of Indian Health Service physician vacancies and each fellowship includes explicit support of local Indigenous health leaders.

2B. Community Power Building to Address Immigrants' Healthcare Needs (available to virtual attendees) Navajo/Nambe

Maria de Jesus Diaz Perez, PhD, Center for Improving Value in Health Care director of research and health care performance measurement

Karen Albright, PhD, MSW, University of Colorado School of Medicine associate professor of medicine in the division of general internal medicine

Joe Sammen, MPH, Center for Health Progress executive director

Immigrants face structural barriers to health care, which are exacerbated in rural locations by a more fragmented health and social system, and greater workforce deficiencies. This presentation describes how community power building was used to determine and meet health care needs of rural immigrants, and to inform Emergency Medicaid expansion.

Multi-sector rural health partnerships for equitable recovery (available to virtual attendees)

Ashley Hernandez, MSc, Build Healthy Places Network communications and outreach manager Marie Barry, MPS in Community and Economic Development (CEDEV), Rural Wisconsin Health Cooperative director of community economic development

Elana Brochin, MPH, Massachusetts Association of Community Development Corporations program director for health equity

Rural healthcare is partnering with community development organizations to impact health and wellbeing. Building off our "A Playbook for New Rural Healthcare Partnership Models of Investment", learn from two leaders doing this multi- sector work to drive inclusive recovery in rural areas, leveraging assets from health institutions and unique strengths of rural communities.

2C. Inclusive assessments: raising the voices of rural communities

Isleta/Jemez

Martha Moore-Monroy, MA, University of Arizona Mel and Enid Zuckerman College of Public Health lecturer and program manager

Brenda Sanchez, BA, BSPH, CHES, Southeast Arizona Area Health Education Center (SEAHEC) border binational initiative and community health worker initiative program manager

Martin Celaya, MPH, DrPH(c), Arizona Department of Health Services Bureau of Assessment and Evaluation chief

The capacity building session covers successful strategies used by diverse partnership ensuring the voices of rural marginalized populations from every county in the state were included in a statewide Maternal and Child Health assessment. The session focuses on non-traditional as well as traditional methods of outreach and data collection.

Recognizing Obesity: Understanding Equity in Tackling Obesity

Angelina Esparza, BSN, MPH, CDC Foundation associate vice president for jurisdictional support and health equity

In rural America, certain racial and ethnic groups are more likely to have obesity compared to others. To understand why different racial and ethnic groups face varied rates of obesity and consequently, worse health outcomes, there must be an assessment of the contributing factors. This session intends to view obesity through a health equity lens and understand obesity's disparate impact on different racial and ethnic groups in rural America.

12:30 p.m. – 1:30 p.m. Networking Lunch Picuris/Sandia

1:30 p.m. – 2:30 p.m. Plenary Presentation

Climate Change Inequities Among Rural American Indian Communities (available to virtual attendees)

Picuris/Sandia

Mary-Katherine McNatt, DrPH, MPH, A.T. Still University Public Health Department chair and associate professor Susan Thomas, MSEd, A.T. Still University College of Graduate Health Studies instructional designer Marsha Presley, PhD, MPH, A.T. Still University research coordinator

This session examines the direct, indirect, and long-term effects of climate change and how it disproportionately affects rural American Indian communities through drought, wildfires, floods, and other natural disasters. The session will conclude with a review of current opportunities and actions which can be taken to mitigate these risks.

2:30 p.m. – 2:45 p.m. Networking Break, Poster Session La Sala Foyer

2:45 – 4:00 p.m. Concurrent Session

3A. Roots of Health Inequity Overview and FORHP Health Equity Efforts

Picuris/Sandia

Gem Daus, MA, Office of Health Equity public health analyst Samia Ismail, Federal Office of Rural Health Policy public health analyst Jillian Causey, MHA, Federal Office of Rural Health Policy public health analyst

This workshop invites participants to engage in a discussion-based learning environment to explore the systemic causes of unjust health outcomes. Based on a social justice framework, the Roots of Health Inequity course introduces public health professionals to concepts and strategies for taking action in everyday practice. The Health

Equity Workgroup at the Federal Office of Rural Health Policy (FORHP) was established to reduce health disparities, racial discrimination, and build knowledge, understanding, and capacity across rural communities and within FORHP. Currently, the Health Equity Workgroup at FORHP has presented the Roots course for its executives and staff to learn about the causes and consequences of health inequity. During the discussion, participants will learn about the broad history of how public health policies have exacerbated unjust health outcomes, how other sectors of American society contribute to poor health, and what strategies are being utilized to combat these disparities. Together, the Roots curriculum overview and the collaborative discussion will equip session attendees with tools to identify and address disparate health outcomes in their own health care facilities.

3B. Rural and racial differences in mental health stigma (available to virtual attendees)

Navajo/Nambe

Kate Beatty, PhD, MPH, East Tennessee State University associate professor Michael Meit, MA, East Tennessee State University director of the center for rural health research

Limited research has examined stigma in rural communities including in minority populations. Using an established, nationally representative panel (AmeriSpeak®), we examined stigmatizing attitudes and beliefs towards any mental illness. White, non-Hispanic participants were significantly different from both Black, non-Hispanic and Other, non-Hispanic participants with regard to negative stereotype scores.

3C. Equity in Kidney Disease Testing: Opportunities and Challenges

Isleta/Jemez

Katelyn Laue, MPH, RD, LD, National Kidney Foundation program development director Elizabeth Montgomery, BS, National Kidney Foundation vice president of learning strategies and primary care

This presentation will explore the impact of the new estimated glomerular filtration rate (eGFR) equation without a race modifier, challenges, and opportunities for implementing the new eGFR equation in rural labs, strategies for risk stratification and management of CKD in rural health settings, and the factors that increase CKD risk.

Addressing Breast Cancer among Amish and Mennonite Women

Melissa Thomas, PhD, MSPH, MSA, Ohio University Heritage College of Osteopathic Medicine assistant professor

Since 1997, Project Hoffnung ("Hope" in German) has provided access to culturally-sensitive health care and education for Amish and Mennonite women in the fight against breast cancer. The purpose of this session is to provide an overview of key outcomes in research and practice over the 25-year history.

4:00 - 5:15 p.m.

Plenary Presentation

Inside the White House COVID-19 Health Equity Task Force (available to virtual attendees)

Picuris/Sandia

Tim Putnam, DHA, Medical University of South Carolina faculty Nikki King, DHA, Zinnia Health chief of staff

The COVID-19 Health Equity Task Force submitted the final report in November 2021. The report included 55 primary recommendations to improve health equity in the nation. Tim Putnam, a member of the Task Force, will discuss the findings with the assistance of Dr. Nikki King and Hannah Putnam-Johnson.

Logic Model Analysis: COVID-19 in the Southwest Borderlands (available to virtual attendees)

Carrie Shaver, DHA, IHC, New Mexico State University assistant professor of health management, administration, and policy

The COVID-19 pandemic created extraordinary burden on the United States/Mexico rural borderland region's public health infrastructure. Analysis of state- and regional-level COVID-19 mandates, guidelines, strategic plans,

and initiatives was performed. The resulting logic model represents stakeholder activities and the borderland factors which influenced COVID-19 public health policy and mitigation efforts.

5:15 p.m. Conference Adjourns

Exhibitors

Thank you for your attendance and your continued support of NRHA and the Health Equity Conference! Join us next year in San Diego, CA on May 16, 2023.

National Rural Health Association 2022 Health Equity Conference Poster Sessions

Submission Title: Identifying Mother-Daughter Intervention Feasibility for Rural South Florida

Speaker: Gira J. Ravelo, PhD, MSW

Organization: Florida International University

Topic: Other (Behavioral health, Women's health, and Migrant health)

Social determinant(s) of health addressed in presentation: Gender and Race/Culture

Session Description: Results of a community assessment to identify the most appropriate, culturally based, behavioral, mother-daughter intervention designed to reduce substance abuse, violence, and HIV risk in migrant farm working rural communities of South Florida. Data was collected before/during COVID-19 pandemic and

yielded results for feasibility and acceptability of delivering interventions remotely.

Submission Title: Vermont Farmworker Health Access: Lessons Amplified During COVID-19

Speaker: Kira Gressman

Organization: Dartmouth Geisel School of Medicine **Topic:** Other (Farm/farmworker health and safety)

Social determinant(s) of health addressed in presentation: Employment and Working Conditions | Health Services

and Social Services

Session Description: Vermont's economy depends on dairy, which relies heavily on migrant farmworkers. Prior Vermont dairy worker needs assessments showed multiple healthcare barriers. This public health surveillance project captured a snapshot of farm healthcare access during COVID-19. It highlights an urgent need to support rural healthcare delivery programs serving Vermont's agricultural communities.

Submission Title: Wounds of an Undocumented Traveler

Speaker: Thai Nguyen, MD, MHA

Organization: Louisiana State University Health Science Center

Topic: Border/ Migrant Health

Social determinant(s) of health addressed in presentation: Employment and Working Conditions | Health Services

and Social Services | Race/Culture | Income and Social Status

Session Description: In response to the ever-expanding population that healthcare providers take care of, social

determinants play an even greater role. In this case report we explore challenges when treating the

undocumented population. Will introduce treatment methods and strategies that can be done in a rural setting.

Submission Title: Inequities in access to Commission on Cancer-accredited hospitals

Speaker: Mary Charlton, PhD **Organization:** University of Iowa

Topic: Other (Access to high quality cancer care)

Social determinant(s) of health addressed in presentation: Physical Environments | Health Services and Social

Services

Session Description: Commission on Cancer (CoC) accreditation standards were established to promote high-quality, coordinated cancer care in US hospitals. While 94% of urban Americans live within 50 miles of a CoC-accredited hospital, only 48% of rural Americans do. We will present maps illustrating access challenges and strategies to reduce inequities.

Submission Title: Been there, done that: rural health inequity

Speaker: Yun Li, MD, MBA

Organization: Massachusetts General Hospital

Topic: Capacity Building

Social determinant(s) of health addressed in presentation: Health Services and Social Services

Session Description: The poster presents results from a survey completed by a group of urban-residing academic physicians who have performed clinical work in rural clinics/hospitals. Rural clinical experience enhanced physicians' awareness of health disparities. Physicians felt urgency to alleviate health inequity yet still needed empowerment to do so.

Submission Title: Treating Long-COVID Syndrome Related Pain with Dry/Wet Needling

Speaker: Mengyi Zha, MD

Organization: Columbia Basin Health Association

Topic: Other (Innovative Approaches to Pain Management)

Social determinant(s) of health addressed in presentation: Physical Environments | Health Services and Social

Services

Session Description: This poster builds on a case report we recently published on dry/wet needling as effective treatment modalities for Long-COVID Syndrome related myofascial pain. We report two cases: one adult and one pediatric, both suffer from new pain months after COVID-19 infections. We describe our techniques and patient outcome in detail.

Submission Title: RELAX: A curriculum in equity, leadership, and advocacy

Speaker: Stephanie Sun, MD, MSc, MPH **Organization:** Massachusetts General Hospital

Topic: Capacity Building

Social determinant(s) of health addressed in presentation: Education | Employment and Working Conditions |

Personal Health Practices and Coping Skills | Gender | Race/Culture | Social Support Networks

Session Description: The Rural Equity, Leadership and Advocacy Exchange (RELAX) is a curriculum for early-career rural health professionals. The goal of RELAX is to bring together fellows working in rural communities to 1) create a vibrant monthly learning exchange and 2) expose fellows to best practices in rural health leadership and management.

Submission Title: Identifying Core Functions of an Evidence-Based Intervention

Speaker: Madison Wahlen

Organization: University of Iowa Department of Epidemiology

Topic: Capacity Building

Social determinant(s) of health addressed in presentation: Health Services and Social Services

Session Description: Using rigorous qualitative methods, we distilled a successful, multi-level intervention addressing barriers to accessing high-quality cancer care in rural Kentucky into its core functions. This positions us (and others) to adapt this model to address cancer disparities in other rural contexts.

Submission Title: Pandemic Perspectives from New Mexican Rural Communities

Speaker: Kate Cartwright, PhD, MPH **Organization:** University of New Mexico **Topic:** Other (COVID-19 Knowledge/Literacy)

Social determinant(s) of health addressed in presentation: Education | Employment and Working Conditions |

Personal Health Practices and Coping Skills | Social Environments

Session Description: This poster presents findings from a IRB-approved qualitative project exploring rural New Mexican communities' perspectives on the COVID-19 pandemic. Our team interviewed over 60 rural residents in 2020 and 2021. The themes explore economic impacts, vaccine hesitancy, unintended consequences of statespecific COVID-19 policies and mandates, and sources of health information.

Submission Title: Rural/Urban Differences in Health Behaviors during COVID-19

Speaker: Breanna Greteman, MPH

Organization: University of Iowa College of Public Health

Topic: Mental/Behavioral health

Social determinant(s) of health addressed in presentation: Personal Health Practices and Coping Skills | Income

and Social Status

Session Description: The impact of living in a rural area during the COVID-19 pandemic on cancer-related risk behaviors (physical activity, diet, alcohol, smoking) has not been well captured. We conducted a population-based survey study across Iowa to quantify the association of rurality with challenges, emotional reactions, telehealth usage, and cancer-related risk behaviors.

Submission Title: Analysis of The Early COVID-19 Pandemic in Arkansas

Speaker: Mallory Heft, BS

Organization: University of Arkansas for Medical Sciences College of Medicine

Topic: Other (Community health)

Social determinant(s) of health addressed in presentation: Physical Environments | Personal Health Practices and

Coping Skills | Health Services and Social Services

Session Description: The first reported COVID-19 case in Arkansas was March 11, 2020, two months after the first reported case in the United States. We sought to analyze how the rate of admissions for respiratory illness was impacted in Arkansas for the 2019/2020 season as compared to pre-pandemic years.

Submission Title: Mitigating COVID-19 Outbreaks by a Migrant Health Center

Speaker: Mengyi Zha, MD

Organization: Columbia Basin Health Association

Topic: Border/ Migrant health

Social determinant(s) of health addressed in presentation: Social Environments | Race/Culture | Income and Social

Status | Social Support Networks

Session Description: We describe two innovative ways a FQHC and Migrant Health Center mitigated COVID-19 outbreaks in Othello: a volunteer primary care provider daily rounding in a long term care facility; and a large-scale bilingual phone outreach project to reinforce quarantine/isolation measures among Spanish-speaking immigrants, who lack trust in public health authorities.

Submission Title: Hopelessness Among Rural Patients with Heart Disease

Speaker: Kristin Van De Griend, PhD, MPH **Organization:** Idaho State University **Topic:** Mental/Behavioral Health

Social determinant(s) of health addressed in presentation: Personal Health Practices and Coping Skills | Social

Session Description: In adults with ischemic heart disease, hopelessness and rurality are independent risk factors for mortality. Our findings support validity and reliability of the State-Trait Hopelessness Scale among rural adults with heart disease and the association between state hopelessness and rurality. Understanding and screening for hopelessness is vital to decreasing mortality.

Submission Title: Community Engaged Rural Dementia and Alzheimer's Research (CERDAR)

Speaker: Wayne Warry, PhD

Organization: Memory Keepers Medical Discovery Team – Health Equity, University of Minnesota Medical School,

Duluth Campus

Topic: Capacity Building

Social determinant(s) of health addressed in presentation: Physical Environments | Health Services and Social

Services | Social Environments

Session Description: The Memory Keepers Medical Discovery Team conducts health equity research focused on health aging, cognitive health, caregiving, and dementia in Minnesota rural and Indigenous communities. We outline our process of capacity building that includes research infrastructure, partnership development and community engagement, undertaken to ensure sustainable community-based participatory health equity research.

Submission Title: Addressing Cardiovascular Health Disparities in the Arkansas Delta

Speaker: Jessica Barnes, PhD

Organization: University of Arkansas for Medical Sciences

Topic: Other (Cardiovascular health disparities, poverty, underserved rural areas)

Social determinant(s) of health addressed in presentation: Physical Environments | Personal Health Practices and Coping Skills | Health Services and Social Services | Social Environments | Race/Culture | Income and Social Status | Social Support Networks

Session Description: We will present preliminary data on engagement and management of obesity and cardiometabolic disease risk in The Lincoln Project, a registry supported, community health worker-based CVD prevention model serving a minority, disadvantaged population plagued by high rates of CVD, poverty, and serious health disparities in the Arkansas delta region.

Submission Title: Cardiovascular Disease Prevention/Management: A Proactive Community-Centric Approach

Speaker: Jessica Barnes, PhD

Organization: University of Arkansas for Medical Sciences

Topic: Other (Cardiovascular health disparities, poverty, underserved rural areas)

Social determinant(s) of health addressed in presentation: Personal Health Practices and Coping Skills | Social

Environments | Race/Culture | Social Support Networks

Session Description: The Lincoln Project (TLP) is a Community Health Worker-based proactive engagement program approach deploying a portfolio of resources designed to address social, wellness and health needs. TLP targets poor, underserved individuals with a high risk of cardiovascular disease in the rural Arkansas Delta Region.

Submission Title: President Task Force to study Frontier Equity

Speaker: Stacey Cox, PhD

Organization: National Center for Frontier Communities (NCFC)

Topic: Other (Frontier equity)

Social determinant(s) of health addressed in presentation: Education | Employment and Working Conditions | Physical Environments | Biology and Genetics | Personal Health Practices and Coping Skills | Healthy Child Development | Health Services and Social Services | Social Environments | Gender | Race/Culture | Income and Social Status | Social Support Networks

Session Description: We would like to present preliminary work and ask about NHRA Member's interest in supporting for a Presidential Frontier Task Force that would study frontier equity and make recommendations and action steps to ensure equity of resources to frontier communities.

Submission Title: Ethnic Disparities in Diabetes: Awareness, Prevention, and Modeling Change

Speaker: Lisa Maness, PhD

Organization: Winston-Salem State University

Topic: Health Literacy

Social determinant(s) of health addressed in presentation: Education | Employment and Working Conditions | Physical Environments | Biology and Genetics | Personal Health Practices and Coping Skills | Health Services and Social Services | Social Environments | Race/Culture | Income and Social Status | Social Support Networks

Session Description: Diabetes disparities exist among ethnic groups due to physical activity, diet, genetics, and metabolism as well as environmental factors, education, and financial status. Policy changes are needed to prevent diabetes and improve outcomes. Model social programs exist to decrease morbidity/mortality, reduce expenditure, and improve lifestyles for all ethnic groups.

Submission Title: Supporting Rural Health Communities with Social Services during COVID-19

Speaker: Rachel Powell, PhD, MPH Organization: CDC Foundation Topic: Health and Nutrition

Social determinant(s) of health addressed in presentation: Personal Health Practices and Coping Skills | Health Social Social Social Status

Services and Social Services | Race/Culture | Income and Social Status Session Description: The CDC Foundation partnered with health depart

Session Description: The CDC Foundation partnered with health departments and a community-based health care provider system to mitigate the spread of COVID-19 by providing education, rental assistance, testing, vaccination, and more in rural communities across the United States. The initiative targeted Latino and other populations disproportionately affected by the pandemic.

Submission Title: Diabetes is a Struggle: Conversations among African Americans

Speaker: Idethia Shevon Harvey, DrPH **Organization:** University of Missouri

Topic: Health and Nutrition

Social determinant(s) of health addressed in presentation: Physical Environments | Personal Health Practices and

Coping Skills | Gender | Race/Culture | Income and Social Status

Session Description: Chronic exposure to socioeconomic inequalities, social trauma, stress, environmental barriers, and inadequate healthcare are associated with prolonged chronic illness among rural African Americans. A syndemic approach in type-2 diabetes management may help understand the etiologies and socio-

environmental factors influencing disease management.

Submission Title: Alzheimer's disease prevalence in rural communities

Speaker: LeeAnn Mandarino, MA

Organization: Cleveland Clinic Lou Ruvo Center for Brain Health

Topic: Mental/Behavioral health

Social determinant(s) of health addressed in presentation: Education | Physical Environments | Biology and Genetics | Personal Health Practices and Coping Skills | Health Services and Social Services | Social Environments |

Gender | Race/Culture

Session Description: Rural residents with Alzheimer's disease and related dementias (ADRD) are an understudied population. The NIH-funded Nevada Exploratory Alzheimer's Disease Research Center (NVeADRC) at Cleveland Clinic Lou Ruvo Center for Brain Health studies ADRD in rural populations to understand the clinical features and social determinants of health in these communities.

Submission Title: Rural Primary Care's Knowledge of LGBTQ+ Health Needs

Speaker: Ryan Alderman, MS

Organization: University of Illinois College of Medicine – Rockford

Topic: LGBTQ health

Social determinant(s) of health addressed in presentation: Education | Employment and Working Conditions |

Health Services and Social Services

Session Description: We conducted a brief survey aimed at rural midwest primary care providers on lesbian, gay, bisexual, and transgender health needs. Our survey questions were geared towards knowledge and usage of community health resources, the impact of COVID-19 on this population, and the amount of instruction on LGBTQ health needs.

Submission Title: Understanding Sudden Unexpected Infant Death (SUID) in Arizona

Speaker: Alexis Griffin, MPH **Organization:** University of Arizona

Topic: Children's Health

Social determinant(s) of health addressed in presentation: Physical Environments | Social Environments | Gender |

Race/Culture

Session Description: A sudden unexpected death of an infant is where the cause of death was not apparent prior to a death investigation. The presentation addresses the social, demographic and geographic risk factors

associated with SUID in Arizona from 2009-2019.

Submission Title: Opioid Crisis Equitable Response: APHA Policy EBP Recommendations

Speaker: Carrie Shaver, DHA, IHC

Organization: New Mexico State University

Topic: Mental/Behavioral health

Social determinant(s) of health addressed in presentation: Health Services and Social Services | Social

Environments

Session Description: Rural communities experience disproportionate barriers to Opioid Use Disorder (OUD) prevention, treatment, and aftercare. The American Public Health Association's 2021 policy provides evidence

based practice recommendations to enhance and improve prevention and treatment programs and policies and minimize harm to the public. This presentation will explore these concepts further.

Submission Title: Closing the Empathy Gap through Data Mining

Speaker: Fran Ayalasomayajula **Organization:** Reach Healthcare

Topic: Women's Health

Social determinant(s) of health addressed in presentation: Personal Health Practices and Coping Skills | Health

Services and Social Services | Social Environments | Social Support Networks

Session Description: Insight from a study that examined the multiple ways in which the attitudes and behaviors of clinicians are key to successful patient outcomes will also be revealed. Finding across multiple panels will be unveiled including maternal health, lifestyle medicine, pain management, and infectious disease management (COVID 19).

Submission Title: Analyzing Equity in Rural Communities

Speaker: Rima Rivera, MBA

Organization: TIBCO
Topic: Other (Rural equity)

Social determinant(s) of health addressed in presentation: Education | Physical Environments | Healthy Child Development | Health Services and Social Services | Social Environments | Race/Culture | Income and Social Status Session Description: Identify communities with highest vulnerability score directly related to race, socioeconomic disparities, and inequalities in resource distribution related to health, education, and extracurricular activities; to identify the appropriate organization necessary to aid in closing the disparity gap. Providing every child the equal

opportunity to succeed.