MCW Office of Community Engagement

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COVER IMAGE: Broderick Pearson, Research Associate II with the Center for AIDS Intervention Research and 2019 President’s Community Engagement Awardee, pictured during the recognition ceremony.
OUR MISSION

The Office of the Associate Provost and Senior Associate Dean for Community Engagement is dedicated to improving the health of communities in Wisconsin and beyond by advancing the art and science of community engagement and making the Medical College of Wisconsin a national leader in improving the health of the public.

“Community Engagement elevates MCW’s research, education, and clinical missions and brings students, staff, and faculty proximate to our communities to better understand their needs.”

Joseph E. Kerschner, MD
Julia A. Uihlein, MA, Dean of the School of Medicine
Provost and Executive Vice President
Medical College of Wisconsin
Taking the ‘Road Less Traveled’: Community Engagement Mission Built Brick by Brick at the Medical College of Wisconsin

Reflections by Syed M. Ahmed, MD, MPH, DrPH, FAAFP, Inaugural Associate Provost and Senior Associate Dean for Community Engagement

I am retiring after 20 years of service at the Medical College of Wisconsin (MCW) with feelings of both pride and sorrow: pride for what we have collectively accomplished and sorrow for leaving behind many friends and colleagues from my MCW family.

This past year has been challenging at every level—individuals, families, organizations, and businesses have all been impacted by both the COVID-19 pandemic and ongoing systemic racism. At the Office of Community Engagement (OCE), we have had to replace in-person programming with virtual meetings, and, like many, learned how to effectively work remotely. We focused on supporting our community in many ways: we connected our partners to enable collaborative resource distribution; we participated in donating food, supplies, and money; we helped our partners apply for funds from the Advancing a Healthier Wisconsin Endowment (AHW) Urgent Response to COVID-19 grant mechanism; we fostered medical student connections and education in new areas of concern; we took part in anti-racism education and discussion groups; we set goals to purchase more goods and services from diverse suppliers; and we developed the webinar series From COVID-19 to Action to explore how the pandemic has worsened social determinants of health, such as housing instability, opioid misuse, mental health, food insecurity, and rural health.

Over the last twenty years, MCW has transformed in tremendous ways, most notably in recognizing the value of community engagement (CE) and adopting CE processes. When I started at MCW, the pursuit of CE was a lonely venture as there were very few faculty involved in even basic CE. This has changed over time and is a direct result of our initiatives in education, training, and mentoring in the art and science of community engagement. I was honored to be appointed the inaugural Senior Associate Dean for Community Engagement in 2012 and Associate Provost in 2018. Throughout my tenure at MCW, I have strived to work along with others to build CE as a full, respected mission at MCW, and I am very pleased to see that MCW has grown to be a national leader in CE, having positively impacted hundreds of students, staff, faculty, and community partners.

It is worth mentioning that two of the most nationally and internationally known frameworks of CE originated at MCW. The first—a framework for community-engaged research (CEnR)—was developed and subsequently adopted by the National Institutes of Health (NIH) Council of Public Representatives on which I served as Co-Chair and which had as an outcome a seminal publication for which I was primary author in the American Journal of Public Health. The second framework, a practical model for community engagement, published in the Journal of Clinical and Translational Science, was based on our exemplary expertise in CE at MCW. Personally, I have endeavored to develop and promote scholarship focused on impactful CE through publications, presentations, mentoring, and community participation. In addition, I have had the privilege to participate as a member of the National Academy of Medicine steering committee charged with exploring ways to "Two roads diverged in a wood, and I— I took the road less traveled by, and that has made all the difference." —Robert Frost
assess CE. Institutionally, we have successfully advocated and achieved recognition for CE in the MCW Faculty Handbook for Promotion & Tenure which, to our knowledge, is a first among medical schools.

In 2015, MCW received the prestigious Carnegie Classification for Community Engagement from the Carnegie Foundation for the Advancement of Teaching—one of only four medical schools to receive this honor. Also in 2015 we were awarded a substantial AHW Research and Education Program grant for establishing the MCW CE Core, which expanded our reach and solidified our commitment toward offering quality CE programming and infrastructure. I am grateful to Cheryl Maurana, PhD, who, as the then Director of AHW, provided support and guidance for fulfilling our aims. I also would like to extend thanks to the current Director, Jesse Ehrenfeld, MD, MPH, and his entire team at AHW for helping us achieve all our Core objectives during the final years of our grant. In 2017, MCW was recognized as a finalist by the Association of American Medical Colleges for the Spencer Foreman Award for Outstanding Community Service. This was our second achievement with the Spencer Foreman Award, having also been awarded in 2005. As such, MCW became the only medical school ranked twice among the top three institutions within 11 years. Recently, MCW received the Campus Compact Richard Guarasci Award for Institutional Transformation. To our knowledge, no other medical school has received all three top national accolades for community engagement.

Since its inception in 2012, the OCE has collaborated with most MCW departments, centers, institutes, offices, and programs to successfully promote community engagement with the ultimate aim of improving the health of our communities. Some examples include: providing expertise for projects supported by the AHW Healthier Wisconsin Partnership Program; contributing to the MCW Cancer Center Roadmap for CE; co-sponsoring seed grant programs with the MCW Cancer Center, the MCW Cardiovascular Center, the Clinical and Translational Science Institute of Southeastern WI, and the MCW regional campuses; fostering leadership and expertise with mentees across multiple MCW departments and campuses and other academic institutions; supporting the ThriveOn Collaboration; building partnerships among MCW researchers and the community through events such as CE Conferences, Lunch & Learn Series, and Health Science Squares; and leading taskforces and serving on a variety of committees advancing CE.

In this publication, we focus on achievements and projects from the past two years. Some of the innovative highlights include the deployment of a CE dashboard to visualize and explore thousands of CE data points that have been collected over the years, and the implementation of a novel Immersion Program which brought together 9 researchers from across the US and Canada in collaboration with 25 community partners from multiple community-based organizations.
It is only through genuine partnerships and mutual, longstanding commitments to the communities we serve that MCW can impact lives and play a role in improving health in Wisconsin. We express our heartfelt gratitude to all our community partners—we are proud of the achievements we have made together and are honored by their trust, support, and partnership. As I step down from my role at MCW, I leave behind many accomplished and dedicated faculty and staff who can and will take CE to an even higher level. I hope that everyone will continue to take the values and principles of community engagement to heart; I ask you all to continue to be authentic as you work and partner with communities. Our communities deserve nothing less than our honesty, time, resources, and friendship. I am grateful for their many trusting relationships with us.

Rome was not built in one day, and neither was MCW’s CE mission: it was built brick by brick by a core group of dedicated CE faculty and staff with contributions from many CE-minded colleagues. I therefore would like to express my deep personal gratitude to the current faculty and staff of the MCW Office of Community Engagement: Zeno Franco; Bryan Johnston; David Nelson; Leslie Ruffalo; Sarah O’Connor; Christine Zeller; Kelsey Heindel; Myah Pazdera; and Erika Petterson. I have led many effective academic teams throughout my career, and I feel strongly that this team is the most outstanding, made up of members who not only talk the talk, but walk the walk with our community partners.

As a final note of gratitude, I would like to acknowledge some of the past and present leaders of MCW who have supported me in my career. I am grateful for the late T. Michael Bolger, JD, MCW President from 1990–2010, and Michael J. Dunn, MD, Dean of the MCW School of Medicine from 1995–2008. Both helped to make a reality the idea of having CE as a fourth mission at MCW. I appreciate the kindness, leadership, and trust of MCW President and Chief Executive Officer, John R. Raymond, Sr., MD, and Joseph E. Kerschner, MD, the Julia A. Uihlein, MA, Dean of the School of Medicine and Provost and Executive Vice President of MCW. Through ups and downs, they have been staunch advocates of our CE mission. I would also like to thank Alan K. David, MD, former Chair of the Department of Family and Community Medicine. Dr. David gave me the time, space, and encouragement to fully develop our new mission. Additionally, I would like to thank Joseph W. Gravel Jr., MD, the current Chair of the Department of Family and Community Medicine, wishing him much success. Lastly, it is worth remembering…community engagement is built at the speed of trust…and…without community, there is no community engagement.

Gratefully,

Syed M. Ahmed, MD, MPH, DrPH, FAAFP
Inaugural Associate Provost & Senior Associate Dean for Community Engagement
Professor, Department of Family and Community Medicine
Professor, Institute for Health and Equity
Director, MCW Community Engagement Core
Director, CTSI Collaboration/Engagement Domain
MCW Receives the Campus Compact Richard Guarasci Award for Institutional Transformation

Campus Compact, a national coalition of colleges and universities committed to the public purposes of higher education, awarded MCW the 2020 Richard Guarasci Award for Institutional Transformation. The award recognizes four-year or graduate education institutions that have successfully implemented institution-wide efforts to address issues of public concern by aligning teaching, research, practice, and values in service of the common good. Recipients are institutions that have undertaken comprehensive efforts to advance the values articulated by Campus Compact.

“This recognition by Campus Compact is a testament to the efforts of MCW faculty, staff, and students to address issues of public concern and to focus on our role to partner with the community in mutually beneficial ways. Collectively, we prepare students, demonstrate commitment to our place-based responsibilities, leverage our capacities, and set high expectations in the spirit of the Campus Compact Richard Guarasci Award for Institutional Transformation,” says John R. Raymond, Sr., MD, MCW president and CEO.

MCW was recognized as a national leader in community engagement through its integration of engagement into research, education, and clinical care with the goal of advancing health policy and advocacy and addressing the social determinants of health. Campus Compact noted that the Medical College of Wisconsin demonstrates a deep strategic commitment to community and is embracing its responsibility as a place-based institution to address diverse health needs throughout Wisconsin.

Community engagement is defined as a collaborative partnership among higher education institutions and the communities they serve, in which the goal is to mutually exchange knowledge and resources. Research has shown that integrating community engagement with clinical care, research, and education missions of an academic health center is essential. When researchers, medical learners, and clinicians understand community engagement and social determinants of health, they are better positioned to address health disparities and health.

“Over the last decade, MCW has made significant institutional strides in establishing its place as a national leader in community engagement and has impacted students, staff, faculty, and community partners,” says Syed M. Ahmed, MD, MPH, DrPH, FAAFP, associate provost and senior associate dean for community engagement. “The institution’s commitment to community engagement through scholarly, place-based, research, educational, and clinical endeavors is recognized by this award.”

“I congratulate MCW’s Community Engagement mission, led by Dr. Syed Ahmed, for this recognition by Campus Compact,” says Joseph E. Kerschner, MD, Julia A. Uihlein, MA, Dean of the School of Medicine and provost and executive vice president of MCW. “Community Engagement elevates MCW’s research, education, and clinical missions and brings students, staff, and faculty proximate to our communities to better understand their needs.” The Richard Guarasci Award for Institutional Transformation is presented as part of Campus Compact’s Impact Awards, which recognize the outstanding work of individuals and institutions in pursuit of the public purposes of higher education.
Some of the specific efforts recognized by the award include:

- Office of Community Engagement’s work with other departments, centers, institutes, and programs to develop capacity to partner with communities and execute the community engagement mission since 2012.

- MCW personnel’s increasing involvement in community engagement demonstrated through data obtained from the annual community engagement survey since 2014.

- Annual awarding of the President’s Award for Community Engagement since 2015, recognizing a total of 37 faculty, staff, students, and community partners/partnerships for excellence in community engagement.

- Educational opportunities for MCW medical, pharmacy, and graduate students to be community engaged.

- Scholarly advancement of community engagement through a 2018 key article from the Office of Community Engagement establishing a model and creating a common dialogue: The Community Engagement Practical Model.

- Stewardship of the Advancing a Healthier Wisconsin (AHW) Endowment Fund since 2004 which has provided MCW with a unique opportunity to invest significant new resources into innovative partnerships to improve health throughout the state.

- Serving as a founding and driving partner in the community-centered ThriveOn Collaboration with the Greater Milwaukee Foundation and Royal Capital Group, thus embracing MCW’s role as a place-based institution in Milwaukee.

Moriah Iverson, formerly at MCW, was a member of a community-academic team that was awarded a Community Engaged Research (CEnR) Seed Grant called “Developing a culturally adapted intervention to increase physical activity among young African-American men with spinal cord injury due to gun violence.” She’s shown here with some of her partners presenting their poster about the project at the 2019 Community Engagement Spring Conference. The seed grant award was a collaborative effort of the Community Engagement Core at MCW and the Clinical and Translational Science Institute of Southeast Wisconsin and was funded by the Research and Education Program Fund, a component of the Advancing a Healthier Wisconsin Endowment.
MCW Community Engagement Responds to the COVID-19 Pandemic

The COVID-19 pandemic forced our office, along with much of the rest of the world, to adapt, respond quickly, and find novel ways to enhance our operations, provide reliable information, collaborate, and support our community.

MCW PARTNERSHIPS

Since the onset of the pandemic, the Office of Community Engagement (OCE) worked with numerous MCW centers and departments including MCW Communications, Office of Diversity and Inclusion, Kern Institute, Center for Healthy Communities and Research, the Clinical and Translational Science Institute of Southeast Wisconsin, Institute for Health and Equity, Cancer Center, Department of Family and Community Medicine, and Academic Affairs.

MaskUpMKE

MaskUpMKE is a collaboration that began to combat the shortage of masks nationwide and its impact on Milwaukee in the early days of the pandemic. Thaddeus Kryshak, a recent graduate in engineering and physics, and his father Mike, owner of Rebel Converting, produced and donated 3.5 million mask kits for assembly and distribution. Thad developed a way to convert materials the company already used to manufacture hospital-grade disinfectant wipes into a face mask similar to a surgical mask. Medical College of Wisconsin assisted with mask assembly and distribution. Community Engagement worked with the Kern Institute, MCW employees and medical students to assist in the distribution of masks to community-based organizations and underserved communities. Community Engagement contributed to the effort:

- Distributed 11,000 face coverings to Federally Qualified Health Centers (FQHCs) in Milwaukee, Racine, Kenosha, and Waukesha and connected personally at each delivery with the operations designee to ensure a solid hand-off.
- Supervised and coached medical students as they distributed 220,000 face coverings to approximately 80 community social services agencies, churches, mosques, police stations, correctional facilities, and grocery stores throughout the region.
- Created a priority list for mask distribution that reflected on-the-ground conditions and was based on level of impact and risk for various communities.
- Worked closely with long-term community partners who managed transport and delivery of mask supplies and distribution.

IMAGES: (top) Tou Fong Lee distributing public health information, masks, and sanitizer to Hmong and SE Asian Community at 5XEN Marketplace; (middle) Thad Kryshak from Rebel Converting and Venus Coates from Kern overseeing scaling up of MaskUpMKE effort, transitioning operations from MCW to Fiserv Forum; (bottom) Mask distribution in April 2020 to Progressive’s Lisbon Avenue Health Center location
COMMUNITY CONNECTIONS

Provided key information about COVID-19 precautions and prevention strategies in a March email to approximately 650 community partners.

Connected directly with approximately 30 community-based organization partners in the beginning weeks of the pandemic, including Dryhootch, Friedens Community Ministries, Immanuel Church, Milwaukee Public Schools (MPS), Neighborhood House of Milwaukee, StreetLife Communities, and United Community Center (UCC).

Participated in departmental and community strategizing about addressing opioid use disorder/overdose death spike on Milwaukee's near northside.

Conducted individual community conversations with a recognition of the need for providing best practices and emotional support to community thought leaders.

Assisted with food distribution through awareness building, connections, and distribution at various community sites.

Established the OCE COVID-19 Rapid Response fund and donated over $1,400 to 10 grassroots efforts intended to meet urgent proximal needs (Ayuda Mutua MKE, Immanuel Church Benevolent Fund, Love on Black Women, Metcalfe Park Community Bridges, StreetLife, Tandem, and personal support for community members).

ARTWORK: (top) Tou Fong Lee, We too, shall overcome this period (Peb Yeej Yuav La Koj Dhaub Lub Sijhawn No), Fiber Art, 2020; (middle) Enrique Murguia, Safe Communities, Painting, Collage, Mural, 2020; (bottom) Jeanette Arellano, Ponte La Máscara (Protect Yourself), Graphic Design, 2020

CREATIVE HEALTH COLLECTIVE / STOP COVID-19

Dr. Zeno Franco and Dr. Katinka Hooyer received a $500,000 Advancing a Healthier Wisconsin (AHW) COVID-19 Rapid Response grant to work with artists and community health workers to communicate public health information about the pandemic in ways that are more accessible to communities of color. This project, led by the City of Milwaukee Health Department, the Milwaukee County Office on African American Affairs, and MCW provided direct support to African American, Hispanic, Native American, and Hmong/SE Asian communities through culturally tailored infection control messaging, food and housing relief, masks, diapers, and assistance in navigating the COVID-19 testing process. These nine community health workers provided essential direct connection to families and businesses throughout the region during the crisis: Otis Winstead, Cecilia Garcia, Wade Fernandez, Tou Fong, Danielle Washington, Emily Craft, Sharmain Harris, Angeles Soria, and Zong Yang.
CE Metrics: From Data to Dashboard

The MCW Office of Community Engagement (OCE) initiated an institution-wide survey in 2014 to identify community-engaged activities in order to inform strategies for advancing the community engagement (CE) mission at MCW. Given the scale of MCW’s workforce, the survey is distributed annually alternating between faculty and staff.

Each year, the OCE strives to improve the survey by simplifying methods and increasing accuracy. Surveys from 2018 and earlier utilized the platform Qualtrics, but the system was cumbersome and had limited functionality. Thus in 2019 we converted the survey to the Research Electronic Data Capture (REDCap) system which allows for a more versatile and user-friendly interface and enables accurate and longitudinal reporting of results.

The new survey is a success: in 2017 the staff response rate was 34% but in 2019—the first year REDCap was used—the rate rose to 68%, giving us a more comprehensive picture of MCW’s CE mission. Respondents provided feedback that they preferred the time-saving features of the new survey. On the administrative side, previously manual processes are now automated, resulting in substantial efficiencies. Importantly, survey data housed in REDCap can now be seamlessly linked to institutional demographic, labor, and grants databases through the new CE Dashboard.

The CE Dashboard was originally conceived by Dr. Syed Ahmed in 2016 to address increasing needs—evident on a national level—to better measure the critical components of CE work [1,2]. After years of development, and in collaboration with MCW’s Business Intelligence team, our CE Dashboard was deployed on November 9, 2020 and is now available for all MCW departmental leaders to explore. Dr. Ahmed is indebted to the OCE team—Christine Zeller, Kelsey Heindel, Dr. Zeno Franco—for taking leadership roles in developing this dashboard, along with the MCW Business Intelligence team—Jeff Morrow, Oksana Pigna, Shweta Murari—for conducting the technical build and integration with enterprise systems, such as the grants, labor, and human resources cubes and then creating a platform for visualizing the results.

The CE Dashboard serves as a novel tool for exploring our rich, longitudinal CE data with a simple interface and in a way that vastly facilitates data management. Spreadsheets and graphs can be instantly downloaded, thereby improving reporting capabilities used for: mission advancement; identifying strategic priorities; substantiating CE research; renewing the Carnegie CE Classification; applying for grants, awards and recognitions; reinforcing aims for benefiting the health of our community. Key metrics of the CE Dashboard include: CE grant dollars and
personnel effort; CE survey results; unique community partners. Future work will focus on continual enhancement and real-time capture of CE activities. As far as we know, this is the first CE dashboard at an academic medical institution. We hope that this dashboard will serve as a model to meet the needs of other institutions throughout our nation.

Recognizing Excellence in Community Engagement

2019 Awardees

Al Castro, MS
United Community Center
Community Partner

Beth Thorson, LCSW, ACSW
Free and Community Clinic Collaborative
Community Partner

Zeno Franco, PhD
MCW Faculty—Milwaukee

Robert Gouthro, MD
MCW Faculty—Green Bay

Megan Cory
MCW Student, Class of 2021

Christian Hernandez
MCW Student, Class of 2021

Na'il Scoggins
MCW Student, Class of 2021

Toni Gray
MCW Staff—Milwaukee

Broderick Pearson
MCW Staff—Milwaukee

Tiffany Frazer, MPH
MCW Staff—Milwaukee

The annual MCW President’s Community Engagement Award, administered in partnership with MCW’s Office of the President, recognizes exemplary leadership and excellence in community engagement by MCW faculty, staff, students, and community partners. The award celebrates community-academic partnerships and projects, community-engaged research, and community outreach activities which advance MCW’s community engagement (CE) mission and have an impact on improving the health of Wisconsin communities. Presented by MCW President and Chief Executive Officer, John R. Raymond, Sr., MD, the awards serve as a poignant tribute to the importance of community engagement and partnership in enhancing education, research, patient care, and the health of our communities.

Since 2015, the MCW President’s Community Engagement Award has honored 37 community engagement practitioners: 10 students, 10 staff members, nine faculty members, and eight community partners/programs. Recent recipients have demonstrated magnanimous work in many areas including: health and physical education for Milwaukee’s youth; advancing opportunities for underrepresented undergraduates in medicine; education regarding cancer disparities and prevention; nutrition education and support for urban farming; advocacy for vulnerable patients and populations; and youth violence prevention.

The Office of Community Engagement’s (OCE) award ceremony is usually held each spring, but due to COVID-19, our 2020 ceremony was postponed—and, for the first time, held in a virtual format at the end of October. Also for the first time, the OCE collaborated with MCW’s Office of Diversity and Inclusion to recognize our respective awardees together during a joint ceremony. The virtual ceremony proved to be as meaningful and inspirational as any in-person event, and, in fact, made it easier for family, friends, and colleagues to “attend.” Audience members appreciated being able to post “live” heartfelt words of congratulations in the “chat” bar—which contributed to the poignancy of the celebration. Dr. Raymond’s closing words served as a testament to the excellence of both past and present awardees: “…their tireless efforts, their remarkable impact... has been critical to supporting our communities.”
"Being recognized by the President's Community Engagement Award in 2019 was a humbling honor and a reaffirmation of not just my efforts, but UCC's and our other community partners' everyday work to improve health outcomes for our Latino community." — Al Castro, 2019 awardee

2020 Awardees

Brett Fuller, MAE  
Milwaukee Public Schools  
Community Partner

Michael Levas, MD, MS  
MCW Faculty—Milwaukee

Staci Young, PhD  
MCW Faculty—Milwaukee

Bisola-Sarah Omoba  
MCW Student, Class of 2020

Jermaine Murry, MS  
MCW Staff—Milwaukee

Jennifer Ovide, RN, BSN  
MCW Staff—Milwaukee

"I am extremely honored to receive this award. My work has been inspired by the words of Muhammad Ali: 'Service to others is the rent you pay for your room here on earth.' And I will continue to live by these words and always continue in my service." — Jermaine Murry, 2020 awardee
MCW Engage 2019 Focuses on Strengthening Partnerships and Cultivating Capacity

The Office of Community Engagement (OCE) convenes academic and community partners for education, discussion, and action at community engagement conferences that focus on community and academic-relevant topics, including community-engaged research (CEnR). Sessions are designed to foster rich dialogue and promote knowledge, networking, and community-academic collaboration to impact health disparities. To date, more than 1,800 participants have engaged in our conferences.

In May 2019, the OCE held our fifth annual community engagement spring conference—MCW Engage 2019: Cultivating Capacity. Strengthening Partnerships. Through a variety of speakers, exercises, and sharing of resources, we focused on leadership, planning, and relationship-building strategies for nurturing strong community-engaged partnerships. The day was kicked into high gear with “Process is the New Program,” an inspiring keynote address given by Susan Lloyd, PhD of Lloyd Consulting, Inc. and Darlene Russell of the Greater Milwaukee Foundation. The talk was followed by three workshops which explored: project planning and development with a focus on making timely decisions for effective implementation; traditional dynamics of power and authority in positional leadership; and the ways people absorb information and engage differently on a team and how to communicate using the True Colors philosophy.

The second day of the conference featured the Community Engagement Poster Session followed by the President’s Community Engagement Award Ceremony. The poster session highlighted over 50 projects presented by MCW students, staff, and faculty, and community and academic collaborators, including high school students participating in the DRIVE (Delivering Research Innovation Via Experience) and SUPREMES (Students Understanding Principles of Research Education through Medicine, Engineering, and Science) programs. We capped off our conference with a screening of Invisible Lines, a feature-length documentary film about Milwaukee through the eyes of 10 residents of color. The screening was followed by a discussion panel which included community leaders from the education and health sectors, a community-engaged MCW faculty member, and a member of the film’s production team.
Community Engagement Shifts to Virtual Programming During COVID-19

The Office of Community Engagement (OCE) hosts a variety of programs that focus on community-engaged research and topics relevant to our community. Due to the COVID-19 pandemic in 2020, we shifted events from in-person to virtual, allowing us to continue strengthening community and academic collaboration by promoting community engagement (CE). Regardless of the mode of convening, we continue to successfully foster rich dialogue and opportunities to network and share knowledge.

FROM COVID-19 TO ACTION WEBINARS
To comply with COVID-19 safety guidelines, we utilized technology to convene virtually. When we saw the need to highlight critical issues facing the community during this difficult time, we initiated a series of webinars focused on identifying and addressing the impact of COVID-19 on social determinants of health. This series, *From COVID-19 to Action*, brought together community and academic partners including clinicians, researchers, students, academic staff, community partners, and others to discuss topics such as opioid misuse, food insecurity, housing instability, mental wellbeing, and rural health.

The virtual format proved advantageous for a wider audience to participate, either directly during the live events, or later by watching the recorded sessions. In this way we were pleased to connect with 300 individuals in our webinar series from June to December 2020.

COMMUNITY ENGAGEMENT POSTER SESSION
The 6th Annual Community Engagement Poster Session was held on November 17, 2020 in a live, virtual format with an audience of over 150 individuals. 48 presentations took place across six

From COVID-19 to Action: Community and Clinical Response to Opioids

The COVID-19 pandemic layered a crisis on top of the existing opioid epidemic crisis leading to a rise nationally and locally in drug overdose deaths. We explored how clinics, coaching, and recovery facilities adapted to provide in-person and telemedicine services and how they sought to mitigate the impact of modified service delivery on those in recovery and those seeking help for the first time.

Plenary Speakers:
- Lesley Wimmer, LAMFT, Director of Government and Strategic Affairs for Community Medical Services
- David Galbis-Reig, MD, DFASAM, Medical Director of Addiction Services, Ascension Wisconsin All Saints; President, Wisconsin Society of Addiction Medicine

From COVID-19 to Action: Community and Clinical Response to Food Insecurity

The COVID-19 pandemic intensified food insecurity, especially among vulnerable populations including the elderly, children reliant on school nutrition programs, and those with mental health problems. We explored how food distribution sites and programs rapidly pivoted to implement infection control procedures and meet increased need for services through a variety of strategies.

Plenary Speakers:
- Rayna Andrews, Senior Director of Community Impact, Feeding America Eastern Wisconsin
- Jennifer Ovide, RN, BSN, Community Medicine Clinical Coordinator, All Saints Family Health Center
- Rev. Dr. Daniel Czaplewski, Pastor, Mount Calvary Community Development Corporation
From COVID-19 to Action: Community and Clinical Response to Housing Instability

The COVID-19 pandemic intensified preexisting housing instability within Milwaukee as unemployment and community eviction risk increased. We explored how organizations and programs working with individuals experiencing homelessness and housing insecurity pivoted to implement infection control procedures in shelters and services and disseminated updated information about resources to meet immediate needs.

Plenary Speakers:
  * Sabina Diehr, MD, Associate Professor of Family and Community Medicine, MCW
  * Joe’Mar Hooper, Executive Director, Safe & Sound, Inc.

From COVID-19 to Action: Responding to Mental Health Needs in Our Community

During the pandemic, indicators of mental health challenges, including clinical signs of depression and usage of the federal distress hotline, pointed to increased mental health needs in the community. We explored how mental health providers worked to meet needs by leaning heavily on telementic medicine and modifying in-person appointments to address infection control. The group also discussed creative ways to address feelings of isolation and depression during the pandemic.

Plenary Speakers:
  * Sebastian Ssempijja, PhD, CEO/Clinical Director, Sebastian Family Psychology Practice
  * Courtney Barry, PsyD, MS, Assistant Professor of Psychiatry and Behavioral Medicine, MCW

From COVID-19 to Action: Responding to Rural Health Needs

The pandemic impacted rural communities in specific ways and exacerbated pre-existing challenges. We explored how COVID-19 affected rural healthcare and medical education, as well as how community economic development is a driver of rural health. We also examined the impact of political polarization during the pandemic on rural communities.

Plenary Speakers:
  * Lisa Dodson, MD, Founding Dean and Professor, MCW-Central Wisconsin
  * Tim Size, Executive Director, Rural Wisconsin Health Cooperative

breakout rooms, showcasing timely and important work involving community-engaged research projects by MCW students, staff, faculty, and community and academic collaborators. A few of the wide-ranging topics covered included child health, medical student education, community messaging, and creative care for vulnerable populations. Recordings of the event were made available which allowed a wider audience to participate and preserved a record of this important event in a novel setting.

Moving forward, the OCE will leverage the advantages of virtual platforms to enhance our ability to successfully bring together academic and community members for collaborative work and discussion about issues pertaining to the health of our community.

VIRTUAL MEDICAL STUDENT COMMUNITY ENGAGEMENT JOURNAL CLUB

Following the 2020 Medical Student Community Engagement Summer Immersion Program (see page 19), a subset of the students indicated interest in continued learning and discussion around community engagement. The OCE hosted a three-month virtual medical student community engagement journal club to translate CE principles into medical practice. Students from both MCW and the University of Nebraska Medical Center attended. Three 60-minute sessions took place in fall of 2020.

Students were provided readings that focused on different themes, including equity, practical applications of community-engaged research, CE quality improvement in health care, and the integration of CE in medical student education. Leslie Ruffalo, PhD, MS, associate professor in family and community medicine and Bryan Johnston, MD, assistant professor in family and community medicine, facilitated the sessions, with discussions guided by student input and interest. During the virtual journal club, students were able to both learn about CE principles and reflect on how to integrate this knowledge into their medical practice.
The Community Engaged Scholars Mentoring Network recognized mentees and mentors for their successful completion of the program in the spring of 2019. Mentees applied to join a cohort in 2017, 2018, or 2019, and were able to remain enrolled in the program for up to three years. During the program, eight community-engaged mentors guided 20 mentees to learn, develop, and strengthen competencies related to community-engaged research (CEnR).

Mentees represented 12 MCW departments, institutes, and schools, two MCW campuses, and two non-MCW institutions of higher learning. Mentoring occurred through both a traditional mentor-mentee pairing and through a peer cohort model where mentees served as peer coaches for other mentees at monthly cohort meetings. Mentee competency and readiness for CEnR, measured by annual self-assessments and conversations in monthly cohort meetings, improved most notably in the first year of mentoring. Over the three years, mentees showed the greatest improvement in the competency related to learning and improvement.

At the conclusion of the program, valuable bidirectional learning had occurred. Mentees interested in pursuing CEnR found support and development through this program. OCE gained a clearer understanding of internal and external challenges facing researchers pursuing CEnR and the need to continue to offer this type of competency-based learning.
Community Engaged Scholars Immersion Program Launches in 2019

“It’s more than volunteering. It is about getting into a group and not just expecting to be inside without the work. Then you have to maintain the relationship and make sure you get outside of your comfort zone.” —Participant

After considering how to provide an immersive experience that truly introduced researchers to community engagement, the OCE launched the Community Engaged Scholars Immersion Program in 2019. This program provided an immersive experience for nine researchers from the US and Canada who came to learn about community-academic partnerships, social determinants of health (SDOH), and strategies to combat health disparities. This 5-day experience introduced participants to MCW researchers and Milwaukee community partners.

The program kicked off with a screening of and discussion about the documentary film Invisible Lines, which featured unscripted conversation about segregation, racism, and discrimination from a diverse pool of Milwaukeeans of color. For the following two days, participants spent time in Milwaukee neighborhoods learning from community organizations and residents through a collaboratively developed curriculum and robust discussion. The final two days of the program integrated the program participants into OCE’s spring community engagement conference (see page 14). A total of 20 community partners and MCW faculty and staff hosted sessions over the course of the program. Each session was in alignment with SDOH, focused on assets and challenges of various communities, and enabled participants to immerse in some of the programming that occurs to bridge disparities in different Milwaukee communities.

In their satisfaction surveys and wrap-up discussion group, participants reported that learning about SDOH was enhanced by hearing real stories from community partners, that they learned how to identify and explore SDOH in research, and that they would recommend the program to colleagues.

“For me this is an emotionally draining experience. It hit me later and made me reflect, and I am still absorbing. I thought I was in the community until this experience. This is a program I will share. Unless we go to these partners and spend time, we are talking about two different worlds.” —Participant
Engaging Medical Students in Summer Learning

In order to provide an opportunity for medical students to learn about community engagement (CE) and community-engaged research (CEnR), the MCW Office of Community Engagement (OCE), in collaboration with the Clinical and Translational Science Institute of Southeast Wisconsin (CTSI) Medical Student Summer Research Program (MSSRP), offered a Medical Student Community Engagement Summer Immersion Program. Due to the COVID-19 pandemic, the program was virtual.

Understanding CE and CEnR is important to address social determinants of health (SDOH) and resulting health disparities [1]. Medical professionals are more likely to meet the challenges of societal issues when they understand CE [2]. Thus, it is critical that medical education is infused with CE in order for clinicians to understand SDOH and address health disparities.


**METHODS**

A virtual immersion program was developed and led by faculty and staff in the OCE.

- MCW second year medical students (M2) who participated in MSSRP attended a required didactic session: "Community Engagement—A key component of medical education."
- MCW MSSRP students and students from University of Nebraska Medical Center (UNMC) were invited to submit applications for a 3-session immersion program.
- Application questions focused on CE interest and experience; prior CE experience was not required.
- Immersion program sessions focused on principles of CE and CEnR. MCW faculty and community partners co-led each session. Post-session evaluations asked participants to provide feedback about the session, their learning, the speakers, and further interest.

**RESULTS**

The inaugural, virtual Medical Student Community Engagement Summer Immersion Program emphasized collaboration among CTSI MSSRP faculty and staff, our community partner experts, and the involvement of medical students at different stages in their education (M2s from MCW and M2s through M4s from UNMC.) Our initial didactic session reached 75% of all M2s at MCW. Following the initial CE-focused didactic session, 13 MCW students applied to the immersion program, along with 17 UNMC students. After each session, we distributed a satisfaction survey to all students. Of
those students who responded, at least 90% strongly/somewhat agreed the session was worthwhile and 100% strongly/somewhat agreed they learned something they will use in their practice/profession. At the conclusion of the program, 40% of participants expressed interest in continuing their learning through a CE journal club (see page 17). Discussion and feedback from participants illustrated the importance of offering medical students an opportunity to learn about CE and to engage with other medical students, faculty, and community partners.

STUDENT INSIGHTS AND FEEDBACK

"As a MCW alum, former resident, and current faculty member, I know the impact that community engagement education can have for a developing physician. Community engagement allows me to impact the health of my patients and community in very different ways than in the hospital or exam room, and I’m committed to helping develop future community-engaged physicians."

— Bryan Johnston, MD, assistant professor in family and community medicine; faculty co-lead for Medical Student Community Engagement Summer Immersion Program
There has been an alarming increase in opioid overdoses nationally, and our local community has not been spared from this trend. Opioid use disorder (OUD) is an epidemic that disproportionately affects military Veterans who are more likely than the general population to experience trauma, chronic pain, and post-traumatic stress disorder (PTSD), all of which are associated with opioid misuse. The Milwaukee Prevention of Opioid Misuse through Peer Training (PROMPT) project focused on the prevention of opioid misuse and OUD in a subset of the Milwaukee Veteran population by seeking to change knowledge, attitudes, and behaviors through a peer-delivered OUD prevention curriculum. The OUD prevention curriculum was co-created with stakeholder input using a community engagement approach.

MCW partnered with two local organizations using a community-engaged framework. These organizations, Dryhootch and Mental Health America of Wisconsin (MHA), were essential collaborators. Dryhootch is a nonprofit organization formed by combat Veterans to help Veterans in their return home. MHA is an affiliate of the national non-profit dedicated to helping all Americans achieve wellness by living mentally healthier lives, and has extensive experience implementing programs for populations affected by opioid addiction. Zeno Franco, PhD, associate professor of family and community medicine, has longstanding partnerships with both Dryhootch and MHA.

Support for this project was provided by Clinical Scholars, a national leadership program supported by the Robert Wood Johnson Foundation. Syed M. Ahmed, MD, MPH, DrPH, FAAFP, associate provost and senior associate dean for community engagement, was the project’s principal investigator and Clinical Scholar “captain.” The other Clinical Scholars were L. Kevin Hamberger, PhD, MCW professor of family and community medicine; Kajua Lor, PharmD, BCACP, MCW School of Pharmacy founding chair and associate professor of clinical sciences; and Robert Hurley, MD, PhD, associate dean of faculty development and professor of anesthesiology at Wake Forest School of Medicine. To complement the Clinical Scholar team’s expertise, Milwaukee PROMPT established a Community-Academic Advisory Board comprised of clinicians, mental health professionals, Veterans, and community members engaged in local work to address Veterans’ health issues.
PARTNERSHIP PROFILE

Dr. Kajua Lor, a Robert Wood Johnson Foundation Clinical Scholar and clinical pharmacist at MCW, was part of the Milwaukee PROMPT project. Born and raised in an immigrant, refugee Hmong family in Wisconsin, Dr. Lor’s grandfathers were secret soldiers in the Vietnam war, recruited by U.S. CIA agents to interrupt the supply of the Viet Cong from the North to the South of Vietnam and to save the lives of U.S. pilots. One of these U.S. soldiers saved from the Vietnam war was the founder of Dryhootch, our community partner. When the U.S. troops withdrew from Vietnam, hundreds of thousands of Hmong were left behind. Dr. Lor’s family was resettled in Wisconsin. The trauma of war, losing loved ones, post-traumatic stress disorder, and the feeling of “not belonging” are experiences she relates to having grown up in a refugee family. Her perception of addiction and treatment for addiction transformed after working with Otis Winstead, the Executive Director at Dryhootch. Otis used heroin for over 30 years, starting soon after his military discharge in 1976. He was frequently in and out of recovery centers, VA treatment programs, and private rehabilitation facilities.

Otis describes the need to face the trauma he experienced before military service, during military service, and the trauma self-inflicted after military service during his active addiction. Otis attributes his recovery journey to the most profound truism of his life, which is hope. Dryhootch instilled this hope, and with his work as a peer mentor at Dryhootch, Otis was able to take a step deeper into his own recovery. He now shares his lived experiences and spreads his message of hope to other Veteran peer mentors and has assembled a team of peer mentors to help other Veterans with addiction. Peer mentors build hope and are essential for Veterans on their road to recovery from addiction. As a clinical pharmacist and a Hmong refugee, Dr. Lor learned that trust is earned by taking off the “white coat,” practicing humility, and walking alongside Veterans.

KEY MESSAGES LEARNED

Self-care is the key to recovery—the Veteran peer mentors trained during this project are in recovery themselves, so we emphasized the importance of taking care of yourself while doing the work.

Power of influence—Veterans in recovery who surround themselves with a strong circle of influence create positive behavior change and remain in recovery.

Meet them where they are—everyone has their own story; for some addicts, the road to recovery is about facing the trauma of what happened before, during, or after military life. Peer mentors support Veterans to get the help they need and connect with clinicians.

Include the community—we learned to walk alongside Veterans and include the Veteran voice to make a greater impact.
Community Engagement Learning Repository (CELR) Gets a New Look and More Features

In January 2015, endorsed by the Medical College of Wisconsin offices of both the Dean of the School of Medicine and the President, the Office of Community Engagement began development of an interactive repository to enhance dissemination and collaboration for research and scholarship in community engagement (CE). The resulting Community Engagement Learning Repository (CELR) is a collaboration tool and digital library which offers an opportunity to share and exchange research tools and resources from community-academic partnerships and projects that address social determinants of health, health disparities, and health and healthcare outcomes.

The digital world is constantly changing and updating. This has also been true for the CELR. The most recent manifestation, completed in 2020, included design and function upgrades and improvements in addition to a brand-new interface. Two years in the making, this site overhaul added the capacity for users to make their own accounts, save documents to their own libraries for future use or reference, download and use tools and products from other community engagement projects, and upload and share their own project artifacts. The new iteration of the CELR will be unveiled fully in 2021.

The goal is for this repository to grow and respond to evolving needs of community-academic partnerships, including those related to education, community-engaged and translational research, and the tenets of CE. As the CELR evolves we anticipate many forms of return of investment for our institution, our local and statewide communities, and hopefully other communities on a national and international scale.

You can visit the CELR at [celr.mcw.edu]
Connecting the Community to Precision Medicine and Genomics

The *All of Us* Research Program at Froedtert & the Medical College of Wisconsin

The *All of Us* Research Program (*AoU*) is one of the largest precision medicine and genomics research efforts ever undertaken. Precision medicine is an emerging approach for disease treatment and prevention that takes into account individual variability in genes, environment, and lifestyle. The National Institutes of Health-funded *AoU* program is operating at 10 sites across the US, with Wisconsin serving as one of those locations. *All of Us* aims to work with one million people in the US from widely varied backgrounds to ensure that full genome sequences and associated health outcome data are fully representative of our population. This includes emphasizing inclusion of groups that have been traditionally underrepresented in biomedical and genomics research. Because some of these under-represented groups have complicated histories with medical research, thoughtful outreach and communication about the goals of the *AoU* program are important.

Community engagement has served as a key strategy in advancing community wide understanding of the future potentials of precision medicine. We are also working very carefully to partner with Federally Qualified Health Centers (FQHCs)—often referred to as Community Clinics—to ensure communities of color can participate in *All of Us* easily at neighborhood locations.

A particular success story for us has been our partnership with Sixteenth Street Community Health Centers to encourage communities of color to participate in the *All of Us* Research Program. Dr. Julie Schuller, the CEO of Sixteenth Street Community Health Centers, and key members of her team including Dr. Pam Wilson, VP Medical Affairs, Liz Claudio, VP of Operations, and Bently Turner, VP Information Systems, have helped facilitate and expand this effort over the last three years, working closely with Brad Taylor and Brian Skrade from MCW bioinformatics.

We are also excited to note that *AoU* added a new Program Director in early 2020, Karen Dotson, MHSA, who brings extensive administrative and engagement experience with diverse communities throughout the greater SE Wisconsin region. Mrs. Dotson took over day-to-day operational control of the *AoU* program—including clinical research and community engagement operations—just before the COVID-19 pandemic struck and has successfully guided a staff of about 20 through this complex time.

by Zeno Franco, PhD, Site Co-PI, *All of Us Wisconsin*
After a successful season one with 15 episodes ranging from topics of medication management and tobacco control, to public and rural health, health equity, plant-based diets and childhood development, the podcast partners began working to highlight Back to the Kitchen Healthy Cooking Series Curriculum, originally created in 2013. The curriculum was developed by Yvonne D. Greer, MPH, RD, CD, Owner & Nutritional Consultant for Y-Eat Right for Healthy Living in Milwaukee, with the help of partners from the United Neighborhood Centers of Milwaukee (UNCOM) Milwaukee Childhood Obesity Prevention Project, a Robert Wood Johnson Foundation (RWJF) Healthy Kids, Healthy Communities grantee.

The curriculum will move from its original form into a mini video series with a demonstration of recipes and discussion with local partners representing people and communities of color that are impacted disproportionately by chronic diseases such as diabetes, cardiovascular disease, and cancer. The video products will help in spreading education around these topics and provide simple recipes to support a lifestyle to overcome or manage these conditions.

By David Nelson, PhD, MS
Caregiving is an important public health issue that impacts relationships, health status, and quality of life across the lifespan for both caregivers and care recipients.” [1] We recognize that our efforts alone cannot change the care receiver’s disease trajectory or decrease a family caregiver’s responsibility and burden, but we are unwavering in our belief that our work will support and increase each family caregiver’s capacity to manage the stress that is attributable to caregiving.

Our partnership’s strength is grounded by the multi-dimensional expertise and diverse perspectives offered by each partner. Our partners have strong voices backed by many years of experience in their respective disciplines. There is a tone of commitment to our work and mutual respect and support for one another that permeates our efforts and elevates the innovative ways that we are building a better system of family caregiver support.

By Leslie Ruffalo, PhD, MS

Accomplishments

AWARDS:

Syed Ahmed, MD, MPH, DrPH, FAAFP
T. Michael Bolger Award, 2019

Zeno Franco, PhD
Carmi Harari Early Career Award from the American Psychological Association’s Society for Humanistic Psychology (Division 32), 2019

MCW President’s Community Engagement Award, 2019

MCW Family and Community Medicine Researcher of the Year Award, 2020

David Nelson, PhD, MS
MCW Family and Community Medicine Researcher of the Year Award, 2019

Richard Holloway Distinguished Mentor Award, 2020

SELECTED PRESENTATIONS:

Syed M. Ahmed, MD, MPH, DrPH, FAAFP, inaugural associate provost and senior associate dean for community engagement
Milwaukee PROMPT: Prevention of Opioid Misuse through Peer Training. 2019 Student-centered Pipeline to Advance Research in Cancer Careers. Ahmed SM, Lor K.


Taking the Road Less Traveled: An Academic Medical Center’s Journey Towards Community Engagement. 2020 Medical College of Wisconsin Leadership Roundtable. Ahmed SM.

Community Engagement: A Key Component of Medical Education. 2020 Student-Centered Pipeline to Advance Research in Cancer Careers. Ahmed SM.


Leslie Ruffalo, PhD, MS, associate professor, Family and Community Medicine

Increasing Low-SES Consumers Access and Use of Milwaukee Farmers Markets to Improve Produce Intake. 2019 Society of Teachers of Family Medicine Annual Conference. McCurdy A, Ruffalo L.


David Nelson, PhD, MS, associate professor, Family and Community Medicine
Connecting Food Security to a Patient Centered Medical Home and Back Again. 2020 Medical College of Wisconsin Pancreas Journal Club. Runkle N, Nelson D.


Food Security and Housing Stability to Support the Health of the Community. 2020 Pediatric Emergency Department GrandRounds. Nelson D.

Bryan Johnston, MD, assistant professor, Family and Community Medicine
Confronting Learner Bias with Art: An Experiential Session. 2020 Society of Teachers of Family Medicine Annual Conference on Medical Student Education. Johnston B, Aninwene A.

Buprenorphine Waiver Training and How to Train Our Way Out of the Opioid Epidemic. 2020 Society of Teachers of Family Medicine Annual Conference on Medical Student Education. Hayes J, Hultberg K, Johnston B.
SELECTED PUBLICATIONS:


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Definitions

Anti-Racist Institution is an institution that has committed to identifying and changing its role in the systemic accumulation of disadvantages for one group(s) to the advantage of another group(s), based on persisting racist beliefs, with a sustained focus on racism that impacts Black Indigenous People of Color (BIPOC).¹

Black Indigenous People of Color (BIPOC) is a phrase used to identify people who are Black, Latinx, Asian and Indigenous peoples (see the definition for People of Color—POC). "Two letters, for Black and Indigenous, were included in the acronym to account for the erasure of Black people with darker skin and Native American people," according to Cynthia Frisby, a professor of strategic communication at the University of Missouri School of Journalism.² Its use is still evolving and contested by some activists.¹

Collaboration is a “…process by which groups come together, establishing a formal commitment to work together to achieve common goals and objectives” through joint ownership of the work, risks, results, and rewards.³

Community is a group of individuals organized into a unit or manifesting some unifying trait or common interest. Community need not be defined solely by geography. It can refer to a group that self-identifies by age, ethnicity, gender, sexual orientation, special interest, faith, life experience, disability, illness, or health condition; it can refer to a common interest or cause, a sense of identification or shared emotional connection, shared values or norms, mutual influence, common interest, or commitment to meeting a shared need.⁴

Community-Academic Partnership is partnership that leverages the strengths of both community and academic partners to answer community health problems.⁵

Community Based Participatory Research (CBPR) is a "collaborative approach to research that equitably involves, for example, community members, organizational representatives, and researchers in all aspects of the research process."⁶ CBPR begins with a research topic of importance to the community with the aim of combining knowledge and action for social change to improve community health and eliminate health disparities.⁷

Community Capacity Building is "an increase in community groups' abilities to define, assess, analyze, and act on health or any other concerns of importance to their members."⁸

Community-Engaged Dissemination is a way to distribute and integrate research evidence and evidence-based practice within communities and service systems.⁹

Community-Engaged Research (CEnR) is “a process of inclusive participation that supports mutual respect of values, strategies, and actions for authentic partnership of people affiliated with or self-identified by geographic proximity, special interest, or similar situations to address issues affecting the well-being of the community or focus.”¹⁰ It "is a core element of any research effort involving communities which requires academic members to become part of the community and community members to become part of the research team, thereby creating a unique working and learning environment before, during, and after the research."¹⁰

Community Engagement is "collaboration between institutions of higher education and their larger communities (local, regional, state, national, global) for mutually beneficial exchange of knowledge and resources in a context of partnership and reciprocity.”¹¹

Community Outreach is "the ways faculty, staff, and students collaborate with external groups in mutually beneficial partnerships that are grounded in scholarship and consistent with [the] role and mission” of their professional appointment.¹²

Community Service is co-curricular or extracurricular service that is done apart from or in addition to academic or professional duties.¹³

Culture is the shared attitudes, values, beliefs, practices, goals, aesthetic standards, linguistic expression, patterns of thinking, behavioral norms and styles of communication which a group of people has developed to assure its survival in a particular environment and characterize a group.¹

Cultural Competence is the capacity to function effectively with various cultures and successfully navigate a multicultural, global society. On an organizational level, it assumes the capacity to creatively utilize a diverse workforce for meeting business goals, achieving the mission, and enhancing performance.¹

Cultural Humility is the “ability to maintain an interpersonal stance that is other-oriented (or open to the other) in relation to aspects of cultural identity that are most important to the person." Cultural humility is different from other culturally based training ideals because it focuses on self-humility rather than achieving a state of knowledge or awareness.¹

Equality is about ensuring that every individual has an equal opportunity to make the most of their lives and talents.¹
Equity is the assurance of conditions for optimal access and opportunity for all people, with particular focus on promoting policies, practices, and cultural messages that eliminate differential negative outcomes for people from historically subordinated groups.¹

Health is broadly defined as a “state of complete physical, mental, and social well-being, and not merely the absence of disease.”¹ It is “a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities.”¹²

Health Disparities refer to “a particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group, religion, socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”¹³

Health Equity means that “everyone has a fair and just opportunity to be healthier. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.” “For the purposes of measurement, health equity means reducing and ultimately eliminating disparities in health and its determinants that adversely affect excluded or marginalized groups.”¹⁴

Inclusion (organizational inclusion) is the co-creation and continual nurturing of a culture in which all people experience respect, belonging, access to opportunity, and influence through the integration of many cultural backgrounds, ideas, perspectives, and approaches to the work. An inclusive culture can produce learning, innovation, excellence, and mutual benefit throughout the missions of MCW and the communities we serve.¹

People of Color (POC) is a phrase used to identify people who are Black, Latinx, Asian, and Indigenous peoples – not to be confused with “colored” (a pejorative because of its historical context); the phrase now frequently is used instead of “minority”.¹,¹⁸

Population Health is “the health outcomes of a group of individuals, including the distribution of such outcomes within the group.”¹⁹

Public Health has the mission of “fulfilling society’s interest in assuring conditions in which people can be healthy.”²⁰ “Public health promotes and protects the health of people and the communities where they live, learn, work, and play.”²¹ “Public health works to track disease outbreaks, prevent injuries, and shed light on why some of us are more likely to suffer from poor health than others.”²¹

Racial Equity is having full participation and access to the benefits and institutions of society free from discrimination for all people. These include health care, education, safe and affordable neighborhoods, sustainable employment, and the right to vote.¹

Racial Inequity is when two or more racial groups are not standing on approximately equal footing.²²

Racism is a marriage of racist policies (any measures that produce or sustain racial inequity between racial groups) and racist ideas (any ideas that suggest one racial group is inferior or superior to another racial group in any way) that produces and normalizes racial inequities.²²

Social Determinants of Health are “the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, and political systems.”²³

Social Justice is “the view that everyone deserves equal rights and opportunities — this includes the right to good health.”²¹ Elimination of oppression and the “isms” to create a full and equal participation of all groups in a society where the distribution of resources is equitable and all members are physically and emotionally safe and secure.¹

Translational Science is “the field of investigation focused on understanding the scientific and operational principles underlying each step of the translational process.”²⁴,²⁵

Translational Science Spectrum is a continuum of “activities where critical insights are passed between research modalities so that biomedical discoveries can lead to tangible improvements in human health.” Basic science discoveries are “translated” to generate clinical insights which then are developed to inform implications for clinical practice which then lead to implications for population health. Levels of the spectrum are often identified by “T”-levels²⁶ which correspond to the following:

- T0—Basic Scientific Discovery
- T1—Translation to Humans
- T2—Translation to Patients
- T3—Translation to Practice
- T4—Translation to Population Health
- T5—Improved Global Health
References

Carnegie Community Engagement Classification
In 2015, the Carnegie Foundation for the Advancement of Teaching, which works to develop networks of ideas and institutions to advance teaching and learning, awarded the Community Engagement Classification to MCW in recognition of the institution’s community engagement practices. The Carnegie Community Engagement Classification designation for MCW is an honor that recognizes the innumerable campus-wide programs and initiatives that are focused on excellence in community engagement and on serving the needs of our communities. MCW is one of four medical schools nationwide who have received this designation.

Spencer Foreman Award for Outstanding Community Service Finalist
The Spencer Foreman Award for Outstanding Community Service is presented annually to a US AAMC-member medical school or teaching hospital with a long-standing, major institutional commitment to partnering with the community it serves to identify and address community needs. MCW was recognized as a top institution in Community Engagement and Community Service as a 2017 Finalist (each year there are two finalists recognized along with the recipient.) This award is one of the most prestigious given by the AAMC and MCW is the only medical school recognized among the top three institutions more than once in the past 11 years.