

COVID-19

Creighton
UNIVERSITY

Health Sciences - Multicultural
and Community Affairs

How the
Coronavirus
(COVID-19)
pandemic is
reshaping life
on campus,
in the
classroom and
in the
community....

CORONAVIRUS

in dead



Mission

The mission of Health Sciences Multicultural and Community Affairs is to promote Creighton University as a recognized leader in the training and development of a multicultural health care workforce that serves to reduce health disparities in underserved and diverse communities through research, culturally proficient education, community interaction and engagements with Ignatian values.

Vision

Health Sciences Multicultural and Community Affairs will be recognized and respected as an innovative department that pioneers and synthesizes community, education, research and the development of future healthcare professionals who are culturally aware and work toward the elimination of health disparities.

Message from the Associate Vice Provost Health Sciences



Sade Kosoko-Lasaki, MD, MSPH, MBA
Associate Vice Provost Health Sciences
Director, Post Baccalaureate/Pre-
Matriculation Programs, Professor.
Ophthalmology

Reflection

These are challenging times, all due to the pandemic caused by the Coronavirus. People are dying and those that are infected are scared. Individuals that have no symptoms are testing positive for the virus. Social distancing makes it difficult to comfort each other with a hug. The students have left the campuses. Our Post Baccalaureate students now take their classes online. Other HS-MACA pipeline students are also engaged remotely.

We need to support each other. Reach out to your neighbors, your co-workers and friends by phone call, email, social media, etc. but remember, no physical contacts. Always remember to wash your hands with soap, follow social distancing, wear mask (I do when I am outside) and take the COVID-19 as a serious affliction on us all. As of the time of writing this reflection, COVID-19 has affected 2.4 million people in the world causing more than 165,000 deaths. In the US alone, it has affected more than 700,000 and caused more than 40,000 deaths.

Be safe and God bless.

"Keep calm and carry on." "The only thing we have to fear is fear itself."

"Don't worry, be happy." CNN



CORONAVIRUS

What is coronavirus disease 2019 (COVID-19)?

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

How does COVID-19 spread?

The virus that causes COVID-19 probably emerged from an animal source but is now spreading from person to person. The virus is thought to spread mainly between people who are in close contact with one another (within about 6 feet) through respiratory droplets produced when an infected person coughs or sneezes. It also may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads. Learn what is known about the spread of newly emerged coronaviruses at <https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html>.

What are the symptoms of COVID-19?

Patients with COVID-19 have had mild to severe respiratory illness with symptoms of

- fever
- cough
- shortness of breath

FACTS ABOUT COVID-19

Know the facts about coronavirus disease 2019 (COVID-19) and help stop the spread of rumors.

**FACT
1**

Diseases can make anyone sick regardless of their race or ethnicity.

Fear and anxiety about COVID-19 can cause people to avoid or reject others even though they are not at risk for spreading the virus.

**FACT
2**

For most people, the immediate risk of becoming seriously ill from the virus that causes COVID-19 is thought to be low.

Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more serious complications from COVID-19.

**FACT
3**

Someone who has completed quarantine or has been released from isolation does not pose a risk of infection to other people.

For up-to-date information, visit CDC's coronavirus disease 2019 web page.

**FACT
4**

There are simple things you can do to help keep yourself and others healthy.

- Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.

**FACT
5**

You can help stop COVID-19 by knowing the signs and symptoms:

- Fever
- Cough
- Shortness of breath

Seek medical advice if you

- Develop symptoms

AND

- Have been in close contact with a person known to have COVID-19 or if you live in or have recently been in an area with ongoing spread of COVID-19.

[cdc.gov/COVID-19](https://www.cdc.gov/COVID-19)

**We
SUPPORT
our
HEALTHCARE
WORKERS**



Maryam Gbadamosi-Akindele, M.D.
Creighton University School of Medicine, class of 2012.
HS-MACA Post Baccalaureate Program, class of 20XX

"No greater opportunity, responsibility, or obligation can fall to the lot of a human being than to become a physician. In the care of the suffering, (the physician) needs technical skill, scientific knowledge, and human understanding....Tact, sympathy, and understanding are expected of the physician, for the patient is no mere collection of symptoms, signs, disordered functions, damaged organs and disturbed emotions. (the patient) is human, fearful, and hopeful, seeking relief, help and reassurance". -Harrison's Principles of Internal Medicine, 1950.

When asked to share how the current COVID-19 viral pandemic has affected me as a physician, I choose to begin with the above excerpt from Harrison's Principles of Internal Medicine, which is one of the classic textbooks used to teach Internal Medicine physicians. These words inspire me to reflect on what it means to be a physician, especially during these challenging times. The practice of medicine has changed significantly since 1950. For instance, health care providers are now relying on Telemedicine. However, just as in 1950, now more so than ever, many patients are fearful and relying on the health care community for help, relief, and reassurance.

What I consider to be one of the most challenging aspects of the current viral pandemic is the lack of a full understanding of the 'scientific knowledge' associated with the disease. In addition, rapidly evolving clinical recommendations make it difficult to provide reassurance to patients fearful of the uncertainty associated with this pandemic. I struggle with the notion that as a health care community, we do not have all the answers needed to reassure patients.



The current pandemic has also revealed to me the importance of effective leadership in a time of crisis. Considering this, I am increasingly relying on my leadership skills such as adaptability. We changed the structure of our clinic to accommodate patient needs and medical resident education. Effective leadership also consists of being accessible and approachable. For me, this includes being readily available and open to suggestions from clinic staff.

This experience has made me realize the importance of wellness. I am focusing on self-care practices and coping strategies, such as intentional gratitude. I also aim to increase my capacity for resilience, which I believe is a component of maintaining wellness. I have seen many around me turn to meditation, prayer, and exercise. It is my hope that these wellness practices will help lessen the burn out often witnessed in health care providers in times of crisis.

Finally, I am reflecting on the obligation to serve patients with sympathy, as mentioned in the opening excerpt. This obligation is especially important when caring for patients who are vulnerable, including the elderly and those who face additional hardship due to health care and income disparities. The concept of caring with sympathy is part of *Cura Personalis*, which is the care of the whole person. On this note, I end with one of the core Magis values imparted on me as a Creighton University trained physician that is - “women and men for and with others.”



Stop the Spread

Protect Yourself and Others

The best way to prevent illness is to avoid being exposed to this virus. The virus is thought to spread mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs, sneezes or talks.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

Older adults and people who have severe underlying medical conditions like heart or lung disease or diabetes seem to be at higher risk for developing serious complications from COVID-19 illness. More information on [Are you at higher risk for serious illness.](#) **There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19).**



Clean your hands often

- [Wash your hands](#) often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- **60% alcohol.** Cover all surfaces of your hands and rub them together until they feel dry.
- **Avoid touching your eyes, nose, and mouth** with unwashed hands.



Avoid close contact

- **Avoid close contact** with people who are sick
- [Stay home as much as possible.](#)
- **Put distance between yourself and other people.**
 - Remember that some people without symptoms may be able to spread virus.
 - Keeping distance from others is especially important for [people who are at higher risk of getting very sick.](#)



Cover your mouth and nose with a cloth face cover when around others

- You could spread COVID-19 to others even if you do not feel sick.
 - Everyone should wear a cloth face cover when they have to go out in public, for example to the grocery store or to pick up other necessities.
 - Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
 - The cloth face cover is meant to protect other people in case you are infected.
- Do NOT use a facemask meant for a healthcare worker. Keep about 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.

Cover coughs and sneezes

- **If you are in a private setting and do not have on your cloth face covering, remember to always cover your mouth and nose** with a tissue when you cough or sneeze or use the inside of your elbow.
- **Throw used tissues** in the trash.
- Immediately **wash your hands** with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.

Clean and Disinfect

- **Clean AND disinfect frequently touched surfaces daily.** This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.
- **If surfaces are dirty, clean them:** Use detergent or soap and water prior to disinfection.

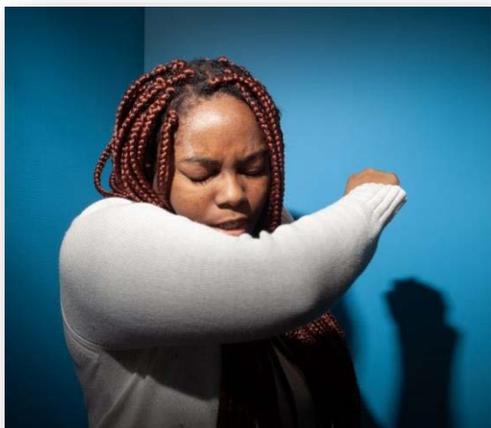
To disinfect:

Most common EPA-registered household disinfectants will work. Use disinfectants appropriate for the surface.

Options include:

- **Diluting your household bleach.**
To make a bleach solution, mix:
 - 5 tablespoons (1/3rd cup) bleach per gallon of waterOR
 - 4 teaspoons bleach per quart of water
- **Alcohol solutions.**
Ensure solution has at least 70% alcohol.

Other common EPA-registered household disinfectants. Products with [EPA-approved emerging viral pathogens pdf icon external icon](#) claims are expected to be effective against COVID-19 based on data for harder to kill viruses.



Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.

Is Working from Home Our “New Normal”?



Phebe Jungman, BS, MBA
Administrative Specialist

What is your role (job description) in HS-MACA?

At the direction of the Associate Vice Provost (AVP), I coordinate, organize, oversee and perform clerical and administrative duties associated with supporting the mission of HS-MACA. As the Administrative Specialist, my duties include but not limited to managing and distributing information, preparing and following up with office communications, assisting in editorial tasks, overseeing projects related to office publications, purchasing and working with HS-MACA staff within their specific program activities.

How has COVID 19 affected your job and responsibilities to your students and the community?

The trajectory of 2020 started out good for HS-MACA as programs and projects were lined up with such good promises; but it quickly changed due to coronavirus pandemic. This COVID 19 had created unprecedented impact in some areas of my office life. I had to quickly adapt to the new system of communicating as information is evolving and as I moved to working from home. I learnt how to communicate more clearly with everybody through email and being able to translate my tasks in a simpler way that I would not be misunderstood and that I could most efficiently carry out my responsibilities as fast and as accurate as possible.

What creative ways have you developed to continue to serve HS-MACA constituents?

Working from home and dealing with others more on a standpoint of understanding without physically meeting, doing and completing tasks without complaining, trusting and believing on others to also do their part without pressure is what I have learnt early on. I call this, a “New Normal”. It is technologically challenging but at the same time technologically revealing as without these working from home would not be this good!



Social Distancing

What is social distancing?

Social distancing, also called “physical distancing,” means keeping space between yourself and other people outside of your home. To practice social or physical distancing: Keep Your Distance to Slow the Spread. Limiting face-to-face contact with others is the best way to reduce the spread of coronavirus disease 2019 (COVID-19).

- Stay at least 6 feet (2 meters) from other people
- Do not gather in groups
- Stay out of crowded places and avoid mass gatherings

In addition to [everyday steps to prevent COVID-19](#), keeping space between you and others is one of the best tools we have to avoid being exposed to this virus and slowing its spread locally and across the country and world. When COVID-19 is spreading in your area, everyone should limit close contact with individuals outside your household in indoor and outdoor spaces. Since people can spread the virus before they know they are sick, it is important to stay away from others when possible, even if you have no symptoms. Social distancing is especially important for [people who are at higher risk of getting very sick](#).

Why practice social distancing?

COVID-19 spreads mainly among people who are in close contact (within about 6 feet) for a prolonged period. Spread happens when an infected person coughs, sneezes, or talks, and droplets from their mouth or nose are launched into the air and land in the mouths or noses of people nearby. The droplets can also be inhaled into the lungs. Recent studies indicate that people who are infected but do not have symptoms likely also play a role in the spread of COVID-19.

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or eyes. However, this is not thought to be the main way the virus spreads. COVID-19 can live for hours or days on a surface, depending on factors such as sun light and humidity. Social distancing helps limit contact with infected people and contaminated surfaces.

Although the risk of severe illness may be different for everyone, anyone can get and spread COVID-19. Everyone has a role to play in slowing the spread and protecting themselves, their family, and their community.



Tips for social distancing

- Follow guidance from authorities where you live.
 - If you need to shop for food or medicine at the grocery store or pharmacy, stay at least 6 feet away from others.
 - Use mail-order for medications, if possible.
- Consider a grocery delivery service.
- Cover your mouth and nose with a [cloth face cover](#) when around others, including when you have to go out in public, for example to the grocery store.
- Stay at least 6 feet between yourself and others, even when you wear a face covering.
- Avoid large and small gatherings in private places and public spaces, such as a friend’s house, parks, restaurants, shops, or

any other place. This advice applies to people of any age, including teens and younger adults. Children should not have in-person playdates while school is out. To help maintain social connections while social distancing, learn [tips to keep children healthy while school’s out](#).

- Work from home when possible.
- If possible, avoid using any kind of public transportation, ridesharing, or taxis.
- If you are a student or parent, talk to your school about options for digital/distance learning.

Stay connected while staying away. It is very important to stay in touch with friends and family that don’t live in your home. Call, video chat, or stay connected using social media. Everyone reacts differently to stressful situations and having to socially distance yourself from someone you love can be difficult.

Creighton to close Omaha campus in effort to prevent spread of COVID-19



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We
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our
STUDENTS
in the
HEALTH
SCIENCES



Creighton University courses to be delivered exclusively online to prevent spread of COVID-19

How has COVID-19 affected your responsibilities as a student/student leader in the post-baccalaureate program and the community (on and off-campus)?

Since COVID 19 all classes have moved to online remote learning. As a result, communication became based on online meetings, phone calls, video chats, or other methods that are in accordance with Creighton and state regulations. This new teaching method proposes new challenges to students. Classes with a lab are difficult to visualize on an online website where students do not get hands on experience like they do in labs. Moreover, the in-person interactions also affect the effectiveness of education, which is a tool online learning lack. Lastly, technology does not cooperate sometimes, which can lead to case of internet interruptions to missing a lecture.

“COVID-19 has taught me how to be prepared for daily work activities during unprecedented situations”



Mina Joseph, BS, Post-Baccalaureate Pre-Medical Spring 2020 Class Leader

What creative ways have you developed to continue to serve HS-MACA constituents?

Additionally, along with the pre-medical social leader, we communicated about different ideas to stay active. For example, watching YouTube class workouts, designing time to “Netflix Party” where we can all pick a movie and watch it at the same time. Other ideas include creating a Group daily chat to maintain healthy social interactions.



Yesenia Morales, BS, Post-Baccalaureate Pre-Dental Spring 2020 Class Leader

How has COVID-19 affected your responsibilities as a student/student leader in the post-baccalaureate program and in the community (on and off campus)?

My responsibilities as a student/student leader have not changed due to COVID-19, rather they have taken a new form. We have all been forced to learn, adapt and grow through this pandemic. Learning strictly online is something new for me, but we are all learning together. I am learning how to study from home and manage my time accordingly. As far as being a student leader, I am still responsible for being a voice for my Pre-Dental cohort, and in close touch with Dr. Kosoko-Lasaki and the rest of the HS-MACA staff.

What creative ways have you developed to continue to serve HS-MACA constituents?

I continuously reached out to my peers weekly to ask how they are doing. Occasionally, I set up Zoom meetings to catch up with them. The hardest thing about this whole situation is feeling disconnected, so I am trying my best as a class leader to remain connected and present. Every day is a new challenge in which I continue to find new ways to serve my classmates and professors so that we all succeed during this time of uncertainty.

Conclusion/Reflection

We will all come out of this pandemic with our own quarantine narrative. This time is happening for us and I truly believe this all will have a silver lining. It can be easy to get down about everything that is happening, but I think this time in which we have been forced to slow down is important. There are so many things I can/have done with the extra time on my hands like reaching out, repairing relationships, connecting with family, concentrating on myself and my goals. So much has happened within the last six months and I have not had time to truly reflect and celebrate my success. I want to look back on this time and say I am proud of the fact that I was calm, that I was able to lead my cohort, rally them and brainstorm so that we could reinvent what it means to learn online while staying a connected Creighton community. I want to look back and be able to say that I stepped up as a leader and that I was energized by the obstacles placed in front of us. I believe we should take a moment, pause and make this our finest hour. At the end of the day like all other things, this too shall pass, and I want to be a better version of myself and a better student as a result.



Tye Barnett, BS, Post-Baccalaureate Pre-Dental Fall 2020 Class Leader

How has COVID-19 affected your responsibilities as a student/student leader in the post-baccalaureate program and the community (on and off-campus)?

Although I am not the Pre-dental student leader for the spring semester, it was important that I supported the transition of leadership and continued to aid the dental students in other capacities like tutoring. Due to the intimate setting of the program, it was very easy to reach out to students in the cohort prior to the COVID-19 pandemic and subsequent

closures. Now it requires a deliberate effort in order to ensure the wellbeing of the dental students. I also feel a responsibility to maintain my grades, this has required my discipline to increase in order to study in the presence of constant potential distractions like TV and family members.

What creative ways have you developed to continue to serve HS-MACA constituents?

This event has emphasized the value of human connection in our lives. There is something about interacting with others in our daily lives that we have largely taken for granted. But COVID-19 has taught me that human connection does not have to be limited to face-to-face interactions. I have continued to serve the cohort by remaining engaged in our virtual classrooms and have used other means of communication like video calls when checking on the dental students.

Conclusion/Reflection

In March, CNN published an article online full of inspirational quotes, and I found one that resonated with me. In times of uncertainty, some people find solace in the consistencies of their lives. I have found that I have been able to immerse myself into my studies. Physicist Dr. Marie Curie once wrote, *"Nothing in life is to be feared, it is only to be understood. Now is the time to understand more, so that we may fear less."* In the future, I hope that we look back on this period as a time of hope and enlightenment and not of terror.



**Diana Gomez Romero, BS, Post-Baccalaureate
Pre-Medical Fall 2020 Class Leader**

How has COVID-19 affected your responsibilities as a student/student leader in the post-baccalaureate program and the community (on and off-campus)?

Without a doubt, COVID-19 has impacted my life as a student and my ability to interact in-person with students, professors, and HS-MACA staff. Before the pandemic, students were able to engage face-to-face in class and study groups with the common goal of completing the post-baccalaureate program, but those interactions have moved online, making collaboration more challenging. Similarly, our arranged volunteer and shadow opportunities have been

canceled. Another consequence of the pandemic impacting students is the closure of university facilities, making it impossible to access resources on campus such as the library. The ability to check-in with the HS-MACA staff and my professors is something I miss, but they are thoughtful in consistently checking on our well-being during isolation.

What creative ways have you developed to continue to serve HS-MACA constituents?

In terms of continuing to serve the community, I do so by simply staying at home and minimizing time spent in public spaces unless necessary. We all have a responsibility to do this since, for example, health care workers and other first responders don't have a choice.

In terms of continuing to serve my fellow peers, I have made it a point to stay in touch with them, via messages, emails, and calls to ensure a sense of normalcy and offer support to them during these uncertain times. Additionally, in the medical cohort we are discussing the possibility of holding virtual study and workout sessions to encourage more interaction and support.

Conclusion/Reflection

Despite the current circumstances, I am grateful for the resiliency of my cohort in adapting to a completely new way of learning. Additionally, I am grateful for our professors and staff at the HS-MACA office who have been attentive to our needs, however varied they may be, are met so we can continue to excel in our education. Lastly, I am proud of Creighton's quick and vigilant response to the COVID-19 pandemic, which has provided a sense of comfort knowing that the university's top priority is the safety of its students, educators, and staff. It is helpful knowing we can rely on each other during these difficult times. We are all in this together.

How has COVID-19 affected your responsibilities as a student/student leader in the post-baccalaureate program and the community (on and off-campus)?

COVID-19 has impacted my job as a student for several of on and off campus responsibilities. My primary goals, as a student in the Post Baccalaureate Pre-Dental program, are to complete my coursework and to serve those in my community. COVID-19 has affected how we receive instruction which is now through online learning. COVID-19 has also impacted my off-campus responsibilities such as service opportunities in the community and shadowing at the dental school. My responsibility off campus also includes my participation at my local church (St. Mary Magdalene Church Omaha).



Dean Tijerina, BS, Post-Baccalaureate
Pre-Dental, Class of 2020

What creative ways have you developed to continue to serve HS-MACA constituents?

In response to the COVID-19 pandemic, I have made it a priority to get in contact either by telephone, by emails, or over Zoom Video Communications with other students in the program, with my instructors, and with the staff members of the HS-MACA program. With these communications I can coordinate different meetings in order to discuss what I personally can improve on, what I can continue to do for my community (by flattening the curve by practicing social distancing and working from home), and what I can do differently in order to help others continue to stay healthy.

Conclusion/Reflection

In conclusion, I reflect on how our fast-paced world was suddenly struck by a pandemic that has impacted millions of people across the globe. It is crucial now more than ever to serve others by practicing social distancing and showing kindness to those that are working tirelessly to provide for the masses. When we observe the heroic individuals such as healthcare workers, first responders, essential employees in grocery stores and pharmacies, and drivers who make deliveries, it should make us reflect as students and recognize that this is a reason why we have chosen our respective professions as healthcare providers.

ONLINE LEARNING



Larissa Sanon
Post-Baccalaureate Program Coordinator



Stay Connected!

Achieving Academic Success in a Virtual Classroom



Mado Juarez, M.Ed.
Assistant Director, Academic Excellence

What is your role (job description) in HS-MACA?

As the Assistant Director for Academic Excellence, my job consists of developing and providing services to evaluate and enhance students' capabilities toward succeeding in the educational programs. I also coordinate tutoring for any students needing additional instruction and help students to achieve the appropriate level of study. I supervise the post-baccalaureate program coordinator and support students in achieving academic success through individual assessments, counseling sessions and workshop development. I provide learning strategies, advisement workshops and develop Individual Academic Plan (IAP). I work cooperatively with both Creighton Counseling Center and the Office of Disability Accommodation based on our students' needs.



How has COVID 19 affected your job and responsibilities to your students and the community?

Previously, I could engage with students in my office, a classroom or meeting them in the hallways to provide academic support. Interacting with students face to face allows me to investigate, through conversations in a relaxed environment, effective methods to help our students. However, COVID19 has brought unprecedented changes that impact my interaction with students that include:

- Social distancing – Impacts efficiency and our effectiveness in servicing our students.
- School Closing - Cares and schools have added workloads to parents already stretched thin.
- Closing Testing Centers – No MCAT/DAT testing

What creative ways have you developed to continue to serve HS-MACA constituents?

I maintain constant communication through all available portals including email, phone messages/calls and Zoom. Students send me their availability and I give them the best service and attention. Although COVID19 has impacted our personal and professional lives, the best we can do as individuals in order to survive this storm is to have a positive mindset. As has COVID19 brought many changes, I continue to have a positive mindset, encourage my students during this time and remind them not to be anxious/worry over things they have no control over. We are dedicated and prepared to provide our students the best academic services through E-learning.



Effects of COVID-19 on Recruitment and Retention



Mervin Vasser, MPA
Assistant Director/Recruitment
and Retention Manager

Times of uncertainty can present many challenges but can also be windows of opportunity. While unemployment rates continue to rise, it is important to appreciate the opportunity given to work from home and remain gainfully employed. However, the effects of Coronavirus (COVID-19) and the need to socially distance from one another has directly affected recruitment and retention of staff and

students. Adjusting to this “new normal” of social distancing and working remotely has not been easy. Although I have experience working from home from time-time-to-time, the circumstance thrust upon us by the spread of COVID-19 is not ideal for efficiency or effectiveness. COVID-19 compounded with the duality of my responsibilities to staff and students have proven to be more difficult than expected during this pandemic.

Since COVID-19 has become a widespread health issue, colleges and universities have mandated working from home, closed campuses, cancelled events and converted to online learning dramatically disrupting the lives of faculty, staff and students. It is critical as a leader to remain calm and maintain routine as best as possible in order to minimize stress and maintain a sense of normalcy. Although it can be nice on occasion to work from bed in your pajamas, especially if you’re sick, it is not good for productivity or mental health to continue for an extended period, particularly during a public health crisis.

While some employees are focusing on mental health, others are focusing on home schooling. Some employees are simply trying to survive. Different employees have different needs. As a manager, being supportive of individual needs and creating innovative ways to effectively work from home, helps to better manage staff and engage with students to meet the expectations of the job or academic program should the outbreak continue.



Working Remote - COVID 19 Principles

1. You are not "Working From Home", you are "At your home, during a crisis, trying to work".
2. Your personal physical, mental, and emotional health is far more important than anything else right now.
3. You should not try to compensate for lost productivity by working longer hours.
4. You will be kind to yourself and not judge how you are coping based on how you see others coping.
5. You will be kind to others and not judge how they are coping based on how you are coping.
6. Your team's success will not be measured the same way it was when things were normal.

While majority of colleges and universities around the world integrate some form of online education into their coursework, moving all aspects of business online may prove to be challenging for recruitment and retention of students. The severity of COVID-19 directly affected the travel industry therefore hindering any recruitment that requires travel by air. Effective

recruitment often requires face-to-face contact. However, due to the spread of the virus recruiting efforts will primarily be remote and solely implemented through digital media platforms. The upside is that online recruiting is more cost effective and allows for a broader reach of students within a short period of time.

Universities and college campuses are places where students live and study in proximity to each other. They are also cultural hubs where students are brought together from around the world.

However, the rapid spread of the COVID-19 outbreak has significantly impacted student life on campus. Students and administrators alike are concerned about not only contracting the illness but also spreading it to more vulnerable populations. New methods using technology are now



being utilized to serve students, making the mantra, "meet students where they are" more relevant than ever before. Face-to-face advising and counseling has increasingly turned to scheduled online communication whenever possible. Video conferencing tools such as Zoom, Skype and Microsoft Teams have replaced the open-door policy.

With the spread of COVID-19 and elimination of in-person contact, I will continue to stay engaged with faculty and staff and explore new approaches to give students the guidance and support needed amid the threat of a global pandemic.



Maintaining Calm Through Crisis: Eliminating Medical School Barriers

After completing the Post-Baccalaureate Pre-Medical Program at Creighton University in 2018, I returned home to attend medical school in New Orleans, Louisiana. New Orleans is a city facing significant health challenges. New Orleans' health-related challenges include a high rate of obesity, a high violent crime rate, a high percentage of babies born with low birth weights, and high rate of people without health insurance. However, everyone in New Orleans does not experience these health challenges equally. Large disparities in health exist between different groups of people in New Orleans. These differences systematically place socially disadvantaged groups at further disadvantage on health, compounding the significant challenges these groups already face amid the Coronavirus (COVID-19) pandemic. At the last count before this article, black people in Louisiana make up 70% of the deaths in all known coronavirus patients in the state, while only representing about 32% of the population. (CDC Report April 2020)

Residents of New Orleans are very familiar with adversity. We have survived Hurricane Katrina, Tropical Storm Barry and now living through this COVID-19 pandemic. In 2005 I felt helpless like others around me but now I am putting myself in a position to address health disparities through education and medicine as a first-year medical student at Louisiana State University School of Medicine (LSU).

Like many other students and medical schools, I as well as my program have been drastically affected by the recent onset of the global pandemic, Covid-19. It has been challenging for me to midgait through dense material amidst what is happening within my community of friends, family and loved ones. However, Louisiana State University (LSU) School of Medicine is making strides for its students to combat school closures and class cancellations which will keep on the trajectory of graduation.



**Brett Briggs, BS, M1, LSU School of Medicine
Post-Baccalaureate Pre-Medical Alumnus,
Class of 2017-2018**



Specifically, digital technology is playing a major role for 1st and 2nd year students helping with the transition from live classroom settings to more of a remote platform in which one would interact with professors using facetime, skype, and emails. Professors are recording lectures and using PowerPoint slides to reiterate the information covered just as they would in a normal classroom setting. Test taking is done via a digital proctor, Zoom, an online application that allows the computer to be locked so the test taker can only access the information to take the test and submit the answers for grading.

Furthermore, the medical school has continued to keep the library doors open when coffee shops and other study areas have closed in effort to stop the spread of the Corona virus. Per the social-distancing guidelines enacted by the State of Louisiana following the recommendation by the Center for Disease control, the medical school library is strictly adhering to those guidelines. To keep students healthy and safe the medical school has also hired outside staff to help with the disinfecting of counters, desks, and doorknobs.

Finally, adjusting to change in the middle of a semester can seem impossible, but standing firm, keeping oneself healthy, and being organized can keep you on the path to graduation.



Persevering in Times of Uncertainty



Lorenzo Rivera, BS, M1 CUSOM
Post-Bac Alumnus, Class of 2017-
2018

The transition to all classes being facilitated online has been challenging, however, my perspective in life is to always see the glass half full. As a first-year medical student in Creighton University School of Medicine (CUSOM), the biggest change has been limited face to face interaction with my peers. My sociability and positive outlook on difficult situations have helped to fuel the fire as my classmates and I tackle the rigor of medical school. My energy is most high when I am surrounded by like-minded individuals who share my passion and goals for medicine, however, social distancing has left a gap that needs to be fulfilled. Most days are now spent exhaustively online. I struggle to maintain a sane mind and high levels of productivity while confined to the walls of a bedroom and computer desk.

Other areas affected by the COVID-19 virus has been my involvement in activities outside of medical school. As an active member of the Student National Medical Association (SNMA), Mayan Community Health Clinic, Spanish Club, and student government regular meetings have either been postponed or held via Zoom. My summer involvement with the Institute for Latin American Concern (ILAC) as a coordinator has also been canceled. With no plans I am concerned about the importance during research during my M1 summer.

Despite experiencing some challenges, I have embraced the transition to online classes. Lectures are now posted towards the beginning of the week which makes getting ahead a possibility. Although we are still required to log in during certain lectures and have engagement with professors for ethics and humanities classes, I like the transition to all classes online because I have the luxury of learning the material at a pace that I can better manage. During real-time in-class lectures, some professors talk too fast for me to write all my notes and I am left struggling to find that information after the lecture.

As I patiently await our return to normalcy, I am coping with these changes by maintaining my health and stress levels. In lieu of working out in the gym, I take short walks around the neighborhood when days are nice. As Intermural Chair for the M1 class, we now play interactive games online to stay connected. I have maintained communication with the people and departments on and off campus that have supported my journey into medical school.

HEALTH CAREERS OPPORTUNITY PROGRAM



Aminatu Issaka, MS
Program Supervisor, HCOP



The Journey Continues: Success Remains the Cornerstone for HCOP During The COVID-19 Crisis

Pandemic, quarantine, social distancing, contagious, outbreak; all terms associated with the highly infectious respiratory disease known as COVID-19 (coronavirus) that has plagued our globe - and with this comes emotions fueled with fear, worry, stress, uncertainty and for many, hopelessness. As the Program Supervisor of the Creighton University *Pipeline to Success* Health Careers Opportunity Program (HCOP), it is my role and welcomed challenge to ensure that academic and professional success remain at the forefront of the program's mission, vision and purpose despite being blindsided with an unexpected global emergency.

Our students are our priority and in order to provide the best resources and programming to our students four (4) words instantly came to mind: **assess, plan, implement and adapt**. COVID-19 shattered our world during our 2019 – 2020 Health Careers Ambassador Session with an outstanding cohort of seventy-three (73) students of varying academic levels (high school, undergraduate and health professional). We, the HCOP team, promised our students programmatic activities/resources which result in the access, education and training needed to become a flourishing health professional and that was exactly what we were going to continue to do.

Now let's discuss specifics, as my role and responsibilities as the Program Supervisor quickly took on a new shape, so did the roles and responsibilities of the students. Immediate communication was key – stressing to students that we are here for them and their families was priority. It was important to know that our students had access to a laptop/desktop/tablet, had internet access and a reasonably quiet environment to complete HCOP activities along with academic/professional commitments. Next, it had to be understood that communication was a two-way street as email, phone, text, video calling, etc. were going to be our primary methods of contact for all things HCOP. Students were advised to confirm/update all contact information with the HCOP team to ensure that absolutely no one falls through the cracks during this

transition. Once we got through the pleasantries, now it was time to convey a sense of normalcy – letting students know that HCOP was not coming to a halt but only temporarily changing shape.

Beginning March 23, 2020, HCOP transitioned its workshops, trainings and academic/professional programming to an e-learning format i.e. Zoom sessions, training modules, videos, and of course, homework assignments – which have proven to be a success. To name a few, students have been able to participate in Cultural Competency Training and a “Branding Yourself As a Healthcare Professional” workshop with a Financial Aid/Literacy Workshop and Mental Health First Aid Training still yet to come and guess what...ALL ONLINE. As for remaining clinical shadowing and primary care immersion activities which required in-person



interactions, luck was on our side that 90% of those activities were completed before the global pandemic.

As one HCOP session approaches its end, another HCOP session is gearing up – the 2020 Structured Summer Session which is slated to begin late-June 2020. So, what does this mean for the HCOP team, it means – *innovative recruitment*. With COVID-19 continuing to peak every day, it has stripped

away our ability to partake in “on-the-ground”, “in-your-face” student and instructor recruitment. With this challenge, we have taken full advantage of “snail mail”, phone/text and our secret weapon – SOCIAL MEDIA. Being able to successfully recruit for a program without physically interacting with prospective students and instructors means that ramping up our communication and follow-up in this area is vital. Following-up with students and instructors that inquire about the application process within 24-48 hours not only conveys professionalism, it exhibits our passion to keep programming going for the students. Just to provide a little peek into our recruitment schedule, the HCOP team is scheduled to perform an HCOP Recruitment Informational via a Zoom session in the coming months with undergraduate students at Metropolitan Community College – wish us luck!!

Not being able to interact with our students in-person is tough but we, the HCOP Team, has and will always let our students know that they matter along with their academic and professional success. We are thankful for options, for resources and most importantly, for amazing students that continues to remain committed to their futures of becoming health professionals. Our students inspire us with their show of commitment, courage and compassion, now more than ever!!

“Success is a journey, not a destination!”

#TeamHCOP Find us on social media: @CreightonUniversityHCOP



Christina Jelinek, BS,
Academic Success Counselor/Case Manager, HCOP

HCOP Academic Success Goals Continue During the COVID-19 Crisis

I distinctly remember the moment I sat watching the Douglas County Health Department's daily press conference on the COVID-19 situation when it was announced that all public schools in the area would be closing down *indefinitely*. Such an unprecedented action in an unprecedented time truly speaks to the large impact this pandemic is having upon our world, upon our city, and upon the students I work with every day.

When I heard the news, my thoughts were immediately on our HCOP students. Since the spread of the disease began to halt many day-to-day activities in the United States, my thoughts have often been on how education can continue in the face of a slow-moving monster like COVID-19.

As the academic success counselor for Creighton University's *Pipeline to Success* Health Careers Opportunity Program (HCOP), it is my duty and privilege to ensure that all of our participants are getting what they need to succeed in school. One of the main ways I do this is by meeting with our students to discuss: How are things going? What are the successes? What are the struggles? Where are the gaps that we can help fill?

As our community works to *flatten the curve* and help reduce the spread of COVID-19, we strive to continue communication with our students through email, phone, and video conferencing. My main query to our students each meeting is how they are adjusting to learning from home. Some students thrive in a work-from-home environment, while others find it difficult to adapt. Our educational institutions offer structure - not only the physical structures we are used to learning in, but also the structure of our daily routines and classroom formats. When those are absent, students are tasked with creating their own structure in order to maintain momentum as their semesters draw to a close. The HCOP team is doing all we can to assist students in this new learning reality, and for my part this means helping ensure students know how to create a schedule for themselves, to maintain a workspace in their homes, and to keep tabs on their own mental health, among other things. We also work to ensure that any student in need of tutoring can continue to be provided with services via video conference.

As students navigate this unprecedented time of social distancing and unease, it's doubly important that programs such as HCOP continue to bridge the gap between need and success. It is always important for students to be assessing their own learning day by day - what am I understanding? What am I not understanding? What are some ways I can put the whole picture together? Such thinking is even more necessary now, as students learn to self-advocate and ensure that they are learning material, often in a self-directed way.

Another important piece of the puzzle when it comes to succeeding academically is maintaining good mental health. The brain is an amazing tool, and it is the command center of

both our learning and our emotions. They affect one another profoundly. It is important for students in this uncertain time to also do a self-assessment of their emotional health and do what they can to improve and maintain this. I highly recommend students take time to get outside. While we must maintain good social distancing, scheduling some time to get outside and enjoy the fresh air is a surefire way to lower stress. I have talked with many students who feel anxiety about the uncertainty of the next few months. I urge us all, not just students, to take stock of the things we can control and those we cannot. Those things which we cannot control we can make a conscious effort to cease dwelling upon. This exercise alone can be a profound way to help manage anxiety as we move forward.

HCOP will continue to be available to help students to maintain their academic momentum during this time, whether through online and phone counselling sessions, arranging for tutors to meet through teleconferencing, or making readily available information that can help all students to be productive, whole and happy. While we are facing an unprecedented time in our country's history, it is important to be thankful for the adaptable nature of the human race, for technology that allows us to still make connections and maintain learning, and for each other - our greatest asset.

What is your role (job description) in HS-MACA?

I am a Data Manager/Program Coordinator for the *Pipeline to Success* Health Careers Opportunity Program (HCOP). As a data/program coordinator, I collect and manage data that will be used to analyze business/program functions, productivity, and redundancies for evaluation. I also assist Program Supervisor with data tracking and development of evaluation instruments. I obtain and enter data into databases, maintain and update databases. I manage on going evaluation and feedback of the program and its activities while assisting Evaluation Specialist with reports. I also prepare and generate reports using data maintained in program/department databases and analyze and interpret data and reports in collaboration with the Evaluation Specialist. I assist staff and/or faculty members in analyzing data for the purposes of planning and conducting research. I develop an HCOP social media presence and brochures and prepare HCOP newsletters.



Shikhar Shrestha, BS
Manager/Program Coordinator HCOP

How has COVID 19 affected your job and responsibilities to your students and the community?

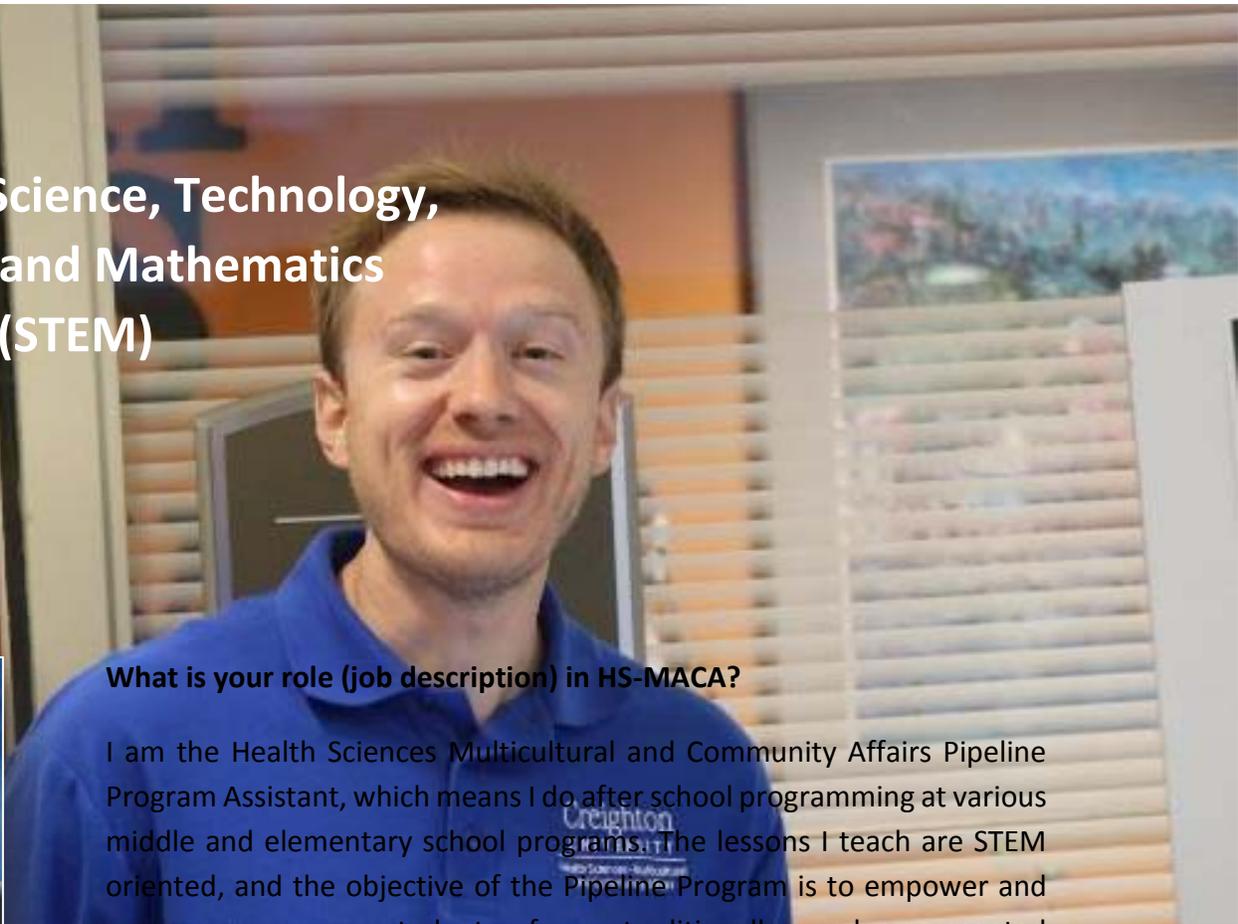
I am working remotely since March 29. COVID-19 has affected the regular HCOP programmatic activities since March 13, 2020. However, the HCOP team are engaging with students to fulfill programmatic objectives via online sessions. Though the HCOP has been actively running current online sessions and recruiting students for upcoming Summer Cohort remotely, COVID-19 has somehow affected my job and responsibilities to the students and the community. The programmatic sessions surveys are taken via Google forms. This has added more job responsibility as I create forms for all programmatic sessions. Due to social distancing, it is

not possible to reach out to students and community partners to recruit and advertise directly. I have been actively using social media to promote recruitment activities and other HCOP activities.

What creative ways have you developed to continue to serve HS-MACA constituents?

I am using personal phones, social media, text, emails, and Zoom to serve HS-MACA constituents. Certainly, it has taught me how to be well prepared when an unprecedented situation like COVID-19 hits the business. I have borrowed a printer from a relative for office use and set up the home office as well. Sometimes, I do stop in HCOP office if there is any essential work to perform.

**Exposure to Science, Technology,
Education and Mathematics
(STEM)**



**Bryan Benson, BA
Pipeline Program Assistant**

What is your role (job description) in HS-MACA?

I am the Health Sciences Multicultural and Community Affairs Pipeline Program Assistant, which means I do after school programming at various middle and elementary school programs. The lessons I teach are STEM oriented, and the objective of the Pipeline Program is to empower and encourage young students from traditionally underrepresented backgrounds into exploring the possibility of a career in the health sciences and to build a positive relationship between my students and learning. To that end these lessons are designed to be experiential and

hands-on, as well as fun, whether it be a sheep eye dissection, or a chemistry experiment making ice cream.

How has COVID 19 affected your job and responsibilities to your students and the community?

The closure of the Omaha Public School district due to the coronavirus pandemic was the best decision to make for student and family safety to keep down the rate of infections and deaths. Students could be exposed or could themselves be unwitting vectors of the disease and shutting down face-to-face interaction is the best way to lower the R0 value (the rate at which an infectious person passes on that infection) and stop the spread. Unfortunately, such a move limits student engagement and educational growth when there isn't a preexisting infrastructure to handle a move to online learning. Not everyone has access to the internet, especially now with the temporary closure of public libraries, and even if all students did have consistent internet access, after school providers do not have direct access with students, but must instead work through the outreach efforts that the after school sites are undertaking.

What creative ways have you developed to continue to serve HS-MACA constituents?

Obviously, the most important thing at this time is community and student safety, which means staying home to not overwhelm the healthcare system I hope my students will one day join. Part of showing the value of this stance is to take it seriously ourselves, so that we are not setting a poor example or sending mixed messages to young people who may feel that staying home isn't vitally important at this moment for the overall health of our communities and not just ourselves.

Within the reality of school closures and lack of access to students at home, I have had to explore other avenues of student engagement. Many after school programs are looking to provide their own platforms for tutoring or lessons, and since Omaha Public Schools won't allow students to directly engage with outside providers I have needed to collaborate with these after school program sites if I am to continue to provide lessons to students at home. To that end and to keep the Pipeline Program operating to the best of its ability during these trying times I am pursuing teaching online classes or just posting an online lesson with various after school sites that I work with. In this way, despite losing the face-to-face interaction that we know is so important in ensuring student success and growth, I will still be able to have some lessons available for student use that they can access via their contact with their afterschool sites. It is my hope that students will remain engaged at this time, though even for the afterschool program it is difficult to keep students checking-in. However, the HS-MACA Pipeline Program will do its best by utilizing the platforms available to us from the afterschool programs to migrate its outreach efforts online and continue to provide educational opportunities for students who will one day become the next generation of healthcare providers.





**Center for Promoting
Health and Health Equity**



Errik Ejike, MPH
Program Supervisor, CPHHE

COVID-19 Disproportionately Affecting Minorities, Particularly African Americans

Why Does Everything End Up a Black People Problem, COVID-19 Included?!

(Opinion Piece)

The Coronavirus, also known as COVID-19, has continued to spread from its original inception point of Wuhan in China, and it has continued to rise in certain parts of the world, such as Italy and the United States of America. Responses by various countries to the spread of the virus have varied widely from China shutting down its borders, testing everyone coming in and out for fever, building COVID-19 specific hospitals within a 2 week period, physically doing an environmental cleansing of streets and buildings, all while the U.S. is simply encouraging social distancing, washing hands and wearing masks with the hashtag #StayHome. While there is a difference in the response of how to alleviate the disease, there has been one constant that seems to appear whenever there is a nationwide or worldwide catastrophe: Black people consist of the worst end of statistics and become a focal point for issues regarding humanity and health disparities. The Coronavirus pandemic has just become another chapter in a long history book of Black people globally receiving the short end of the stick and brunt of the blow.

Racism and Xenophobia is alive and well...

When this virus became widespread outside of the borders of China, one of the main concerns was the rising and apparent racism toward Chinese people and Chinese descendants in various countries. It didn't help when the president of the United States often refers to it as the "Chinese Virus", and there were some rumblings on social media also referring to it as the "Kung Flu". There were waves of responses from credible organizations hosting townhalls, webinars and providing resources about stopping the racism towards Chinese people.

Now, since there have been more reports of Black people in various countries getting the Coronavirus at an accelerated rate with a higher death rate, that racism has turned toward Black people. In China, the inception place of the disease, there are reports of African and Black immigrants being forced out of their living dwellings and being pushed to leave the country or face living on the street as the Chinese people "fear that Black people will spread the disease." In the city of Guangzhou, China, there was a McDonald's that explicitly targeted Black people and denied them entry into their place of business.

The restaurant, located in the industrial city of Guangzhou, displayed a sign reading, "We've been informed that from now on black people are not allowed to enter the restaurant," the BBC reported Tuesday.

The incident comes as racial tensions mount in the city, which is a hub for African traders and home to China's largest African communities.

- *New York Post (www.nypost.com/2020/04/14/mcdonalds-in-china-sorry-for-sign-banning-black-people-amid-coronavirus/)*

McDonald's has since responded to the incident and stated that they shut the business down for a day and provided a half-day training on cultural competency. Outside of these incidences, there has been another troubling statement made about Africans in Africa particularly. Dr. Jean-Paul Mira, head of the intensive care unit at the Cochin Hospital in Paris, made the comments in an interview regarding how the medical world should proceed regarding who and where to test vaccines for COVID-19. On a live news interview on the French television channel LCI with Camille Locht, the research director at the French National Institute of Health and Medical Research, Inserm, Dr. Mira stated:

"If I could be provocative, shouldn't we do this study in Africa where there are no masks, treatment, or intensive care, a little bit like we did in certain AIDS studies or with prostitutes?" Mira asked.

"We tried things on prostitutes because they are highly exposed and do not protect themselves."

Locht responded in agreement: "You are right. We are thinking of a parallel study in Africa to use this same kind of approach with the BCG placebos," referring to the tuberculosis

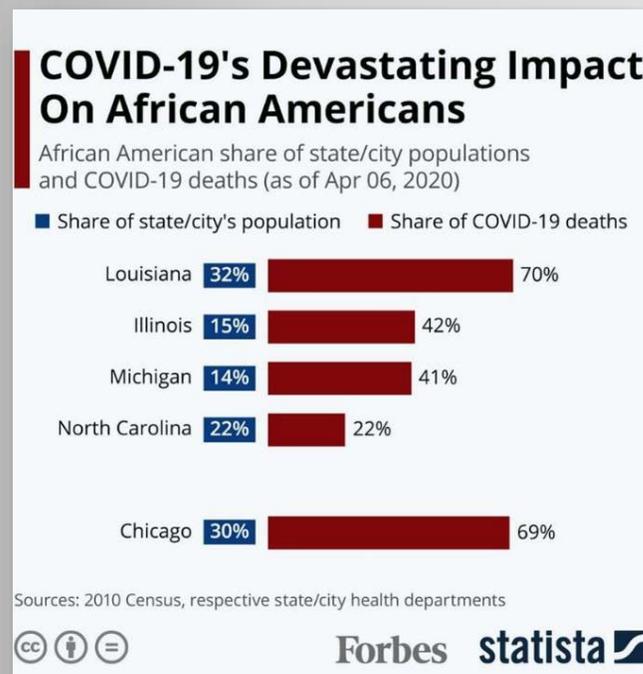
vaccination that Inserm said appeared to protect children against infections, particularly respiratory diseases like COVID-19.

- NBC News (www.nbcnews.com/news/nbcblk/french-doctor-apologizes-comments-testing-covid-19-vaccine-africa-prompting-n1177991)

With these types of outlandish and egregious statements, it's hard to ignore the issue around the transference of racism from Chinese to Black people globally. But how has this manifested in our own backyard, the United States of America. There has been a spike in the number of African Americans being affected by the Coronavirus over the last month, and as always, it has something to do with the disparities that exist in this country and not always the biology of the people themselves.

COVID-19 in the Black American Community: Why is it So Harsh?

There have been recent reports of African Americans and Africans in America being the new face of the COVID-19 pandemic here in the U.S. due to the alarming numbers and disproportionate rates of individuals being infected and casualty rates from the virus. The most important question to ask is why? Why has the disease affected so many African diasporic people here? As of now, the numbers are showing that in many states, African diasporic people make up only a fraction of the population but are currently making up a large population of new cases and deaths due to the Coronavirus. (see chart)



Why is This Happening in Black Communities? Why? *Jadakiss Voice*

Why #1: Misinformation and Lack of Severity

There was an abundance of misinformation targeted at the Black community such as, “Black people can’t get the disease, melanin protects against the virus, I don’t know anyone with the virus so it can’t be real, the virus is an experiment to kill people, the virus only affects old people, etc.” Over the past 2 months, these statements have been disproven, yet people’s perceived susceptibility is still very low in these communities. Many individuals have disregarded the notions of social distancing and wearing protective gear such as masks and gloves. Some of the resistance comes from the constant and common narrative that whenever something happens national, it always affects the Black community the worse, so why would this be any different from another day? Also, there has been a major disparity in providing the correct and culturally competent information to African diasporic communities. There have been futile efforts by Black doctors, health professionals and community leaders to disseminate information specifically to their communities and in the language (both actual languages of immigrant Black people and in nuanced imagery and language of Black Americans) of their communities. Additional efforts are needed in the education and myth busting for our communities to thrive.

Why #2: Lack of Resources Available

Many Black communities are currently experiencing a lack of testing, availability of testing kits, and access to adequate healthcare sites to provide comprehensive care regarding COVID-19. These sites in the United States are also experiencing a severe lack of ventilators for those patients who are showing severe symptoms of the disease. Of course, certain for-profit hospitals and major hospital systems will receive more of the funding and resources than smaller hospitals and federally qualified health centers (FQHC’s) that are typically located in urban neighborhoods such as many Black neighborhoods are. In addition to the medical systems, many of the Black neighborhoods are experiencing shortages in basic resources such as toilet paper, sterile cleaning supplies, adequate masks and gloves. This only adds to the burden of having food deserts and not having nutritious foods available as well. There needs to be intentionality in providing neighborhoods of need with more resources to survive, and with urgency.

Why #3: The Poor Health Condition of Black Americans

In the United States, it is common knowledge to know that African Americans have some of the poorest health outcomes and possess the highest prevalence rates for chronic diseases such as diabetes, hypertension, certain forms of cancer, etc. One of the most devastating risk factors for getting Coronavirus is the person having existing health conditions and chronic diseases. Thus, it makes perfect sense that Black communities are having high incidence rates and high death rates from COVID-19. There is a persistent issue with chronic disease that has yet to be properly addressed within these communities, thus a new virus makes these communities and as prime

targets for the proliferation and spread of the disease. Not to mention, we should include that many of the Black communities that are being ravished by the disease also suffer from overpopulation due to urban community designing and multi-unit living dwellings (the projects) that have been poorly upkept. This is a perfect breeding ground for any virus, particularly the Coronavirus. It's simple math:

Poor health for individuals + overcrowding/poor living conditions + Lack of resources + lack of correct information and protective factors = Higher incidence and death rates among Black people!

So... What Do We Do?

The answer to the issue regarding why Blacks are affected disproportionately is simple and what we've known before COVID-19, but its not an easy task:

- Stop Racism toward African Diasporic people
- Provide equitable resources to Black communities
- Provide relevant and culturally responsive education to Black communities
- Treat Black people like, um... people!

It's the same story, different day when it comes to COVID-19 and the Black community around the world. So maybe we look at changing the narrative by changing the author (who's in charge of providing to and for these communities) and see if Black people can finally get a different story ending written...





Balkissa, Uttara, MD, MPH
Program Intern, CPHHE

What is your role (job description) in HS-MACA?

I am an intern for the Center for Promoting Health and Health Equity (CPHHE). My duties include attending and writing reports for all CPHHE partnership and sub-committee meetings and participating in CPHHE journal club activities. I also participate in HS-MACA programs such as Common Grounds. Additionally, I developed an elective paper (HS-MACA Health Disparity Elective) and wrote a 9-page Mental Health Awareness and Education document to be incorporated in the “Inspiring Change” manual. Furthermore, I co-facilitated focus group meetings with the youth of the CPHHE outreach program, transcribed the meeting recordings, write up the results, discussion, conclusion, and

recommendations. I am currently writing a manuscript for publication.

How has COVID 19 affected your job and responsibilities to your students and the community?

I work remotely now due to COVID 19. Tasks related to community outreach efforts, including the inspiring Change training to the community health advocates (CHA) and the residents of the towers that require in-person interaction, have been impacted.

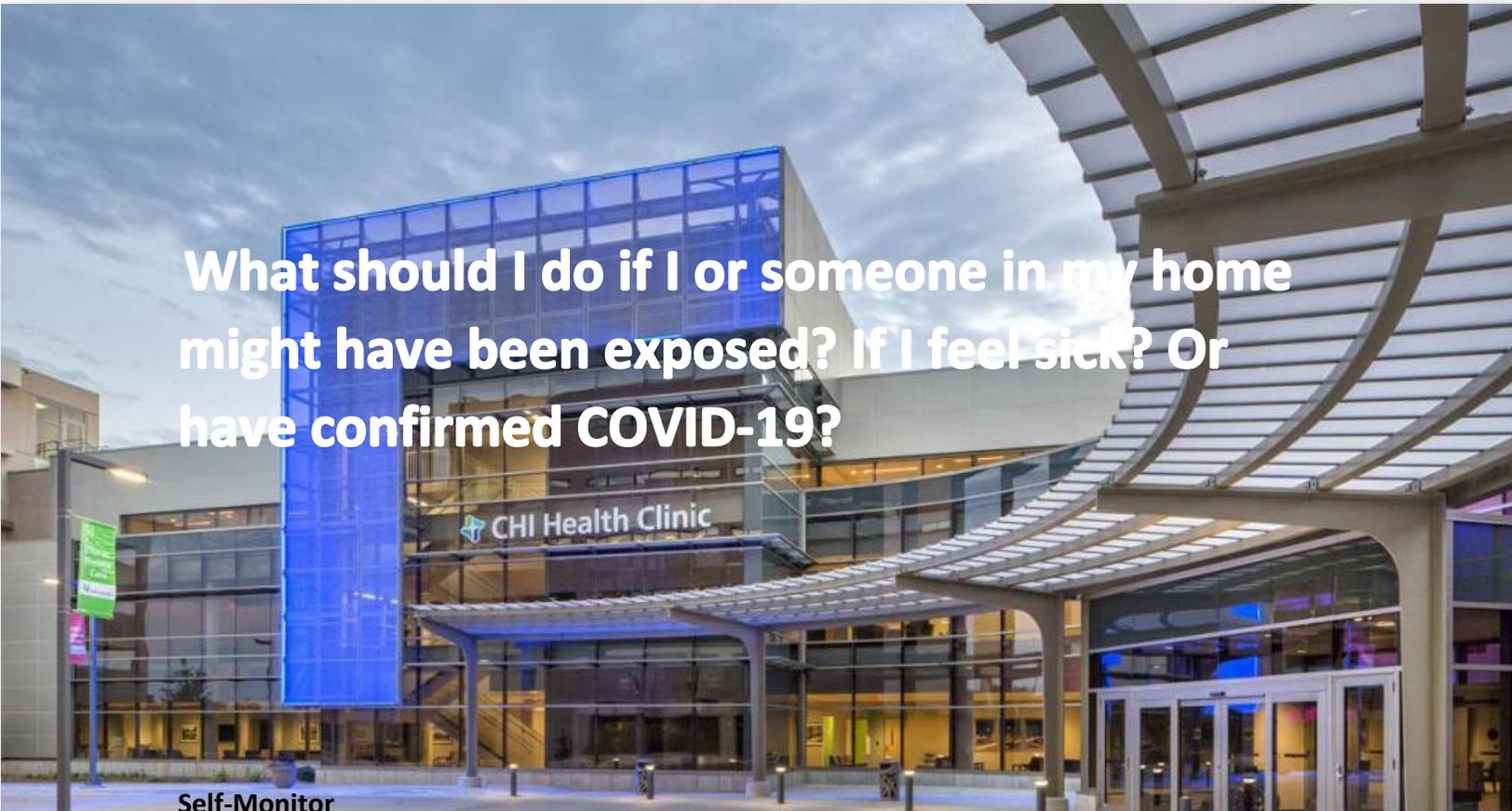


What creative ways have you developed to continue to serve HS-MACA constituents?

Using technology to maintain consistent communication with leadership.

Conclusion

In response to the COVID 19 pandemic in Omaha, I have been assigned to co-develop content for our community outreach newsletter, which aims to provide preventative care and health promotion.



What should I do if I or someone in my home might have been exposed? If I feel sick? Or have confirmed COVID-19?

Self-Monitor

Be alert for symptoms. Watch for **fever, cough, or shortness of breath**.

- Take your temperature if symptoms develop.
- Practice social distancing. Maintain 6 feet of distance from others and stay out of crowded places.
- Follow [CDC guidance](#) if symptoms develop.

If you feel healthy but:

- Recently had close contact with a person with COVID-19, or
- Recently traveled from somewhere with active spread – within or outside the U.S.

Self-Quarantine

- Check your temperature twice a day and watch for symptoms.
- Stay home for 14 days **and** self-monitor.
- If possible, stay away from people who are high-risk for getting very sick from COVID-19.

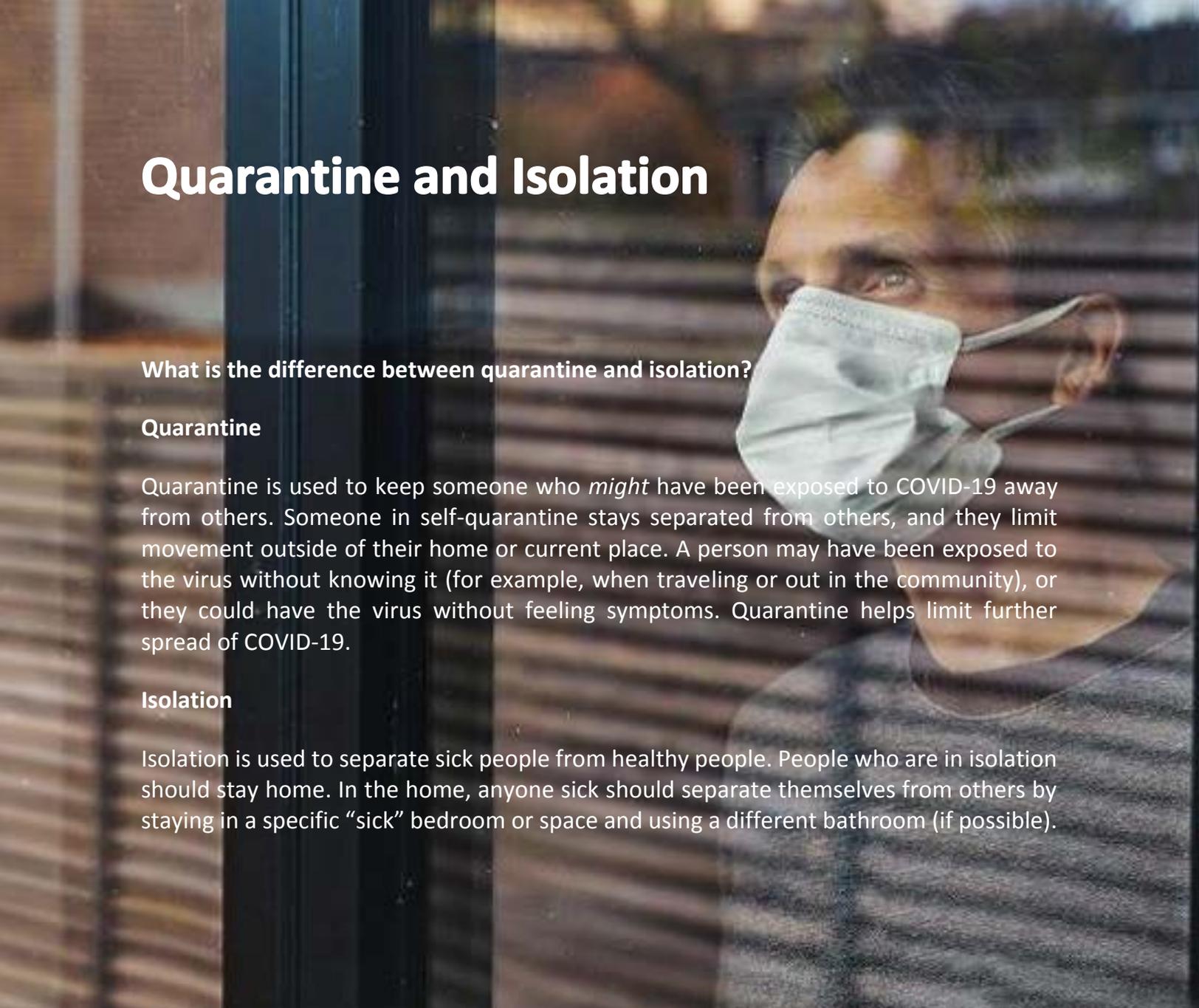
If you:

- Have been diagnosed with COVID-19, or
- Are waiting for test results, or
- Have symptoms such as cough, fever, or shortness of breath

Self-Isolate. Stay in a specific “sick room” or area and away from other people. If possible, use a separate bathroom.

- Read important information about [caring for yourself](#) or [someone else who is sick](#).

Quarantine and Isolation

A man with short dark hair is wearing a white surgical mask. He is looking out of a window with horizontal blinds. The background is slightly blurred, showing what appears to be a brick wall or similar structure.

What is the difference between quarantine and isolation?

Quarantine

Quarantine is used to keep someone who *might* have been exposed to COVID-19 away from others. Someone in self-quarantine stays separated from others, and they limit movement outside of their home or current place. A person may have been exposed to the virus without knowing it (for example, when traveling or out in the community), or they could have the virus without feeling symptoms. Quarantine helps limit further spread of COVID-19.

Isolation

Isolation is used to separate sick people from healthy people. People who are in isolation should stay home. In the home, anyone sick should separate themselves from others by staying in a specific “sick” bedroom or space and using a different bathroom (if possible).





LET'S MOVE. LET'S REACH. LET'S WORK TOGETHER

As the past Executive Director of REACH and consultant to Dr. Kosoko-Lasaki, my role is to seek funds to sustain the REACH program, develop a documentary video, and advise on personnel matters.



**Richard Brown, PhD FACHE,
Chairman Elect, CPHHE**

Covid-19 came as a slow surprise for reducing productivity toward reaching established goals for the year. The three areas of focus for me was to first, coordinate the development of a video documenting the 20year history of HS-MACA since its inception in the year 2000.

Second, I was to identify funding sources to sustain the operations of the REACH program and third to pursue financial support for the annual “Let’s Move, Let’s REACH”, physical activity day event. The video script and conceptual framework was completed by mid-March and production was to begin the following week, when it became clear that the Covid-19 pandemic would prevent continuation.

As Chairman Elect to the CPHHE, attention has turned to working more closely with the Academic/ Community Partnership to fulfill its mission through providing education and information to the Omaha minority community to help fight the spread of the Covid-19 disease.

Activities will include the following:

- 1.) Create a digest/newsletter for dissemination to the community that we serve
- 2.) Provide daily updates via social media on the latest Covid-19 developments in Omaha
- 3.) Activate the Health Ambassadors trained by HS-MACA to assist with public education

As we are all experiencing, business is not being conducted as usual, but rather we are at a time of increased stress, fear and uncertainty. It is also a moment in time when the work we do is more relevant and necessary than ever. Both the health of the community and economic impact of this pandemic is touching millions of Americans, across income classes, industries, and geographies. However, life gets better when we get on the other side. I view this as a “setback in preparation for a comeback.”

Adopting or maintaining physical activity is essential, even in a confined space. Children and adolescents should be active for a minimum of 60 minutes a day as recommended by the World Health Organization. Always keep this formula in mind: move, eat well, sleep, relax, manage screen time and play.

FACES of the FRONTLINE



THANK YOU!



STAY HOME. STAY SAFE. SAVE LIVES



Learn more about COVID-19, symptoms, facts and the latest news and updates

<https://www.cdc.gov/coronavirus/2019-ncov/index.html> information about COVID-19

In the spirit of persevering through a difficult time, **CONGRATULATIONS** to our Post-Bac and Pre-Matriculation Alumni, URM's and supporters of HS-MACA entering the healthcare workforce in 2020

Creighton University School of Medicine and other



Beau Fry, MD
Family Medicine



Ferdinand Osayande, MD
Psychiatry



Blessing Inyang, MD
Family Medicine,



Hedson Desir, MD
Family Medicine



Elizabeth England, MD
Otolaryngology

Creighton University School of Dentistry



Randy Wells, DDS



Kyle Debungie, DDS



Strater Crowfoot, DDS



Jeremy Williams, DDS



Carolyn HSU, DDS



Matt Adams, DDS

Creighton University School of Pharmacy and Health Professions



Whitney Boyd, DPT



Kateri Petto, PharmD

Creighton University School of Medicine

| | | | |
|--------------------------|------------------|---------------------|------------------------|
| Mackenzie Brown | Celena Derderian | Hedson Desir | Mary Dick |
| Elizabeth England | Catalina Flores | Lukas Foster | Blessing Inyang |
| Judy Jiang | Jane Lee | Jaclyn Lundberg | Dorie Pitzer |
| Aakriti Shrestha | Corina Vasquez | | |

Creighton University Physician Assistant (PA) Program

December 2021 – 1st Graduating Class

Creighton University School of Pharmacy and Health Professions

Physical Therapy

| | | | |
|---------------------|----------------------|---------------|----------------|
| Whitney Boyd | Luis-Gabriel Charvet | Nathan Gurule | Larissa Hamada |
| Torrie Maae | Leandra Stuckey | | |

Occupational Therapy

| | | | |
|----------------------|------------------|-------------------|--------------------|
| Christina-Marie Dano | Andrea Juarez | Cristina Sisneros | Michaela Stevenson |
| Dudley Yacinthe | Marlise Williams | Emily Garcia | Angela Ingram |
| James Roberts | | | |

Pharmacy (On Campus and Distance)

| | | | |
|---------------------|-----------------------|------------------|-------------------|
| Brenda Alema | Mujtba Almuslim | Tiffany Bihis | Charmaine Cabigas |
| Abdullahi Dubes | Sonya Hanuman | Charles Jackson | Ryan Kano |
| Jude Kebeh | Lily Kha | Amidou Nabi | Allison Oh |
| Kateri Petto | Maria Lizette Sagun | Robertson Tankam | Laura Yacinthe |
| Adrianna Arnett | Katherine Chisholm | Samantha Clarke | TaShaunda Gamble |
| Dai Han | Omar Hernandez Panuco | Alyssa Jeanmarie | Sara Karimi |
| Abdullah Khan | Staci Mack | Corissa Roman | Luis Solano |
| Yashica Stewart | Ann Tran | | |

Underrepresented Minority Graduates Cont'd

Creighton University School of Dentistry

Matthew Adams Keyrolos Bottros Matthew Alexis Chavarria **Strater Redmond Crowfoot**
Kyle Debungie Collin Lee Edminsten Zena Carbo Stoecklin-Gutmann John William Puetz III
Randy Wells **Jeremy Williams**

Creighton University College of Nursing

Aliza Mari Ancheta Joshua Ancheta Angelica Bustamante Alyssa Cambra
Marissa Casas Alyssa Domingo Paul Jason Enriquez Mary Catherine Flood
Tyra Fukushima Alissa Geonzon Julie Juarez Amy Kawakami
Nina Kelley Tyler Kelly Laila Khong Kristen Kojima
Morgan Mackinney Alexandra Mihalakakos Mahi Nagar Yoshua Piescer

[Spring Commencement and Ceremonies Are Canceled](#)

In response to the coronavirus pandemic, the 2020 spring commencement and related ceremonies will not be held May 14-16. The University is planning for an end-of-year event to recognize our graduating students. Details will be shared soon.

Creighton thanks our students, families and friends for their compassion and patience as we navigate this challenging time.

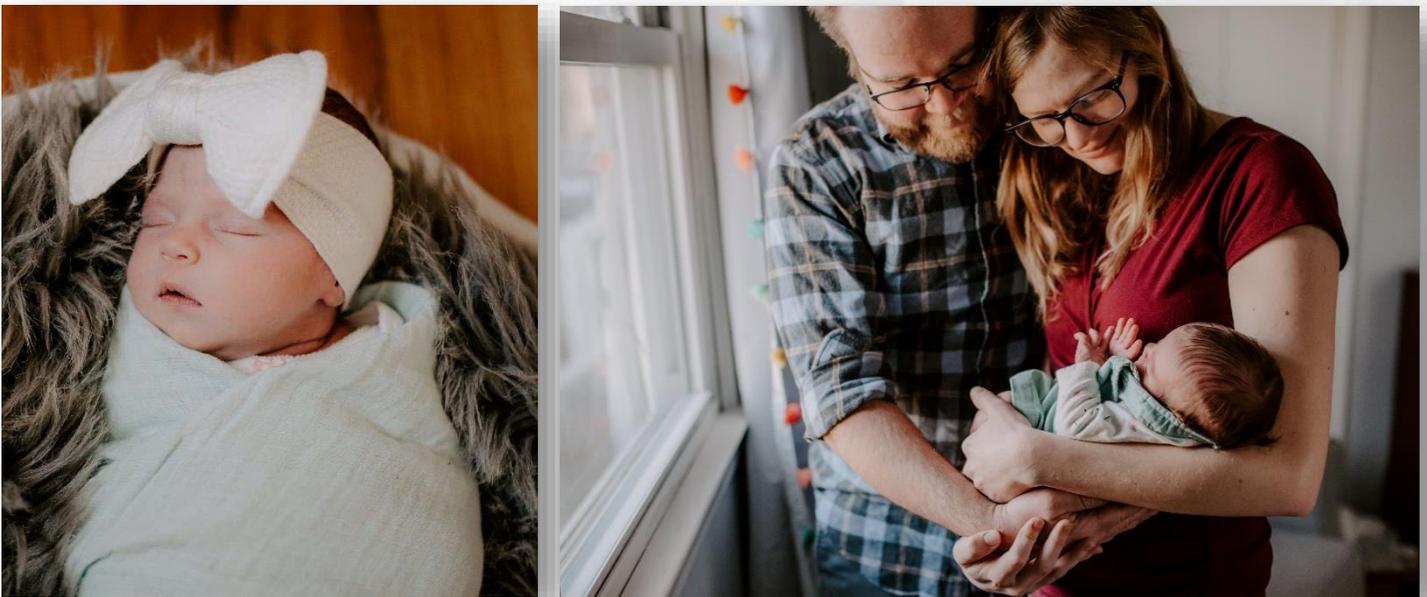
Watch it here: <https://livestream.com/creightonuniversity/commencement2019>

HS-MACA PRONOUNCEMENTS

Errik Ejike and Joanna LeFlore, married April 3rd, 2020



Anne Margaret Jelinek, born December 24, 2019



HS-MACA UPDATES

Creighton's priority is the health and safety of all alumni, friends, students, faculty, staff and the community. As such, HS-MACA has either postponed or rescheduled the following spring events.



HS-MACA 2020 Biennial Reunion/Awards & Recognition Ceremony Postponed: TBD



Annual Addressing Health Disparities Seminar: *Focus on Mental Health* Rescheduled: September 26, 2020 For more information/registration: <https://excellence.creighton.edu/2019healthdisparities>



3rd Annual Faith Based Fitness Challenge Rescheduled: September 8, 2020



5th Annual Let's MOVE Let's REACH Physical Activity Day TBD



Common Ground will resume Fall 2020-2021

Creighton UNIVERSITY

Health Sciences - Multicultural
and Community Affairs



He has delivered us from such a deadly peril, and he will deliver us again. On him we have set our hope that he will continue to deliver us, as you help us by your prayers ...

—2 Corinthians 1:10-11 (NIV)

To learn more about HS-MACA visit our website: <https://healthsciences.creighton.edu/diversity>

For more information visit our COVID-19 website: <https://www.creighton.edu/about/covid-19>

Stay connected. Stay community.
Stay *cura*. **Stay Creighton.**



Edited by Sade Kosoko-Lasaki, MD and Mervin D. Vasser, MPA