

Master of Public Health
Applied Practice Experience

by

Alexis Zavala

MPH Candidate

submitted in partial fulfillment of the requirements for the degree

MASTER OF PUBLIC HEALTH

Graduate Committee:

Dr. Emily Mailey

Dr. Katie Heinrich

Dr. Richard Rosenkranz

Applied Practical Experience Site:

Flint Hills Wellness Coalition

January 2018-December 2018

Applied Practical Experience Preceptor:

Julie Hettinger, BS

Brandon Irwin, PhD

KANSAS STATE UNIVERSITY

Manhattan, Kansas

2018

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Chapter 1 - Portfolio Product

I completed my Applied Practice Experience with the Flint Hills Wellness Coalition in Manhattan, KS. The coalition works with citizens and groups in Manhattan and Riley County to develop community norms that support healthy behaviors and environments. Their mission, as stated in their guidelines, is “to create a healthy, equitable community for our residents through policy, system, environmental, and personal change.” The coalition has been successful in improving access to healthy foods, reducing exposure to tobacco in public parks, and advocating for bicycle/pedestrian-friendly environments. Active workgroups within the coalition include Nutrition, Active Transportation, Mental Health, Access and Coordination of Services, Food and Farm Council, and Advancing Health Equity. Many of my responsibilities included attending administrative support team meetings, attending regular coalition meetings, attending workgroup meetings, meeting individually with workgroup leaders, taking minutes at meetings, and more. The products produced through my time with the coalition include a communication plan, an Instagram page, a Kansas Health Institute presentation, and a health equity presentation.

Table 1.1 Summary of Portfolio Products

Portfolio Product	Description
Communication Plan	The communication plan is a written plan that included guidelines for effective communication within the coalition. All members of the coalition received a paper copy, and a digital copy is posted on the FHWC Google Drive.
Instagram	I developed an Instagram page for the FHWC to reach a new audience, as well as to inform and educate followers about the coalition and other events happening in the community.
KHI Chartbook Presentation	This is a presentation developed with data from the Kansas Chartbook through the Kansas Health Foundation. This

		presentation was used by the author of the chartbook.
	Health Equity Presentation	This is a presentation developed to educate members of the coalition and the community on what health equity is and how data from the Kansas Health Foundation can help us begin to answer questions about health equity in our communities

Table 1.2 Portfolio Products and Competency Addressed

Portfolio Product		Number and Competency Addressed	
	Communication Plan	18, 21	Select communication strategies for different audiences and sectors Perform effectively on interprofessional teams
	Instagram Page	19	Communicate audience-appropriate public health content, both in writing and through oral presentation
	KHI Chartbook Presentation	4	Interpret results of data analysis for public health research, policy or practice
	Health Equity Presentation	6	Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organization, community, and societal levels

Chapter 2 - Competencies

Table 2.1 Summary of MPH Foundational Competencies

Number and Competency		Description
4	Interpret results of data analysis for public health research, policy or practice	I focused on translating data previously collected into readable graphs and presentations.
6	Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organization, community, and societal levels.	My research focused on health inequities in our own community and the possible reasons for these to exist.
18	Select communication strategies for different audiences and sectors	I developed a communication plan to be used by members of the coalition to make communication between members and the community more streamlined and efficient.
19	Communicate audience-appropriate public health content, both in writing and through oral presentation	Creating and posting online content for different audiences through Facebook, Instagram, and the website was a large portion of my internship.
21	Perform effectively on interprofessional teams	I served as both a general member of the coalition, as well as a member of the administrative support team.

Competency 4 – One of the first large projects I was able to work on during my time with the coalition was creating presentations using data collected by the Kansas Health Institute. The data was collected throughout the entire state of Kansas from 1999-2013 and was published on March 1st, 2018 as *Chartbook: Racial and Ethnic Health Disparities in a Changing Kansas*. Data sets ranged from average income, unemployment rates, poverty rates, pregnancy rates, prenatal care, etc. and were broken down by individual county. Part of my responsibility was going through each data set and pulling any relevant information about Riley County. That data was then put into tables and then translated into more appealing visuals. This task gave me the opportunity to decipher what each piece of information meant and how this data can be used for future research, policy development, and public health practice. The presentation that I made

was used during a conference call with Lawrence J. Panas, an analyst for the Kansas Health Institute and author of *Chartbook: Racial and Ethnic Health Disparities in a Changing Kansas*.

Competency 6 – The latter part of my time with the coalition focused on creating a health equity presentation. This was a culmination of what I previously knew about this topic, as well as new information collected along the way. Information was gained through a combined means of online research and interviews with Riley County Health Department Employees. Employees interviewed included Jennifer Green, Director of the Riley County Health Department; Earlisha Killen, Breastfeeding Consultant; Jan Scheiderman, Raising Riley; Breva Spencer, Maternal and Child Health; and Maria Baquero, Spanish Interpreter. These interviews were important in learning about aspects of public health in Riley County and helped me to begin deciphering data and learning possible explanations for health inequities present in Riley County. This presentation was made for the purpose of educating members of the coalition on health equity/inequity and to help us begin more conversations about how structural and racial biases and disparities can have drastic consequences for the health of populations.

Competency 18 – A large part of my experience with the coalition was helping the administrative team develop new ways to communicate with members of the coalition and with the community at large. The development of the communication plan was brought forward as a way to improve communication as a whole and in turn, create a more streamlined and efficient way of communicating. In order to make sure that the communication plan was something that was desired and needed, I met with members of each workgroup to discuss their opinions on the coalition, to hear their feedback on communication up to that point, as well as to discuss ways that they can be better supported by the administrative team. Our first goal with the communication plan was to improve internal communication between the administrative team, the workgroups, and members of the coalition. This included creating a new simplified meeting facilitation model, creating a Chair and Co-Chair position, and making face-to-face interaction a priority. The second goal of the communication plan was to raise awareness, support, and participation in coalition initiatives among the public. This included creating direct links to the coalition through our website and social media accounts, providing basic social media and communication training, and identifying communication specialists within each workgroup to engage with members of the community.

Competency 19 – One aspect that I wanted to focus on was reaching new audiences with information about the coalition and other features of community health. New forms of communication were developed and one that I've been able to continually maintain is our Instagram page. The coalition already had a Facebook page and utilized this form of

communication frequently, but I wanted to use the Instagram page to reach a new audience and test out different forms of content. Content included highlights of individual workgroups, upcoming events, and meeting reminders. After searching for other similar Instagram pages, I only found a few that were poorly maintained and not up to date. My hope is that other people will be able to find our page, whether they be individuals or other wellness coalitions, and engage with us in that way. It was also important that we recognize the need for updated and accurate information on our website as well, and all workgroups were encourage to send in updates as often as possible. It's my understanding that most people use our website as their first introduction to the coalition, so it was important that they be always be able to find up to date information.

Competency 21 – Performing on various interprofessional teams within the coalition was by far the most important aspect of my time with them. I regularly attended meetings with Julie Hettinger, who is the Health Educator at the RCHD, and Brandon Irwin, who is the Community Organizer, as they were the two that advised me during my time with the coalition. I also attended meetings with the Administrative Support Team who worked behind the scenes to organize large coalition meetings, write and approve grants for the coalition, and made other administrative decisions. Another large aspect of my responsibilities was regularly interacting with each workgroup, meeting one-on-one with workgroup leaders, occasionally attending workgroup meetings, and passing on updates, wants, and needs to the administrative support team. Coalition meetings consist of community partners and individuals all over Riley County including but not limited to USD 383, Lafene Health Center, Pawnee Mental Health, Via Christi Health Center, City of Manhattan, ATA Bus, various entities within K-State, and more.

Table 2.2 MPH Foundational Competencies Course Mapping

22 Public Health Foundational Competencies Course Mapping	MPH 701	MPH 720	MPH 754	MPH 802	MPH 818
Evidence-based Approaches to Public Health					
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	x		x		
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	x	x	x		
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	x	x	x		
4. Interpret results of data analysis for public health research, policy or practice	x		x		
Public Health and Health Care Systems					
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and		x			

international settings					
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels					x
Planning and Management to Promote Health					
7. Assess population needs, assets and capacities that affect communities' health		x		x	
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs					x
9. Design a population-based policy, program, project or intervention			x		
10. Explain basic principles and tools of budget and resource management		x	x		
11. Select methods to evaluate public health programs	x	x	x		
Policy in Public Health					
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence		x	x	x	
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes		x		x	x
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations		x			x
15. Evaluate policies for their impact on public health and health equity		x		x	
Leadership					
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making		x			x
17. Apply negotiation and mediation skills to address organizational or community challenges		x			
Communication					
18. Select communication strategies for different audiences and sectors	DMP 815, FNDH 880 or KIN 796				
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	DMP 815, FNDH 880 or KIN 796				
20. Describe the importance of cultural competence in communicating public health content		x			x
Interprofessional Practice					
21. Perform effectively on interprofessional teams		x			x
Systems Thinking					
22. Apply systems thinking tools to a public health issue			x	x	