

Wednesday November 7th

agement approaches in post-Katrina New Orleans. For each prompt the participants took 3-8 pictures. In a weekly “share session” they interpreted both their own and each others pictures. At the end of the six weeks a community photo exhibition was organized to showcase the women's “best” picture(s) and to give them the opportunity to publicly share their experience. After going through this process, participants recommended a stress-management approach that would incorporate elements of faith, celebration of New Orleans culture and geography, as well as social activity. The WATW pilot project demonstrates the applicability of an untraditional approach in addressing stress-related issues in post-disaster communities. The session will describe this original project and related qualitative data in detail.

5156.0: Wednesday, November 07, 2007 - 3:30 PM

Lay Health Advisors: A Self-Help Model for Improving Mental Health Post-Disaster

Shawna Marie Herbst, MSW, MPH1, **Antor Ndep Ola**, MPH, CHES2, Jean Valliere, MSW, LCSW, BACS3, Paula Zeanah, PhD3, and **Jeanette Magnus**, MD, PhD4.

Hurricanes Katrina and Rita and the subsequent levee breaches devastated Louisiana and caused damage, displacement and death never seen in this country. Survivors of these disasters are experiencing a multitude of stressors. Preliminary results demonstrate that many are experiencing some symptomatology of PTSD and a majority is facing ongoing stress related to living in often chaotic environments and with an extreme deficit in resources.

The aim of this project is to increase community awareness of stress and depression through the training of lay health educators (LHEs). A partnership between Tulane Xavier National Center of Excellence in Women's Health (TUXCOE) staff and Louisiana Office of Public Health Title V program staff has been created. Focus groups will be conducted in each affected parish and analyzed in order to obtain community-relevant information for the lay health educator training. LHEs will be recruited from community organizations within the targeted communities. The project will include training of 30 LHE women per year equipped to provide stress awareness information within their respective communities. The goal is that the LHEs will increase awareness of post-disaster mental health and reduce the

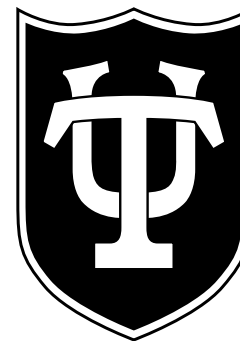
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Faculty and Staff Presentations

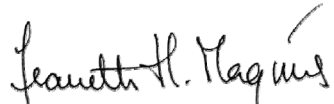
**American Public Health Association Annual
Meeting
2007**

Welcome

from the Tulane University School of Public Health and Tropical Medicine Department of Community Health Sciences.

We are pleased to highlight the involvement of our faculty and staff in the 2007 American Public Health Association Annual Meeting. This year, our faculty and staff were involved in the development of 15 abstracts including work by current students from both graduate and undergraduate programs.

Stop and say hello at the Tulane University School of Public Health and Tropical Medicine booth in the Public Health Expo. Whether you are a former or current student, a prospective student, or fellow public health professional, we would enjoy meeting with you. We hope to see you in our sessions!



Jeanette H. Magnus, MD, PhD
Acting Chair

Cecile Usdin Professor in Women's Health
Department of Community Health Sciences

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Meshawn Tarver, MPH and **Jeanette Magnus**, MD, PhD.

The Tulane Xavier National Center of Excellence in Women's Health recognizes that the input of community members is valuable in program development and implementation. Thus TUXCOE utilizes focus groups as one strategy to obtain the community's input. In 2005, TUXCOE sought to gain a better understanding of how mothers influence their daughter's infant feeding decision. The theory was: African American women are unlikely to re-evaluate their beliefs about breastfeeding without support from the community, and without convincing evidence and encouragement from their elder female relatives to whom they turn for advice about mothering. Researchers hoped the results would assist in the development of a breastfeeding program to encourage African American women to consider breastfeeding that would be inclusive of grandmothers. Before all focus groups were conducted Hurricane Katrina hit. After this catastrophic storm, researchers speculated that the experiences of new mothers in the city during and after the storm would change the perception of breastfeeding in the African American community. So researchers sought to answer the question: Did Hurricane Katrina have any effect on the perception of breastfeeding in the African American community? This presentation will share stories collected from women one year after the storm.

Keywords: African American, Breast Feeding

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“Worth a Thousand Words” - Stress reduction in post-Katrina New Orleans among women through a combined PhotoVoice and Freirian Praxis methodology approach

Ryan Coffman, MPH1, **Antor Ndep Ola**, MPH, CHES2, Meshawn Tarver, MPH3, **Gail Rome**2, and **Jeanette H. Magnus**, MD, PhD2.

Stress and associated physical and mental health symptoms are emerging public health challenges in post-Katrina New Orleans. Some community and individual determinants of post disaster stress include female gender, educational level, unemployment status, and the loss of property, friend and/or family member. The Worth a Thousand Words (WATW) pilot project; eight women, 50-90 years of age were trained on camera usage and the power of the visual image. Equipped with cameras they took pictures based upon three prompts relating to assets, needs, and self-identified stress man-

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Zeanah, PhD, Jeanette Magnus, MD, PhD

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Assessing New Orleans women's physical and psychosocial response to the devastation caused by hurricane Katrina: A qualitative case study

Antor Ndep Ola, MPH, CHES1, Meshawn Tarver, MPH2, **Gail Rome**1, and **Jeanette H. Magnus**, MD, PhD1.

According to the 2004 Louisiana's Health Report Card, the pre-Katrina levels of chronic diseases and their risk factors in New Orleans were higher than the national average. Research has shown that posttraumatic event coping self-efficacy levels are strongly associated with pre-disaster disease incidence and outcomes. In order to adequately understand the healthcare need of the population affected by this disaster the Tulane Xavier National Center of Excellence in Women's Health (TUXCOE) designed a qualitative study to review New Orleans women's self-identified stressors and how they respond to them.

Focus groups were conducted in the Fall of 2006, about one year after the disaster. The inclusion criteria were; women, ages 18 and older, having lived in New Orleans prior to Hurricane Katrina. Content analysis of the data revealed that stress associated with post disaster life manifested in both physical and mental symptoms such as sleeplessness, forgetfulness and headaches. Churches were identified as sources of physical support such as clothing and food as well as emotional support. The individual's personal attachment to a specific religious group was associated with stronger emotional support and better stress management. Despite the harsh realities of living in a post disaster environment, the women expressed determination to rebuild their lives and reclaim their community. Support programs should emphasize the variation of responses to stress and to partner with religious organizations to

Keywords: Community-Based Public Health, Needs Assessment

5156.0: Wednesday, November 07, 2007 - 2:50 PM

In the face of a disaster or emergency, would Louisiana women breastfeed?

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2042.0: Board 2 Home environment and outcomes of young maltreated children

Lara R. Robinson, PhD MPH1, **Neil Boris**, MD2, Sherryl Scott Heller, PhD3, Charles H. Zeanah, MD3, Cinda Clark, MSW4, and Shantice D. Hawkins, MPH5.

Although the literature has shown that maltreated children experience more cognitive and social/emotional delays than their non-maltreated peers, the mechanisms underlying these differences are poorly understood. The goal of this study was to investigate the relationship between developmental outcomes and placement context by assessing children placed in out-of-home care before age 4 years old for state-verified maltreatment but who had been living in a stable placement for at least one year. Several hypotheses were proposed: (1) maltreated children will display more behavioral and emotional symptomatology and lower cognitive scores than non-maltreated children; (2) home environment variables will mediate outcomes for both maltreated and non-maltreated children, and (3) placement type will predict outcomes. Participants included 161 children, 78 maltreated and 83 non-maltreated, from ages 6 to 9 years. Results indicated that the maltreated children had lower cognitive scores, lower scores on the quality of their home environment, and more psychopathology; however, results indicated that it was elements of the home environment that accounted for some of the differences in psychopathology between these groups. Analyses within the maltreated placement groups suggest differences only on the quality of the home environment between biological/kin and adoptive placement groups. Results suggest the most important indicator of maltreated children's adjustment is the quality of their post-placement home environment. To mitigate the sequelae of maltreatment, intervention must continue beyond the placement of a child in a home and involve services aimed at building stronger family relationships and meeting basic needs that ensure healthy development.

Keywords: Child Abuse, Child/Adolescent Mental Health

2043.0: Board 7 Gaining access into a Vietnamese American community in New Orleans: A lesson in cultural competency

Christina Wadhvani, BA (Candidate)¹, **Antor Ndep Ola**, MPH, CHES², **Meshawn Tarver**, MPH³, and **Jeanette H. Magnus**, MD, PhD².

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The Vietnamese Community in New Orleans East lived independently from surrounding communities for nearly seventy years. The exclusive yet internally cohesive community made many social progresses upon their arrival to New Orleans building and maintaining small businesses. Since the 1940's, the community has not fully participated in health research as a result, there is very limited information pertaining to health status. Health statistics specifically describing this segment of New Orleans population is not currently available. Previous attempts by the Tulane Xavier National Center of Excellence in Women's Health (TUXCOE) to gain entrance into this community in a culturally sensitive manner were halted by the sudden departure of staff and student liaisons.

In August 2006, TUXCOE re-entered the community to assess the stress response of the Vietnamese American women post Hurricane Katrina. This session will explore how TUXCOE gained entry into this community breaking seventy years of isolation by establishing relationships with the elders and other stakeholders, building partnerships with the community through the Mary Queen of Vietnam Church's Community Development Cooperation, expressing TUXCOE's sincerity of purpose, and earning community members' trust. Through focus groups, TUXCOE assessed the women's stress response and coping mechanisms and the women discussed difficulties associated with access to health facilities and the roles that cultural competence and linguistic capability play in delivering efficient yet culturally appropriate health education services. This session will also express the imperative needs of the women, revealing the importance of establishing a free, bilingual health clinic in New Orleans East.

2039.0: Board 8 Rapid repeat pregnancy in adolescence: The role of mental health factors, contextual factors, and past experiences

Colleen P. Crittenden, DrPH, **Neil Boris**, MD, Janet C. Rice, PhD, **Catherine A. Taylor**, PhD, and David Olds, PhD

Background: Approximately one out of every five young mothers has a second pregnancy within two years following initial pregnancy outcome. Previous research on adolescents at risk for rapid repeat pregnancy has been limited. This study investigates both the predictors and correlates of rapid repeat pregnancy in a sample of urban young mothers.

Methods: Adolescents aged 12 to 19 years (N=354) who were predomi-

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the storm hit; subsequently how the Center reinitiated collaboration with a disrupted and broken community; and how the needs assessments in the post-disaster environment altered program focus in the community. This change included the altering of the Center's research, individual projects and priorities for community work and involvement.

Learning Objectives: At the end of this session, participants will be able to:

- Identify stressors specific to living in a post disaster environment
- Recognize the physical and emotional symptoms of post disaster stress
- Discuss the components of a support program for community women based on the data from this needs assessment
- Describe how Louisiana's women perception has changed post Katrina
- Describe non-traditional approaches to mental health service delivery and to qualitative data collection

Moderator(s): [Jeanette Magnus, MD, PhD](#)

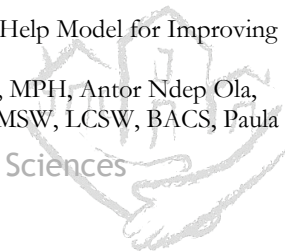
2:30 PM Assessing New Orleans women's physical and psychosocial response to the devastation caused by hurricane Katrina: A qualitative case study
Antor Ndep Ola, MPH, CHES, Meshawn Tarver, MPH, Gail Rome, Jeanette H. Magnus, MD, PhD

2:50 PM In the face of a disaster or emergency, would Louisiana women breastfeed?
Meshawn Tarver, MPH, Jeanette Magnus, MD, PhD

3:10 PM "Worth a Thousand Words" - Stress reduction in post-Katrina New Orleans among women through a combined PhotoVoice and Freirian Praxis methodology approach
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3:30 PM Lay Health Advisors: A Self-Help Model for Improving Mental Health Post-Disaster
Shawna Marie Herbst, MSW, MPH, Antor Ndep Ola, MPH, CHES, Jean Valliere, MSW, LCSW, BACS, Paula

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(LHEs) and their trainers are one means of filling the gap. LHEs have been shown to be effective in disseminating health information and are culturally-accepted as a means of providing services in the New Orleans area. Tulane Xavier Center of Excellence in Women's Health (TUXCOE) has a history of successful LHE health education programs.

Partnerships with community organizations are imperative as a source for recruitment and training of LHEs. Earlier, the most effective method of contact was through collaboration with colleagues already doing similar work in the field and requesting access to their community members. Due to the destroyed lines of communication, physical presence at a location is currently the most effective networking method, which requires systematic survey to locate organizations that are open and providing services. Once a relationship has been fostered, community leaders have provided a pool of women willing to participate in focus groups and recommendations for women interested in training to become LHEs in their neighborhoods. TUXCOE provides LHEs with ongoing support through weekly phone calls or site visits, building self-efficacy and empowering women to make positive changes in their lives.

5156.0: Wednesday, November 07, 2007: 2:30 PM-4:00 PM

Qualitative Research in Community Planning in the Aftermath of Hurricane Katrina

The adverse physical and mental health conditions that emerge post-disaster are issues that have become of increased interest to the research community given the number of disasters recently experienced in this country. The Greater New Orleans area has seen a plethora of research and community action programs and projects addressing post-Katrina community health needs. One of the greatest challenges in working in this community is addressing health needs that were pre-existing and have since been exacerbated by the community devastation. Tulane Xavier Center of Excellence in Women's Health has been committed to addressing these emerging needs of our community through our research and many programs focusing on the physical and mental health conditions occurring in our communities still far from recovered. This session will cover some of the findings of our post-Katrina research and a description or update on the programs that have been or are now being implemented. During this session, the presenters will discuss some of the research the Center had been pursuing before

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nantly African-American (94.1%) completed individual interviews during pregnancy and at 24 months postpartum. Interviews addressed socioeconomic conditions, mental health, personality characteristics, self-efficacy, and child-rearing beliefs. Logistic regression was used to determine the relationship between contextual factors, mental health factors, and past experiences in the prediction of rapid repeat pregnancy.

Results: Forty-two percent (N=147) of adolescents experienced a rapid repeat pregnancy. Reports of later age at menarche (12.43 vs. 11.91; $p=.003$) and lower scores on three self-reported measures of aggression were significantly associated with rapid repeat pregnancy. Both age at menarche and aggression contributed independently to the prediction of a closely spaced second pregnancy ($p<.05$).

Conclusions: It is suggested that pubertal onset and individual mental health as it relates to measures of aggression should be considered when developing programs targeting young women at highest risk for repeated childbearing. Prevention of rapid repeat pregnancy may provide a more focused approach to intervention, given the lack of evidence for effective prevention of an initial pregnancy in some groups.

Keywords: Adolescent Health, Pregnancy



Monday November 5th

3248.0: 12:45 PM Risk factors for aggressive behavior among 3 year olds: Does television viewing play a role?

Jennifer A. Manganello, PhD, MPH, and **Catherine A. Taylor**, PhD,

The American Academy of Pediatrics recommends no television for children ages 0 to 2, and no more than 2 hours of television viewing per day for children ages 3 and older (AAP, 2006). However, many children are exposed to more than 2 hours of television each day. There are many factors that can influence aggressive behavior, including media use. Using data from the Fragile Families study, a longitudinal study collecting data from parents of children born between 1998 and 2000 (n=4,898) from 16 cities, we examined the relationship between the amount of time children spent watching television with measures of aggressive behavior. We conducted bivariate analysis using Chi-square tests to compare each of the aggressive behavior variables with high vs. low television viewing. We then conducted logistic regressions for those measures with significant bivariate results, controlling for other factors known to contribute to aggression. Thirty-one percent of mothers reported that their children watched 2 or less hours of television per day, while 69% reported 3 or more hours of TV viewing. Of the 10 aggressive behavior variables we looked at, preliminary analysis suggests that 3 year old children who watch more than two hours of television on a typical weekday are more likely to engage in aggressive behavior than children who watch 2 hours of television or less. Implications of these findings will be discussed.

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Donald (Diego) Rose, PhD, MPH1, **J. Nicholas Bodor**, MPH1, Christopher Swalm, MS1, **Thomas Farley**, MD, MPH1, Janet C. Rice, PhD, MS1, and Deborah Cohen, MD, MPH2.

A growing body of research has highlighted disparities in access to supermarkets by race-ethnicity. A gap in this research exists in the urban south, where the presence of small food stores might offset the lack of neighborhood supermarkets in the overall provision of key food groups, like fruits and vegetables. We investigated this in 2004-05 with a stratified random sample of 103 urban census tracts from southeast Louisiana, an area that included New Orleans, Baton Rouge, and Lafayette. We supplemented retailer lists from the state health department with on-the-ground observations to obtain addresses of all outlets in the sampled tracts. In-store observations in these outlets included measurement of linear shelf space of all fresh fruits and vegetables, using a technique for which our inter-rater reliability was strong ($r > 0.95$). We used 2000 Census data to categorize tracts by race-ethnicity (AA for those with more than 80% African-American residents). On average, AA tracts had about one-third as many supermarkets as did other tracts, yet three times as many small food stores. Total tract shelf space of either fruits or vegetables in AA tracts was significantly lower ($P < 0.05$); about one quarter of that available in other tracts. Our results suggest that despite the presence of many small food stores, racial-ethnic disparities exist in the availability of fresh fruits and vegetables for urban southeast Louisiana. Initiatives to increase provision of fruits and vegetables in small neighborhood stores could make a significant impact on these disparities.

Keywords: Food and Nutrition, Access

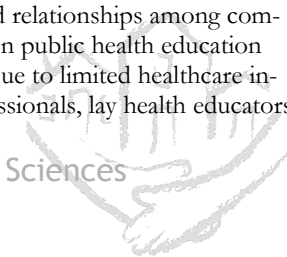
5098.0: 1:30 PM

Lay Health Educators: An Opportunity for Community Education Post-Disaster

Shawna Marie Herbst, MSW, MPH1, **Antor Ndep Ola**, MPH, CHES2, Jean Valliere, MSW, LCSW, BACS3, Paula Zeanah, PhD3, and **Jeanette Magnus**, MD, PhD4.

The Greater New Orleans area endured severed relationships among community organizations previously collaborating on public health education projects following hurricane Katrina in 2005. Due to limited healthcare infrastructure and an out flux of healthcare professionals, lay health educators

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5015.0: Board 8

Impact of Mentorship Program on well-being of Youth-headed households in Rwanda

Neil Boris, MD1, Lisanne Brown, PhD2, and Tonya Thurman, PhD2.

Background: Youth-headed households (YHH) are common in Rwanda: AIDS and the genocide left many children living with limited adult care. The scale of the YHH problem requires innovative solutions. Using trained adult volunteers from the community to develop a stable relationship with children through regular home visits is one potentially scalable approach. However, there is little empirical evidence on the effectiveness of mentoring programs. Methods: A quasi-experimental study of 692 YHHs residing in four districts was conducted from 2004-2006. All households received basic needs assistance (e.g., school fees) from World Vision. Following the 2004 baseline survey an adult mentorship program was implemented in two districts. The comprehensive survey instrument was developed, extensively piloted and administered by trained interviewers to YHHs. Primary outcome measures include Center for Epidemiologic Studies Depression Rating Scale (CES-D) and indexes of social marginalization, grief and adult support. Logistic regression was conducted to assess the impact of the program on these outcomes. Results: Survey subscales had good psychometric properties. The proportion of survey respondents reporting high adult support in the intervention group was significantly higher at time two than time one; there was no difference in the comparison group. The intervention group also reported modest, though significant decreases in depressive symptoms, marginalization and grief. Conclusions: The mentorship program resulted in increased adult support among the YHH. However, the impact of the program on emotional well-being was more modest. More intensive interventions may be needed for those with high levels of depressive symptoms.

Keywords: Adolescents, International, Psychological Indicators

5045.0: 9:10 AM

Disparities in access to fruits and vegetables: Results from the Louisiana Neighborhood Environment and Consumption Survey

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4271.0: Board 3

What can Louisiana do to improve breastfeeding duration rates?

Meshawn Tarver, MPH and **Jeanette H. Magnus**, MD, PhD

When compared to other countries in the developing world US breastfeeding rates are not making the mark. According to 2003 data, Norway has the highest breastfeeding rates with an initiation rate of 99% followed by Sweden with an initiation rate of 97% and the US lags behind with a rate of 70% but not far behind its goal of 75%. On the other hand, the US has a bit of work to do in achieving the recommended six months of exclusive breastfeeding. In the US, only 33% of women breastfeed six months post-partum, a rate far from the Healthy People 2010 goal of 50%. According to LA PRAMS 2003 data, Louisiana's breastfeeding initiation rate is 46.4% and the duration rate is 10.2%. One major barrier for achieving the recommended 6-month goal for US women is returning to work. Unlike other countries, US women receive twelve weeks of unpaid maternity leave depending on the number of employees employed by the company. According to European Industrial Relations Observatory, Norwegian parents receive 52 weeks of paid parental leave. Evidence suggests that US employers could significantly improve workplace dynamics and the health of their employees' and their employees' children by establishing a breastfeeding-friendly workplace. How do Louisiana employers perceive becoming breastfeeding friendly? This session highlights the results of baseline surveys administered to Louisiana employers and success stories of Louisiana workplaces that became breastfeeding-friendly workplaces.

Keywords: Breastfeeding, Community-Based Partnership

4088.0: Board 4

Perceived stress of New Orleans Vietnamese American women affected by Hurricane Katrina: A case study

Antor Ndep Ola, MPH, CHES1, Christina Wadhvani, BA (Candidate)2, Meshawn Tarver, MPH3, and **Jeanette H. Magnus**, MD, PhD1.

Although the state of Louisiana has relatively small numbers of people of Asian Ancestry, pre-Katrina New Orleans had the highest number of Asian-Americans in the state. The Versailles area of East New Orleans was home to almost sixty thousand Americans of Vietnamese ancestry. In August

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through December 2006, an assessment of stress response of the Vietnamese American women post Hurricane Katrina was conducted. Focus groups as well as key-informant interviews were conducted. The instruments as well as the transcribed qualitative data were assessed using back translation method to ensure accuracy of information being reported. The data was analyzed using ATLAS ti software. Themes related to stress and coping were identified as well as emerging themes related to community healthcare needs. Preliminary results indicate that exposure to property damage, loss of lives and livelihood was positively associated with high stress levels. The women discussed difficulties associated with access to health facilities and stressed the roles that cultural competence and linguistic capability play in delivery of efficient as well as culturally appropriate health education services. The main coping strategy reported was being involved in the church and bonding with other community members. The cultural and social cohesiveness of this group was a strong determinant of them successfully coping with the aftermath of Hurricane Katrina. However, their socio-political isolation from other groups in the city was now perceived as a barrier to successfully establishing a bilingual healthcare center in their community.

Keywords: Asian Americans, Needs Assessment

4275.0: Board 4

APHA as a teaching tool for maternal and child health students

Jennifer Hixon, MPH and Jeanette H. Magnus, MD, PhD,

The annual meeting of the APHA represents a unique opportunity for current public health students to use practice based learning to explore the field of public health and further their understanding of scientific research and presentation in MCH. The Tulane MCH program supports elected students for APHA and a specific curriculum has been developed. The learning objectives include: 1) Enhanced understanding of the abstract process through critique of abstracts and related presentation 2) Demonstrate ability to prioritize topic areas based on link to personally defined career goals 3) Demonstrate ability to assess public health job market and through interaction with professional and represented agencies. After their visit, the students have to develop a report addressing how learning objectives were met. It is our opinion that through a guided curriculum, the MCH students attending APHA enhanced their understanding of the skills related to writing an excellent abstract, delivering a scientific presentation, and developing effective Power Point presentations. Students also explored career opportunities in a

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systematized way and identified networking opportunities. Students reported finding the guided systematized way and to be useful and encourage students to consider submitting an APHA abstract.

Keywords: Training, Maternal and Child Health

4191.0: 3:24 PM

Alcohol availability and neighborhood characteristics in Los Angeles, California and Southern Louisiana

Ricky N. Bluthenthal, PhD1, Deborah Cohen, MD, MPH2, **Thomas Farley**, MD, MPH3, Richard Scribner, MD, MPH4, Chris Beighley, MS2, Matthias Schonlau, PhD2, and Paul L. Robinson, PhD5.

Objective: To examine the association among shelf space, number of outlets, and relative price per ounce of alcoholic beverages and neighborhood characteristics of randomly selected census tracts in California and Louisiana. Methods: Data on outlet shelf space and price by beverage type (regular beer, malt liquor, and distilled spirits) was collected at all off-sale alcohol outlets in 189 census tracts. We examined whether these types of alcohol availability were associated with neighborhood characteristics. Results: Substantial variability among census tracts was observed in alcohol shelf space and alcohol outlet per tract. In multivariate analyses controlling for state, socioeconomic variables were associated with shelf space and outlet availability. Percent of households receiving public assistance was inversely associated with total per capita shelf space, per capita malt liquor shelf space, and per capita distilled spirit shelf space. In contrast, household poverty was associated with more per capita malt liquor shelf space. Household poverty was also positively associated outlets per roadway mile and outlets per capita. For price availability, African American population percent was inversely associated with malt beverage price. Discussion: Socioeconomic characteristics were associated with shelf space and outlets per tract measures of alcohol availability while price availability was associated with demographic characteristics. In general, lower income areas had less shelf space, but more outlets. African Americans appear to have access to lower priced beer and malt liquor. Examining different types of alcohol availability appears useful and provides important information for developing new policies and interventions that might reduce alcohol related harms.

Keywords: Alcohol, Social Inequalities

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