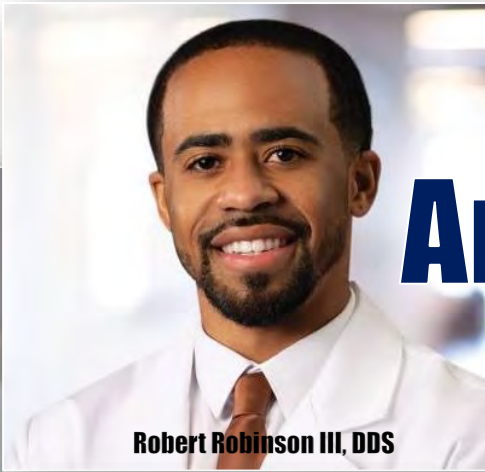


AFRICAN AMERICAN MEN IN DENTISTRY



Robert Robinson III, DDS



Tobin Odejiini, DDS



Jeremy Williams, DDS



Chinakasiobi Mbata, DDS



Uchenna Umerah, D3, CUSOO



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 through 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

This month of April 2021, we celebrate the graduation of our diverse students at Creighton University, especially the students in the health sciences' schools supported by our office of Health Sciences Multicultural and Community Affairs (HS-MACA).

In this newsletter, our focus is on the **African American Dentist** workforce, and their contributions to oral health care in the United States. There is a gross underrepresentation of African American dentists in the United States and the few available are disproportionately caring for the minority and underserved communities. Currently there are 199,486 practicing dentists in the USA, only about 3% are Black. In the 2017 survey of Black dentists 76% (4792) of them self-identified as African Americans, 13.2% (822) identified as African and 10.3% (641) as Afro-Caribbean. There are about equal number of men and women Black dentists¹.

Since 1985, the post baccalaureate program at Creighton University has contributed to the diverse workforce of dentistry. The post baccalaureate program for dental students was initiated in 1974, through a pre-dental summer enrichment program. Since 2005, HS-MACA, in collaboration with Creighton University School of Dentistry has had a fee-driven Post baccalaureate and Pre-matriculation program for underrepresented minority students to prepare them for acceptance into Creighton dental school. A total of 86 students (27 of whom are African American), have completed this program. Forty-seven (20 African American) are in clinical practice, 23 (10 African American) are in dental school and 7 (2 African American) students are currently in the program. There are 5 students in other post graduate health careers, and we don't know the where about of the other 4 students.

In this edition, we have invited some of our African American post baccalaureate alumni, and current students to share their testimonies of success and challenges in pursuing their dream of a career in dentistry.

We would like to thank the dean, faculty, and staff of the CUSOD for their commitment to diversity and their contribution to the oral health workforce, and we look forward to increasing the numbers of African American students at Creighton School of Dentistry.

For there was never yet a philosopher, that could endure a toothache patiently. ~William Shakespeare, Much Ado About Nothing.

Sade Kosoko-Lasaki, MD, MSPH, MBA
Associate Vice Provost and Professor
Director, Multicultural and Community Affairs

¹Mertz E, Calvo J, Gates P: The Black dentist Workforce in the United States, J Public Health Den. 2017 Mar: 77(2):136-147



Creighton University School of Dentistry Administration from L to R: Mark A. Latta, DMD, Dean CUSOD and Neil S. Norton, PhD, Associate Dean for Admissions



Gregory L. Davis, BA, DDS
Assistant Clinical Professor, CUSOD
Faculty Advisor, SNDA



Colette O'Meara-McKinney, M.Ed.
Assistant Dean, Office of Student Affairs

Thank you to Creighton University School of Dentistry for their support of our department, our students, and the Post-Baccalaureate Pre-Dental Program. – HS-MACA

Gregory L. Davis, BA, DDS



Gregory L. Davis, BA, DDS, Assistant Professor, School of Dentistry

Why did I choose the field of dentistry?

While in school, I went to a career day at North High School in Omaha, with a variety of speakers, one of which was a dentist, Dr. Gosney, who talked about his profession. I was somewhat interested in the medical health professions. But I did not particularly want to get into one that dealt with life and death on a continuous basis. After discussion of the ins and outs of dentistry, it really tweaked my interest, especially with the knowledge that there were only two black dentists that I knew of in Omaha. I started also thinking this would be a great opportunity to give back to the community and have a decent life monetarily for a future family, with some prestige associated with it. Little did I know of everything it would entail to reach that goal of being a dentist, the education that was needed along with the courses and the studying you must put in to achieve that goal. No one told me, because I had no examples before me, no role models except for the two dentists I spoke about earlier, who were in the process of retiring. So, I was pretty much on my own, but determined to do something in the medical health professions.

Who were my role models/mentors?

I would have to say my first role models were my mother and father, George and Grace Davis. By their individual hard work ethics and “old fashion home training”, not only for me, but also for my brother, they set the stage and provided the opportunity, which not everyone gets, to succeed in every way in life. They provided the love, the stable household, the spiritual and emotional support, as well as the push, which we all sometimes need, at different stages of our lives to move on, to succeed. I would need to write a book to tell you of all the circumstances they had to overcome to put themselves in the positions to help us, which is true love. In school, one influence was Mary Clanton, my Spanish teacher in high school, who taught me how encouragement of a student can turn that individual around, which it did for me. I was a C student, but her care and encouragement helped

me to become fluent in Spanish and turned me into a straight A student from my junior year on. Not only in that course, but all my classes, most of them AP courses.

In college, my role model was a gentleman, Lucien Manchester. He was a graduate student from Africa who taught many of the undergrad and graduate courses at UNO. He was working on his doctorate in biology while I was the only black biology major at UNO for four years. He continued to push and encourage me to strive farther, which I now try to do with my students at Creighton. All it takes are a few words of encouragement to change and turn a person's life around, which is also something my mom taught me. Lucien had a deep influence on my life, whether he knows it or not.

My experience as an African American professor at a dental school?

I would say it is a proud but lonely position of responsibility I have taken. Over the years I had hoped that there would be more students, more instructors of color hired at the school, but it hasn't happened. I know how important it is to see another person of the same ethnicity as a student, and as a patient within the school, so you can at least emotionally, mentally, psychologically, and socially empathize with them. These students need to see other students and instructors of that have made it and advanced so they can say, "If he or she could it, so can I".

Any Advice to African American students pursuing dentistry?

Don't take anything for granted that you are being graded and judged at the same level, because you're not. As I was taught, even at the elementary and high school level, as a person of color, you've got to work twice as hard or more to be accepted or even to get to a level of mediocrity of a person of non-color. You won't be given or offered the same opportunities, so that means you got to find the inner strength, stay positive, not listen to naysayers, determination above everything else, and focus on your future to make your dreams come true. Focus on the mission ahead as a leader in your community, focus on your family, believe in yourself when others say different, and as Malcolm said, "By any means necessary", you say, "Yes I Can".





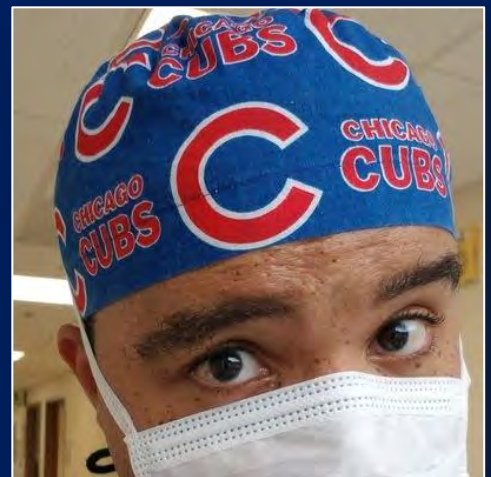
Alvin Samuels Jr, DDS

Post-Bac Class of 2011

Why did you choose the field of dentistry?

My initial plan was to practice medicine. While in high school I was shadowing a physician, who received horrible news. He received a call from a parent of one of his pediatric patients. The parents called to thank you for all that he had done over the years with their child. But despite his best efforts the patient passed away. The physician offered his condolences to the parents and went back to treating patients without missing a beat. I became emotional and asked him how he could keep going after receiving terrible news. The physician replied, "It is part of the job. If you can't handle that, you may want to consider another profession."

I asked him for advice on what I should do. He asked me what I liked to do. I replied that, "I want to help people, but I don't think I would handle death the best." He then asked me if I liked working with my hands. I liked working with my hands! I always like building things and working on projects. He suggested I research the dental profession. The doctor encouraged me that I could still be a physician and work with my hands. He then said something that would change my career path. He said, "Even if you can't save a tooth, you can always replace it." I WAS SOLD!



Alvin Samuels Jr., DDS

My experience as an African dentist/dental student and or professor

My experience as an African American dentist has been tough at times. I imagine it has been the “traditional” tough that all students go through. However, it is very difficult when you are the first in your family to pursue a difficult path such as dentistry and it can be discouraging when those ahead of you and/or around you are different from you. You can’t let this limit you, but if anything, you must use it as fuel. My classmates were great and were a joy to work and matriculate with. I just think some of us had different experiences. Some of my classmates had brothers, sisters, fathers, or mothers who were dentists. I always had that chip on my shoulder. But I could never blame them for what they had, and I could only hope that by finishing what I started that I could be that “someone” for a student in the future. That mentor that could be an advocate for a student in need.

Who is your role model/mentor in dentistry?

Dr. Gregory Davis is my mentor in dentistry. He has been my mentor for nearly 15 years. After I made the decision to set my mind on dentistry, I utilized my resources and contacted Dr. Davis. He said he would let me shadow him at the dental school and assist him and students with patients. The very first appointment with Dr. Davis was the delivery of maxillary (top) and mandibular (bottom) complete dentures. It was for a senior citizen who easily could have been my grandmother. The smile that Dr. Davis literally put on her face during that appointment was sealed the deal for me. The patient expressed how happy she would be able to eat, speak and smile now that she had her teeth was so powerful. At that point, it became clear to me how important teeth are for us to function every day. Dr. Davis mentored me through college, the dental school application, post-baccalaureate studies, my dental school pre-clinical years and my clinical time at Creighton. He even helped me land my first job after I left the United States Navy. I wouldn’t be the dentist that I am now if it were not for Dr. Davis.



Alvin Samuels Jr., DDS

Any advice to other male African American students in the pipeline?

The best advice to any student that is pursuing a career in dentistry or any demanding profession is the same regardless of career choice: Find a mentor 2, 5 and 10 years ahead of you. Beginning with the end in mind allows you to have an idea of what is possible after you are done with professional school and residency (10 years), it allows to know what needs to be done to successfully finish professional school (4-5 years) and it provides you a source of information for someone who is currently going through it (2 years). You don’t necessarily have to learn only from their mistakes. From your mentors, learn from their mistakes, but also learn what worked well for them and improve upon that. The second-best advice I could give a student in the pipeline is to establish a support system before the problem arises. It is great to have academic tutoring, mentors, a listening ear and friends and family “at the ready” before the inevitable hardship gets worse. In professional school, you learn an enormous amount of material rapidly. You must know who to ask for help quickly before you get left



Creighton University School of Dentistry

Breaking Barriers to Fill the Gap: African American Men in Dentistry

Mervin D. Vasser, MPA – Recruitment and Retention Manager

Despite the push to increase diversity in the health professions, the representation of African American men pursuing such careers remain disproportionately low. This is a concern that affects not only African Americans, but also our national ability to provide excellent healthcare to the community. Racial diversity in science and medicine help to address health inequalities. Studies have shown that people from minority groups receive better care when their healthcare providers have similar backgrounds. (Institute of Medicine, 2002). Racial diversity leads not just to more doctors of color, but better health care professionals who practice in communities of color.

The underrepresentation of African American dentists is extraordinary. The Black dentists that are in practice are shouldering a disproportionate share of dental care for minority and underserved communities. In addition, Blacks, Hispanic/Latinos and American Indian/Alaska Natives have a disproportionally lower presence in the dental workforce compared to the United States population overall and are cumulatively referred to as underrepresented minorities (URM). Underrepresented minorities (URMs) together make up almost 30 percent of the US population, however, they comprise only about 6 percent of U.S. dentists. URM's are underrepresented in the dental workforce, but often experience larger disparities in oral health and access to dental care.

Since the year 2000, the Health Sciences Multicultural and Community Affairs Department (HS-MACA) has worked diligently to reduce disparities and increase diversity in the health sciences. In 2005, HS-MACA began its Post-Baccalaureate Pre-Dental Program with Creighton University School of Dentistry to increase the diversity of their student body. With approximately 13 percent of first-year dental students coming from URM groups, the proportion of URM students entering dental school remains significantly below that of the general population. HS-MACA has taken pride in addressing this concern with strategically implemented programming designed to alleviate barriers and bridge the achievement gap of African American men in dentistry.

		Academic Years						
	Pre-Dental	13-14	14-15	15-16	16-17	17-18	Total	Overall %
Racial Group	Hispanic	2	1	1	1	2	7	27%
	African American	2	2	2	4	3	13	50%
	Native American	1	1	1	0	1	4	15%
	Asian/Other	0	1	1	0	0	2	8%
	Native Hawaiian/ Pacific Islander	0	0	0	0	0	0	0

Table 1: Example of Creighton University Post-Baccalaureate Pre-Dental Students by Race/Ethnicity, 2013-2018

Financial cost of pursuing a health sciences degree has proven to be one of the prominent barriers regardless of the program or pathway. The monetary cost of entering a health profession is even greater for URM students than other racial/ethnic groups as they are more likely to come from lower socio-economic backgrounds. According to the latest Census Bureau data, the 2016 median income for non-Latino White households was \$65,041, whereas Black and Latino households had median incomes of \$39,490 and \$47,675, respectively. According to the Sullivan's Commission's report on minorities in the health professions, the federal government's Advisory Committee on Student Financial Assistance estimates that 48 percent of academically qualified low-income students do not attend four-year colleges because of financial barriers. URM students, like other health professional students, must often rely on student loans to finance their education. However, the amount of debt among URM students in medicine is especially large.

HS-MACA has maintained a consistent approach to combating financial challenges for URM students. While the average tuition and fees at private National Universities have jumped 144%, out-of-state tuition and fees at public National Universities have risen 165%, and in-state tuition and fees at public National Universities have grown the most, increasing 212%, (*US News World Report, September 2020*). HS-MACA has maintained the tuition cost of the post-baccalaureate and pre-matriculation programs. Our post-bac and pre-matriculation programs afford matriculants into professional schools, the opportunity to receive scholarship. In addition, HS-MACA recently reached its goal of \$50,000 (through alumni contributions) to create an endowment that will allow scholarship to be awarded to students enrolled in the Post-Baccalaureate Pre-Dental and Pre-Medical Programs.

Inadequate academic preparation is a persistent challenge for URM students at both undergraduate and graduate levels. Most health professions require students to complete a number of prerequisite classes at the undergraduate level in the fields of math and science to be eligible to enroll in an undergraduate major or a graduate level program (these are called, "gateway courses"). URM students often receive lower grades in these courses because they are not as well prepared as their classmates. Their schools may have fewer resources to recruit and retain strong science teachers and operate science laboratories. These "gateway courses" have also been shown to cause students to lose interest in careers in medicine. At many universities, these courses register large numbers of students and course instructors do not provide much support for struggling students which has proven to be problematic for URM students. In addition, URM students may not know about or use academic support services that are available to them in the schools.

Another key barrier for URM students is lack of mentors who are racially or ethnically concordant. URM students need faculty mentors, but often lack them because there are few minority faculties in health professions schools. If you have mentors that look like you, it's a sign of hope and is very powerful. Previous research has shown the importance of peer mentorships for all university students; however, peer mentoring is especially critical to providing a welcoming and inclusive atmosphere for URM students. URM students come from socially and economically disadvantaged backgrounds and may not have any health professionals in their families or their families' social networks. Some are the first people in their families to go to college. They may only encounter health professionals when they or other members of their families need healthcare and the health professionals they encounter may be of other race/ethnicities. This may limit their career exploration into the health care fields because they are unaware of their career choices.

Lack of racially/ethnically concordant mentors may also make it difficult for students to seek advice on how to balance academic demands with social activism. Some URM pre-health and health professions students are active in social movements because they feel it is important to advocate on behalf of their communities. They may feel conflicted about taking time away from activism to study for classes and standardized tests. URM students face what psychologists call "stereotype threat." In short, URM students who attend college do so with an added burden of possibly being viewed by professors and peers through the lens of negative stereotypes about their capabilities, and the fear of living up to that stereotype. For example, an African-American student taking a test under stereotype threat might continuously reread questions and recheck

answers, in effect trying “too hard” to test perfectly and suppress myths that they do not belong in that exam room; this may result in poor academic performance.

Creighton University’s HS-MACA Department provides strong academic preparation and support for underserved students in health sciences through its “Pipeline Programs” as well as mentoring and tutoring activities designed for academic success. The goals of HS-MACA are to recruit underrepresented or disadvantaged students and faculty in the Health Sciences schools who will promote health and health equality to a diverse population, provide and promote retention activities for culturally competent underrepresented students and faculty, promote, expand and cultivate cultural awareness to campus and community and to address health disparities through teaching, research and community advocacy. However, recruitment and retention cannot effectively take place in isolation. Effective recruitment strategies should not take place without considering retention. Mostly designed to increase retention, HS-MACA’s mentoring programs are aimed at helping minority students successfully complete professional school once they gain admission. Mentoring is one of the most effective strategies for increasing the recruitment and retention of minority students in higher education, as well as having significant positive outcomes for graduation and career placement of minority students. HS-MACA’s continued focus on breaking barriers may ultimately fill the gap needed to diversify the healthcare field.

Robert Robinson III, DDS

Post-Bac Class of 2013



Robert Robinson III, DDS, Dental Practitioner, Howard Family Dental

Academic Support of Health Sciences Students: The Post-bac Model

Mado Juarez, MS, Assistant Director Academic Excellence

The post baccalaureate program serves students who for one reason or the other have been denied admission into medical or dental school. Many of our health science students are minorities, first generation-students, coming from a disadvantaged background. These students believe in what we, Health Sciences-Multicultural and Community Affairs (HS-MACA), do as a department. As students enroll into the post baccalaureate program, they trust that we as a department have their best interests in heart. When it comes to guaranteeing academic success for our health professional students, the post-baccalaureate program provides environmental social support, academic support, advising, mentoring, shadowing exposure, individual academic counseling, study skills workshops and a weekly learning laboratory.

As an academic advisor, when serving minority students, one must remember that a learning strategy may work for one student and not another. Therefore, it is imperative to know and understand each student's academic background, including their strengths and weaknesses. The post-baccalaureate model is defined by strong relationship building and identification of student strengths and weaknesses. Thus, the model personalizes academic support based on this information and relationships built. The post-baccalaureate model also includes a strong mentoring component, in which post-baccalaureate students are matched with current students in the School of Medicine or the School of Dentistry. Mentorship has been shown to positively affect social and academic outcomes of underrepresented minority mentees in the program. In addition, mentors gain additional experience and reinforcement of wisdom through coaching others.



Post-Baccalaureate Pre-Dental Class of 2020-2021

Our Learning Laboratory uses the SOAR study method¹ to help students become better, independent learners. The SOAR method incorporates 1) the *Selection* of appropriate information which involves note-taking which aids in attention. 2) *Organization* of materials. Once students' notes are organized, they are then taught on how to represent the materials using diagram, hierarchies and matrices. 3) Creating *associations*. This is where students learn on how to connect new information with existing knowledge. Lastly, 4) *Regulating* learning in which students are required to monitor their own learning using appropriate strategies. The learning workshops consist of: Test-taking strategies, regulation strategies, time management, comprehensive strategies, learning strategies, test anxiety, student wellness, professionalism and motivation. These learned skills will serve our students not just in their academia but also in their everyday lives, and help them with problem solving, critical thinking, and interacting with others.

¹ Kiewra, K (2005). Learn How to Study and SOAR to Success, Upper Saddle River, NJ: Prentice Hall.



Jeremy Williams, DDS

Post-Bac Class of 2016



Jeremy Williams, DDS, Dentistry Practitioner, Eagle Family Dental, Inc.

Why did you choose the field of dentistry?

I chose dentistry because I like to interact with people. Dentistry builds a level of self-esteem in patients. Increasing a person's quality of oral health is rewarding.

My experience as an African dentist/dental student?

As an African American student, it feels like you have no room for error. We must go above and beyond to garner the same level of respect as our peers which sometimes goes unnoticed. Most African American dental students or dentist are first generation college students. The path to get into dental school and the experience of being a dentist can be stressful as an underrepresented minority in a majority environment.

Who is your role model/mentor in dentistry?

My mentor is Dr. Brandon Hagler. Dr. Hagler is a Dentistry Practitioner in my hometown of New Orleans, LA. He recognized my potential and encouraged me to pursue dentistry when it felt it was impossible to become a dentist. Having leadership and a mentor dedicated to my professional success encouraged me to work harder to accomplish my goals.

Any advice to other male African American students in the pipeline?

Never give up. Never let anyone tell you what is not possible. Your path may be different, but the outcome of success will eventually be the same.

Uchenna Umerah, D3

Post-Bac Class of 2018



Why did you choose the field of dentistry?

Growing up in two different countries I have witnessed the consequences of lack of oral care awareness on people. Majority of the time, the lack of oral care awareness disproportionately affects people in low income areas and people in poor areas. My main reason for choosing dentistry is to first provide care and educate people from these backgrounds about the importance of oral health, the proper way to practice it and the consequences of ignoring it. Another reason I chose dentistry is to make an impact on people's quality of life by helping deliver their dental needs from esthetics dentistry to restoration of lost dental function.

My experience as an African dentist/dental student

My experiences as a dental student has been positive. I believe my positive experience has been due to the result of being able to answer a patient's question with evidence based explanation, treating the patient with respect, taking time to listen to each patient and thoroughly explain to the patients about their treatment options including the advantages and disadvantages of each option.

Who is your role model/mentor in dentistry?

I tend to look up to people who are at where I want to be as a dentist. Before attending Creighton dental school my mentor was Dr. Bonaventure Nwokocha of Today's dental in Minnesota. In Omaha, my mentor is Dr. Greg Davis of Creighton dental school.

Any advice to other male African American students in the pipeline?

Per the article "The black dentist workforce in the United States" by Mertz et al, there is an extraordinary underrepresentation of black dentists, and the ones in practice are shouldering a disproportionate share of dental care for minority and underserved communities. The article states that black adults are twice as likely to have unmet dental needs when compared to whites and they face many barriers to accessing dental care and that black children are nearly twice as likely to have suboptimal oral health status and have fewer routine preventive dental visits compared with white children.

Also, dentistry is one of the careers where you can instantly deliver a change to a patient's life and witness their reaction to your work in real time.

I believe that a career in dentistry is a way to serve any community that you happen to find yourself in.

Challenges and Successes Within Pipeline Programs: The African American Male

The Underrepresented

Aminatu Issaka, MS - Program Supervisor, HCOP

As the COVID-19 global pandemic continues to plague the globe, colleges and universities continue to provide academic and professional resources to their student body. A non-exhaustive list of resources offered by an academic institution could be that of academic counseling, peer tutoring, mental health services, fitness centers, private study rooms, and even meal plan discounts – just to name a few. One major overlooked resource that colleges and universities offer students is **pipeline programming**. A pipeline program is a program focused on all levels of education (elementary/middle school, high school, post-secondary school, and graduate/professional school) with the specific goal to recruit, enroll, and support underrepresented and under-resourced students through graduation with the mission of increasing diversity and representation in specific career fields.



HCOP Logo

The underrepresented and under-resourced African American male student in health professions is the focus of this paper. It is a proving fact that African American men continue to be underrepresented in health professional school and health professions i.e. medicine, dentistry, pharmacy, occupational therapy, and physical therapy¹. The Creighton University

Pipeline to Success Health Careers Opportunity Program's (HCOP) purpose is to provide students from disadvantaged backgrounds the access, education, and training necessary to become healthcare professionals with the overarching goal of increasing diversity within the healthcare workforce. Research has demonstrated that a diverse healthcare workforce consisting of culturally competent health professionals from various racial/ethnic backgrounds results in better health outcomes, delivery of quality healthcare as well as access to quality healthcare.

There are a few challenges present within pipeline programming as it relates to the African American male: low participation, clear and present academic barriers, and lack of exposure to optional programming/resources². Within the last three years, despite rigorous recruitment efforts, the Creighton University Pipeline to Success Health Careers Opportunity Program (HCOP) has consistently been faced with a low number of African American males present in each cohort pool of applicants and we began to ask the question, – why? Several reasons presented themselves – low participation in STEM (science, technology, engineering and math) and AP (advanced placement) classes/courses at home institution with minimal exposure to such classes/courses that could “spark” their interest in health professions; perceived notion that health professional careers are a “female only” space; health professional career resources/programming not presented early to students as much as other resources pertaining to other career fields; and health professional careers were perceived as “intimidating” as opposed to other non-health professional careers.



HCOP Saturday Academy

We asked ourselves – What solutions can be implemented in the future to remedy some of these barriers?

1. *Get those numbers up!* - Increased recruitment at African American male academic institutions (all academic levels) and organizations.

2. *Keeping our word!!* – Providing that academic and professional support promised i.e. free test preparation resources, writing letters of recommendation, assist in locating funding to further education; helping to improve reading/writing/study skills; providing emotional support; making the students a priority, etc.

3. *Word-of-Mouth* – Method used by the HCOP team to petition the assistance of current/previous

HCOP students to provide information about the program to African American male relatives, friends, co-workers, and classmates.

4. *“Seeing is believing!”* – Locating successful African American male health professionals and mentors to speak to current and prospective health professional students about their academic and professional journey – making the experience more accessible and attainable.
5. *That’s A Health Profession!* - Expressing the need for African American male students in health professions by sharing information surrounding many of the health professional careers that exist outside of the ‘commonly’ known health professional careers i.e. genetic counselor, radiological technologist, medical coder, clinical pharmacist, allied dental assistant, neuro-optician, etc.

There comes a time to celebrate advancements in areas that pose challenges to many pipeline programs nationwide; and what better way to acknowledge this than through the direct successes of the students themselves; mainly the African American male.

Just to name a few:

1. The Creighton University *Pipeline to Success* Health Careers Opportunity Program (HCOP) has continued to expose high school and undergraduate students to upper level math and science academic enrichment courses during the Structured Summer Session i.e. medical terminology, gross anatomy, cell biology, organic chemistry, physics, and many more like these that shed light on impactful and rewarding health professional careers.
2. Offering free college admissions test preparation resources (GRE, MCAT, PCAT, DAT) – lack of financial resources has been a reoccurring barrier among HCOP students and just knowing that we are able to cover the costs associated with test preparation is a huge weight lifted.
3. Acceptance of previous/current African American male HCOPers into health professional school (medical, dental, pharmacy, occupational therapy, and physical therapy) i.e. Creighton University School of

Medicine, Creighton University Health Administration Policy (HAP) Program, and Creighton University Physical Therapy Program

4. Graduation of previous/current African American male HCOPers from health professional school (medical, dental, pharmacy, occupational therapy, and physical therapy) – within the past year, one from Creighton University School of Dentistry and one from Creighton University Occupational Therapy Program.
5. Acceptance of previous/current African American male HCOPers into health professional residency programs (rural and non-rural areas) i.e. student getting accepted into the University of Nebraska Medical Center (UNMC) four-year family medicine residency program (covering rural areas).
6. One major success is that of previous African American male HCOPers currently in the workforce working and effecting positive change as health professionals in their communities.

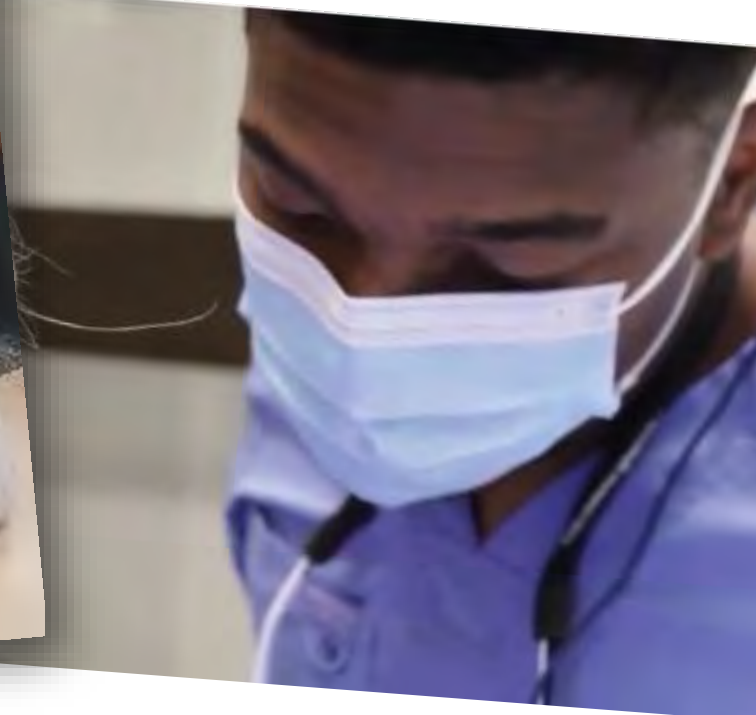
Keep in mind, with any form of pipeline programming comes its challenges and successes; however, continuing to focus on the mission will ultimately reduce the (health disparity) gap in the representation of the African American male in health professions and maybe one day eliminate the gap altogether.

¹Laurencin, Cato T, and Marsha Murray. "An American Crisis: the Lack of Black Men in Medicine." *Journal of Racial and Ethnic Health Disparities* Vol. 4,3 (2017): 317-321. doi:10.1007/s40615-017-0380-y

²Brownlee, Dana. "Why Are Black Male Doctors Still So Scarce In America?" *Forbes*, Forbes Magazine, 10 Aug. 2020, www.forbes.com/sites/danabrownlee/2020/08/11/why-are-black-male-doctors-still-so-scarce-in-america/?sh=41e490c227c2.



HCOP Participant, Mathew Adams, DDS



Matthew Adams, DDS in Lab at CUSOD

*"Success is a journey, not a destination!" – Arthur Ashe
#TeamHCOP
Find us on social media: @CreightonUniversityHCOP*

Promoting Academic Excellence of AA Male in professional school: The HCOP Model

Christina Jelinek, Academic Success Counselor, HCOP

The Pipeline to Success Health Careers Opportunity Program (HCOP) at Creighton University, like many programs, is guided by specific mission, vision, and purpose statements. Our purpose statement is “to provide students from disadvantaged backgrounds the access, education, and training necessary to become a healthcare professional with the overarching goal of increasing diversity in the healthcare workforce,” a sentiment that aligns itself closely with the goal of the HS-MACA department – to increase diversity in healthcare and to mitigate health disparities in underrepresented populations. We recognize that without a diverse healthcare workforce, we cannot adequately meet the needs of a diverse world.

As of 2015, the American Dental Association (ADA) reported that just 3.8% of the population of professionally active dentists in the United States identified as African American¹. Our nation is severely lacking in representation of African Americans in the dental field, which also means a lack of mentorship for African American males seeking a career in the field of dentistry. Only 5% of practicing physicians identified as black or African American as of 2018², according to the Association of American Medical Colleges (AAMC). With such a small number of practicing black health professionals in the nation^{1,2}, it can be difficult for students to find mentors and role models who relate to their unique experience as an underrepresented minority (URM) student, and often as a first-generation student.

At HCOP, we recognize the need to reduce health disparities by providing our participants, who are primarily URM students, with the tools they need to succeed in their journey to - and through - health professional school. One key way HCOP strives to meet student needs is through mentoring. HCOP high school and undergraduate participants are assigned mentors who are currently students in health professional schools. We believe building these mentoring relationships can be beneficial to students, especially the large number of first-generation students who join our program and who have no other family or friends who they can relate to about their experiences or offer guidance. In addition, we strive to bring our health professional students into contact with potential mentors and role models who can share their perspective and understand the students’ unique situation and provide clarity and support.

When it comes to assuring the academic excellence of our HCOP health professional students, this is achieved through grade tracking and individual academic counseling to ensure that students are given all the support and preparation needed to succeed in their journey. Students meet regularly with the Academic Success Counselor to discuss their current progress and identify any areas of growth, and in the process develop an IAP (Individualized Assessment Plan) for each student. They set goals, both academic and personal, to help ensure accountability and balance as they navigate the world of health professional school. In addition, test preparation, study skills workshops, and presentations help prepare them to enter the world as a new health professional. HCOP helps identify needs and meet students where they are.

When looking at nationwide demographics, we see the intense need for more diversity in the healthcare workforce. However, when we look at the current and past HCOP participants, it is encouraging to interact with students who are such driven, passionate individuals stepping up and answering the call of the healthcare professions. Since HCOP’s current programming began in 2018 at Creighton University, we have seen 204 diverse high school, undergraduate, and health professional students complete the Health Careers Ambassador or Structured Summer Programs, with another 71 students set to complete the program in just a few weeks. Each day the HCOP program strives to ensure their academic excellence and give these future healthcare providers the skills and support to succeed in an ever-changing world.

¹The Dentist Workforce – Key Facts (2015). [ADA.org HPI Infographic]. Retrieved from https://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIgraphic_0716_1.pdf?la=en

²Diversity in Medicine – Facts and Figures (2019). [AAMC.org Infographic]. Retrieved from <https://www.aamc.org/data-reports/workforce/interactive-data/figure-18-percentage-all-active-physicians-race/ethnicity-2018>

Providing Outreach, Research and Community Engagement Opportunities to the Applicant into Dentistry **Errik Ejike, MPH – Program Supervisor, CPHHE**

Good grades and high DAT scores are not enough to get you into dental school. It is important that you are a well- rounded applicant that participates in meaningful activities on your college campus to improve your academic standing and enhance your learning experience. Dentistry is a service-focused profession and dental school admissions officers look for students who demonstrate their promise to learn outside of the scope of traditional education in the classroom. Many dental schools include research exposure and experience as part of the admissions criteria.

The Health Sciences – Multicultural and Community Affairs Department (HS-MACA) and the Center for Promoting Health and Health Equity (CPHHE) collaborate to provide research opportunities to all health science students, including dentistry, through the Summer Research Institute. The Summer Research Institute (SRI) is held each year and provides underrepresented students in both high school and undergraduate programs an opportunity to gain valuable research experience to further their knowledge. SRI creates a pipeline of researchers that will address the gap of underrepresented minorities in research positions. There are currently 3 research programs offered in the Summer Research Institute: The *Undergraduate Summer Biomedical Research*, the *High School Health Disparities Community Research*, and *Project SEED*. Since 2010, the Summer Research Institute has included biomedical research for undergraduates, biomedical research for high school students, and community-based participatory research with community partners and organizations for high school students.

Undergraduate Summer Biomedical Research is a collaborative program between HS-MACA and CPHHE to increase underrepresented minority groups' interest in biomedical research and foster their applications to the health science professions. This program, originally funded through the National Institutes of Health and currently through LB692 Nebraska Tobacco funds to the Center for Promoting Health and Health Equity (CPHHE), has provided more than 100 disadvantaged minority students the opportunity to participate in a variety of pharmacology, biology, neuroscience, cancer biology, public health, and exercise science research. Program objectives are to advance students' understanding of the nature and applicability of scientific research methods, enhance their confidence in pursuing careers in biomedical research and other health professions, and expand their knowledge of research career opportunities. The college and high school students are assigned faculty mentors in the biomedical sciences. The mentors guide the students in research methodology and the results are presented in a colloquium at the end of the summer.

High School Health Disparities Community Research is a collaborative program with organizations in the Omaha community to promote students' awareness and understanding of how to eliminate community health disparities. The students are assigned to the organization and the mentors guide the students in understanding the organizations' missions. The students creatively develop new methodologies to address or eliminate disparities. They present results in a colloquium at summer's end.

Since 2016, we have partnered with the American Chemical Society (ACS) to host *Project SEED*. *Project SEED* allows two high school students to take part in chemistry-based lab research projects at Creighton University. High school students must have at least a year of science (preferably chemistry) and meet certain financial criteria established by the American Chemical Society. This opportunity exposes high school students to laboratory conditions and while garnering professional development and career exploration prior to entering college.

If you are a student interested in dentistry or any other health sciences, you can find more information about the Summer Research Institute and apply here: [https:// healthsciences.creighton.edu/diversity/research/summer-research-institute](https://healthsciences.creighton.edu/diversity/research/summer-research-institute).

Kenol Felix, Pre-Dental

Post-Bac Class of 2021



Why did you choose the field of dentistry?

Choosing a career is a very significant step in life. Dentistry to me is one of the most dynamic and evolving careers that continues to evolve each year. My initial experience with dentistry as a potential career path started with volunteering at local community organizations to gain real life experience. There, I experienced the full scope of dentistry which further solidify my interest and aligned with my vision to improve the lives of people. My most memorable experience at volunteering was the relationships formed between the dentist, staff, and the patients. This experience showed me that dentistry is highly dependent and there is a mutual understanding between the dentist, patient, and the administrative staff that makes the career effective. What I found that is most stimulating is the opportunity to meet and work with people from all aspects of life. I am generally a kinesthetic learner and dentistry will allow me to make use of my manual skills that I have acquired over the years.

My experience pursuing a career in dentistry.

My decision to study dentistry was reinforced by my volunteered work at local dental clinics in Northern California. Wanting to become something is only half the battle, and I have faced numerous hardships to which I have endured in pursuing a career in dentistry. I was dealt with several criticisms on choosing this career path simply due to being raised in a community that lacks the education when it comes to oral health. It is my overall vision to bring awareness and help my community realize the importance of oral health. I am excited to be a part of the HS-MACA family, which has opened many doors and allowed me to be one step closer to become a dentist.

Who is your role model/mentor in dentistry?

My role model in dentistry is Dr. Elloway, who is a general dentist in Northern California. My introduction to dentistry was first visit to a dental office at the age of 11 years old. I had an altercation with a classmate that shattered several of my teeth so Dr. Elloway proposed a root canal and a crown as he noticed how terrified I was and tried to comfort me. From that time, Dr. Elloway has invested in my education, and from the numerous volunteer hours, I had learned a great deal about ergonomics, dental and office procedures, and principles of sterilization. The longer I volunteered at his office, the more I begin to envision myself as a dentist providing for the needs of my community. Dr. Elloway is a role model that became my mentor. The nature of our relationship is based on influence, guidance, personal, and professional development.

Any advice to other male African American students in the pipeline?

My advice to other male African American students is to be assertive and be proud of all your accomplishments thus far. It is dreams that define us and make us who we are. As you advanced in your education, you will find that some dreams are difficult to overcome but know that those who conquer the impossible are the ones that make a difference in the world. Be passionate in your field of interest and build relationships with others. Never be afraid to elevate your standards because the only person that can stop you is simply YOU. So, I say this to you. *"You are where you are supposed to be. Success is yours."*



Kenol Felix, Post-Baccalaureate Pre-Dental Student, Class of 2010-2021



Matthew Adams, DDS

Post-Bac Class of 2016

Why did you choose the field of dentistry?

I chose the field of dentistry because I felt it was a way to have a direct and immediate impact on people for the better. Dentistry has the power to relieve patients from pain as well as give them their smile back. Therefore, dentistry can make patient feel better and increase their self-esteem. I also chose dentistry because I wanted to be able to change people's perception of a visit to their local dentist office and turning it into a more positive experience. I enjoy talking to people and I'm a good listener. This makes it easy for me to connect with people and to educate them about good oral hygiene.

My experience as an African dentist/ dental student? My experience pursuing a career in dentistry.

My experience pursuing a career in dentistry was challenging. With no previous family members having had any real knowledge of how to go about becoming a dentist, I had to try to find my own way through the process. I learned how competitive getting into dental school was going to be. I was met with disappointment as one rejection letter after another came. Meanwhile, I was working odd jobs to earn enough money to pay for dental applications and taking summer classes to boost my GPA. It was not until my 3rd year of trying that I found HS-MACA and through their Post-Baccalaureate Program, I was able to get into Creighton and start my dental school journey.

As an African American dental student as well as a Post-Baccalaureate alum, I felt that I had to do well to prove that I belonged there. In my dental class there were only two African American students, both from the dental program. We both understood that we were going to need each other to get through the rigors of school. We even held each other accountable about studying and getting projects done.

Throughout my dental journey, I have been fortunate to have three role models that helped shaped and mold me into the person I am today, and they continue to refine me to be a better clinician in the future. They are: Dr. Michael Clark, Dr. Gregory Davis, and Dr. Nidhi Patel. Dr. Clark was my childhood dentist and my first role model. He was the one who put the idea in my head that I could become a dentist. I worked with him in his clinic one summer when I was 16. Watching procedures such as fillings, extractions and root canals gave me an idea of what would be expected of me. When I was not watching procedures, I was autoclaving instruments, keeping materials organized, and completing day sheets. This allowed me to understand the many facets of running a dental clinic. After the summer was over, I knew that dentistry was something I wanted to do. When I started dental school, I was introduced to Dr. Davis, an African American male dentist at Creighton dental school. I got to see someone who looks like me and who was successful in the profession that I wanted to aspire to. I knew it was important for me to try to emulate his skills and techniques. I tried to learn as much as I could from him while I was there. Dr. Davis had this incredible ability to connect with patient in a way I had never seen before. He also explained to me the expectations of being an African American dentist. He explained that I would continue to have a need to prove to others that I was just as competent as any other dentist that did not look like me until I fully mastered my skills and became comfortable and confident in my own abilities. People already have an image of what a dentist should look like and unfortunately being African American does not usually fit that mold. Therefore, I needed to make sure the patient trust and feel comfortable with me as well as making sure I properly educate them about their concerns.

Dr. Patel is my current role model and my mentor doctor at the Aspen Dental Clinic in Phoenix, AZ, where I currently work. She has helped me apply my basic working knowledge from Creighton Dental School to real world experiences in real time. In addition, through her I am learning everything about the clinic from inventory and budgeting to being a leader for my staff. If I should aspire to one day own my own practice, I need to know how to run a clinic and make it profitable, not only for me but for my team that will be counting on me.



Matthew Adams, DDS in practice at Aspen Dental

Any advice to other male African American students in the pipeline?

Advice I would give to other African American students that are pursuing a career in dentistry is to keep in mind that no matter where you are in that journey, there are some definite things you can do to help get you to where you want to go. If you are in high school, get your grades up and keep them up. Get the highest GPA you can. Connect with a dentist that will allow you to shadow them and gain an understanding of what it is like during a typical day and the responsibilities of a dental clinic. As a high school senior, find the college that best fits you financially and apply for as many scholarships as you can because this will keep your student loan debt as low as possible. As a college student, take some art classes such as painting, pottery, and sculpture because in dentistry, fine motor skills, movement and attention to detail is essential to the profession. Keep the grades up as much as possible, study for your DAT in small systematic chunks of information over the course of time while preparing for dental school. To those that have graduated, and admission still eludes you, find ways to increase your GPA with summer classes or getting a master's degree. Do not quit, keep applying. Be persistent, keep grinding and pushing. The late-night study sessions will be exhausting. They were for me, but I focused on my goal to get me through it all. I know you can do it too.

COPC Programming and Health Professional School Students

Andre Tan, Program Supervisor, COPC

Currently in its seventeenth year of operation, the Community Oriented Primary Care program was established through an endowment grant of \$1,875,000 between 2004 and 2007, from the National Institutes of Health (NIH). This funding made COPC programming possible, which ranges from increasing of student involvement in public health research, solidifying activities such as Common Ground and medical student tutoring, as well as retaining students interested in health disparities research through a scholarship.

What is COPC?

Community-oriented primary care (COPC) is an integrated approach that hybridizes elements of primary care and community medicine. The COPC model involves utilizing principles in public health, epidemiology, preventive medicine, and primary care to promote a community's health and prevent disease. It drives health providers to ask the following community health questions¹:

1. What is the state of health of the community?
2. What are the factors responsible for this state of health?
3. What is being done about it by the health service system and by the community itself?
4. What more can be done, what is proposed, and what is the expected outcome?
5. What measures are needed to continue health surveillance of the community and to evaluate the effects of what is being done?

Why is COPC the right model for educating health professional students?

In the process of educating health professional school students, COPC is the right model to supplement programs at Creighton University because of its ability to address health disparities in medically underserved communities, which is part of the mission of HS-MACA.

What is the programming designed to reach health professional school students?

Health Disparity Research

Health disparity research is offered to Creighton School of Medicine students. There are two components to health disparity research offered through the COPC program. The first is COPC Summer Public Health Research, offered to first-year medical students. Each year, three students are selected to participate in the program. Each student is paired with a faculty researcher with expertise in public health to conduct eight weeks of research. At the end of the project, students are required to complete a research report and are required to present their findings at Common Ground.



CUSOD Students, Post-Bac Alum at Common Ground, 2020

The second component of health disparity research in the COPC program is the Longitudinal COPC Public Health Endowed Research course, offered to two (2) fourth-year medical students. The month-long research course is designed for students who are concluding prior research done with a faculty research mentor. During the month of the course, students finalize their data analysis, manuscript, abstract, and/or a poster presentation on their chosen health disparity topic. Completion of the course involves submission of the manuscript to a peer-reviewed journal and a presentation of findings to the course directors.

Common Ground

Common Ground Interprofessional Forum for Health Disparities and Community Programming has evolved throughout the years. Initially designed as a mentoring activity, Common Ground brings together diverse bodies of students and faculty from various professional and academic backgrounds to create opportunities to collaborate and learn about various topics in healthcare. Since the transition to its virtual format, during the COVID-19 pandemic, Common Ground has narrowed its focus to health disparities and community programming.

Medical School Tutoring

Students in the medical school have different academic help needs than the general undergraduate population, for which many tutoring services on campus are designed. Therefore, COPC funds are allocated each year to support medical school tutoring, to increase retention of medical professional students in the school. Medical school tutoring programs include the following: Training Tutors (Train-the-trainer method), One-on-one Tutoring, Supplemental Instruction, and Step 1 Prep.

In the 2019-2020 academic year, thirty-one (31) students were trained as tutors and they provided tutoring to ninety-one (91) students. Supplemental Instruction, which targets high-risk courses like Anatomy, saw four (4) student leaders impacting one hundred fifty-eight (158) students in their sessions. Step 1 Prep, on the other hand, had ten (10) students as leaders, and two hundred seventy-two (272) students attended these sessions.

Medical Student Scholarships

The COPC Scholarship is designed to increase and retain enrollment of students who participate in health-disparities research. The criteria for selecting students for the scholarship include academic standing, community involvement, and experience with health disparity research. During their fourth year in medical school, students who are awarded the COPC Scholarship are either required to complete a health disparity elective course or complete the Longitudinal COPC Public Health Endowed Research course. Since 2007, COPC has provided ninety-three (93) Creighton Medical students a total of \$304,100 in scholarship money.

There are a variety of components offered to medical students through the COPC program, which are aimed at increasing the population of students interested in health disparity research and scholarship. Consideration should be given to a similar program in the dental school, to increase the number of African American males in dentistry. Following the COPC model, recruitment strategies through scholarship and research programs as well as retention strategies like providing specialized academic support may well be the answer to attracting and retaining more African American males in the field of dentistry.

¹Abramson, Joseph H. and Kark, Sidney. 1982. Community Oriented Primary Care: Meaning and Scope. In *Community Oriented Primary Care: New Directions for Health Services Delivery*. Eileen Connor and Fitzhugh Mullan, eds. National Academies Press, Washington DC. <https://www.ncbi.nlm.nih.gov/books/NBK234632/>

Rodrigue Dikuba, D2



Rodrigue Dikuba, D2, CUSOD

Why did you choose the field of dentistry?

My interest in dentistry started after I lost my favorite uncle to complications of bacteremia, following a dental visit, which could have been handled better. He was diabetic and also had cardiovascular disease. However, his health only started declining after an unfortunate dentist visit. In a conversation with one of the physicians who was managing his illness prior to his death, my family learned that there were no records of an antibiotic administered for the purpose of preventing bacteremia. From this experience, I learned the connection between the teeth, the blood circulatory system and the heart. I also resolved to one day become a dentist, to right the wrongs which have caused some patients complications, as in the case of my uncle.

My experience as an African dentist/dental student

Being a dental student is student is challenging. In a nutshell, my life now can be summarized into long classes, figuring out online classes, uncountable after

school hours spent in labs and little or no sleep.

With the stress that comes with being a dental student, being the lone male African or African American in my class makes it much more exigent. Most of the time, I feel unseen and unheard by my peers and professors.

Who is your role model/mentor in dentistry?

I look up to Dr Pale John. He is not a dentist but an orthopedic surgeon. I am yet to meet a man who is as empathetic, compassionate, and passionate. At a tender age I was opportune to work and learn so much from him that I strive to be like him and if not better.

Any advice to other male African American students in the pipeline?

Dentistry is a dignifying and rewarding profession. The road to becoming a dentist is demanding, difficult and challenging but we can all make it. Stay focused, keep the fire in you burning and always remember the reason and why you so desire to be a dentist. Lastly, keep an open mind. Do not just focus on hardcore science classes, improve and harness your interpersonal and intercultural skills as those are the key aspects to making you an exceptional dentist in the world in which we live today.



Rodrigue Dikuba, D2, CUSOD

Ekow Solomon Acquaaah, DDS

Post- Bac Class of 2014



Ekow Solomon Acquaaah, DDS in the Community

great service for my patients and my patients have been appreciative of my work and care I provide to them.

Who is your role model/mentor in dentistry?

I have been fortunate to have multiple mentors in my career so far. My biggest role model in dentistry happens to be my father-in-law who has devote his career to providing service to underserved communities in New Jersey and around the world through mission work for over 30 years.

Any advice to other male African American students in the pipeline?

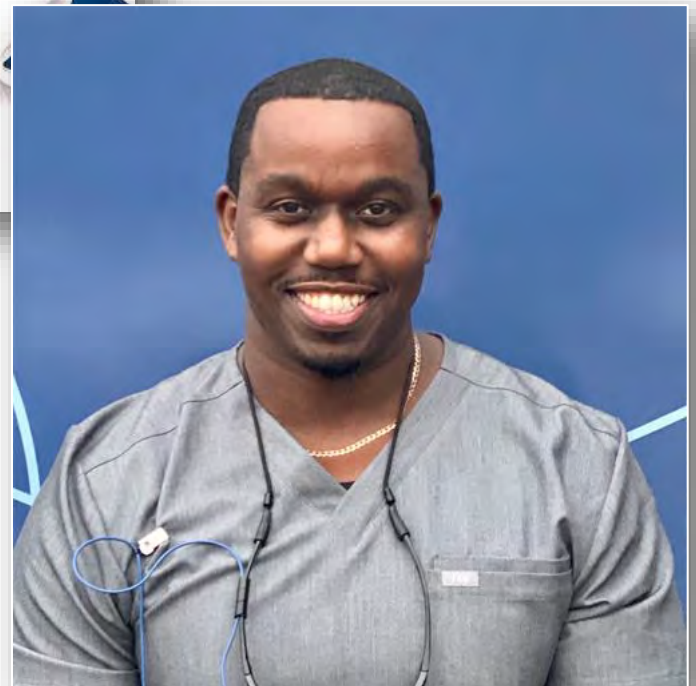
Don't be afraid to be yourself even if you may not look like the "norm". There are people in the community that are looking for a practitioner like you.

Why did you choose the field of dentistry?

I chose dentistry because it is a field that most matched my interest and personality. I can be creative and artistic while helping others to improve their oral health.

My experience as an African dentist/dental student

My experience as an African American dentist that went through Creighton's post baccalaureate program but matriculated and finished from Howard University Dental School in Washington, DC, has been encouraging and rewarding. I feel I have provided



Ekow Solomon Acquaaah, DDS, Associate Dentist @ Henry The Dentist

HS-MACA Diversity Graduates

Creighton
UNIVERSITY

School of Medicine

Alec "AJ" Scarborough, MD

Post- Bac Class of 2017



General Surgery

Josh Ulanday, MD

Post- Bac Class of 2016



Family Medicine

Ischel Kelso, MD

Post- Bac Class of 2015



Family Medicine

Yitong Ma, MD

Post- Bac Class of 2016



Internal Medicine

Kyle Uto, MD

Post- Bac Class of 2016



Family Medicine

HS-MACA Diversity Graduates

Nargisa Ergasheva, MD

Post- Bac Class of 2016



Internal Medicine

Dilasha Neupane, MD

Post- Bac Class of 2015

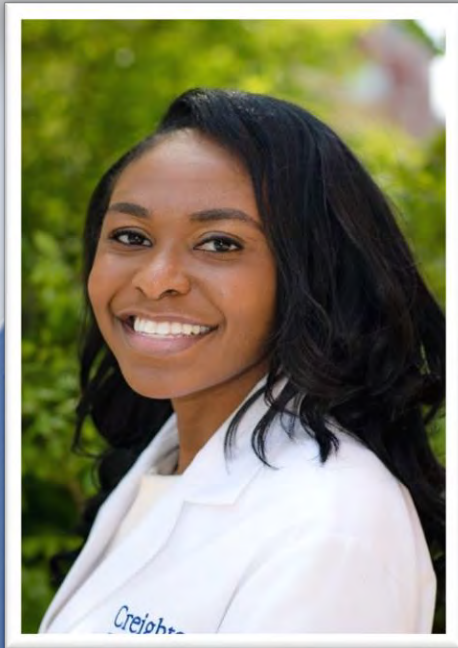


Neurology

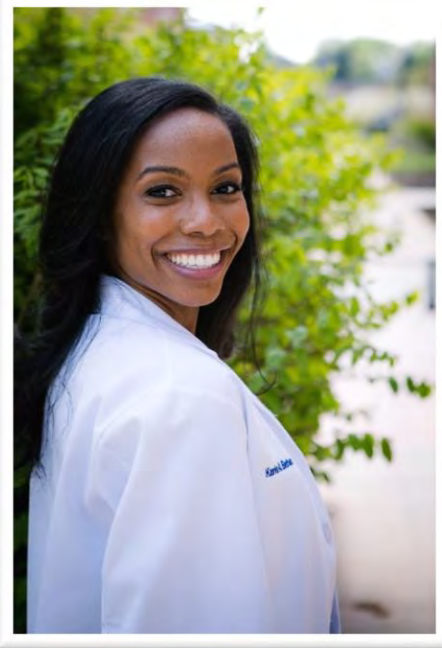
HS-MACA Diversity Graduates

Creighton
UNIVERSITY
School of Dentistry

Yemi Ajayi, DDS
Post- Bac Class of 2017



Karina Bethea, DDS
Post- Bac Class of 2017



Kyla Combs, DDS
Post- Bac Class of 2017



Abraham Robles, DDS
Post- Bac Class of 2017



2020-2021 Post-Bac Pre-Medical



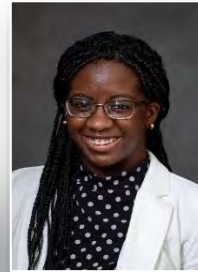
Adnan Almazloun



Michael Brown



Geraldine Desir



Amari Evans



Solomie Ghebreegzabheir



Alyxandra Ingram



Erik Steinberger

2020-2021 Post-Bac Pre-Dental



Casandra Barba



Tina Dinh



Kenol Felix



Julie Nguyen



David Moon



Brianna Wright

Scheduled HS MACA Events




HS-MACA VIRTUAL AWARDS AND RECOGNITION CEREMONY

THURSDAY, APRIL 29TH, 2021

TIME: 5:30PM -7:00PM, CST


Center for Promoting Health and Health Equity (CPHHE)




13th Annual Addressing Health Disparities Seminar

The COVID-19 Pandemic and Community Response

Saturday, April 24, 2021
8:30 a.m.—1 p.m.
Seminar to be held via Zoom.




OPENING SPEAKER
Adi Pour, PhD
Executive Director, Douglas County Health Department




KEYNOTE SPEAKER
Ali Khan, MD, MPH, MBA
*Dean, College of Public Health,
University of Nebraska Medical Center*


To register, visit:
excellence.creighton.edu/2021healthdisparities




Center for Promoting
Health and Health Equity



Health Sciences
Mid-America College of Advanced Learning
HS-MACA



Creighton
UNIVERSITY
Health Sciences
Continuing Education



Center for Promoting Health and Health Equity
COVID-19 PROJECT

HS-MACA REUNION 2021

Please save the date!

June 4-5, 2021
via Zoom Web Conferencing

GRAND VIRTUAL

REUNION 2021

Post Baccalaureate and Pre-Matriculation Program
1976 - 2021

Guest of Honor



Elena V. Rios, MD, MSPH, FACP
PB Class 1982



Creighton
UNIVERSITY

Health Sciences - Multicultural and Community Affairs

Please
RSVP
here!



HS-MACA ALUMNI ANNOUNCEMENTS

(Post-Bac Pre-Dental Alum)

Robert Robinson III, DDS and Bre'on Anderson, DDS



Married April 11, 2021

HS-MACA ALUMNI ANNOUNCEMENTS

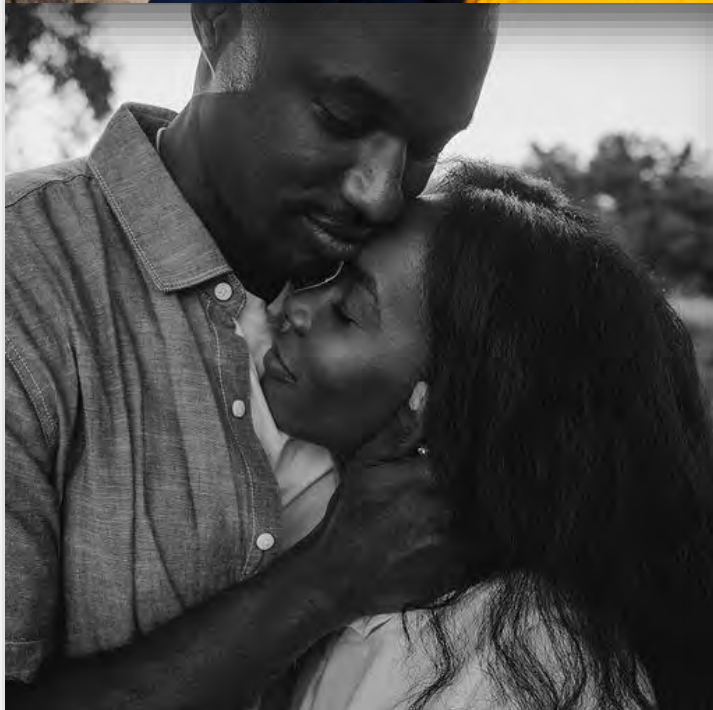
Ekow Solomon Acquaaah, DDS (Post-Bac Pre-Dental Alum) and Christina Belgrave, DDS



SAVE-the-DATE, June 20th, 2021

HS-MACA ALUMNI ANNOUNCEMENTS

Karina Bethea, DDS (Post-Bac Pre-Dental Alum) and Tyler Brown



SAVE-the-DATE, May 16th, 2021

HS-MACA ALUMNI ANNOUNCEMENTS

Alyxandra Ingram (Post-Bac Pre-Dental) and Jerome Ray



Alyxandra
and
Jerome

Please join us for our wedding celebration on

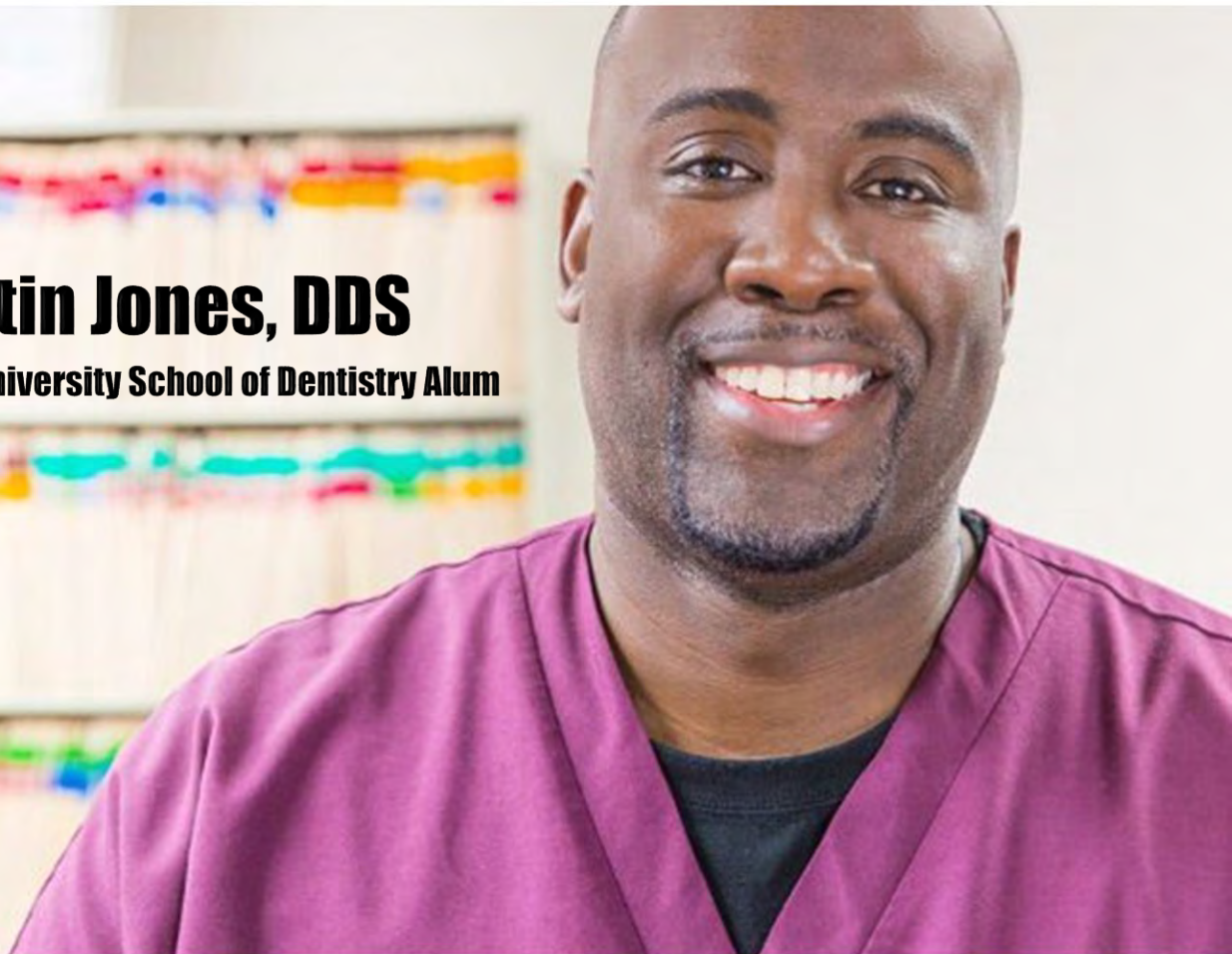
MAY 30, 2021

SAVE-the-DATE, May 30th, 2021



Justin Jones, DDS

Creighton University School of Dentistry Alum



**WORTHY DENTAL
6530 SORENSON PKWY
OMAHA, NE 68152
(402) 571-7200**

Creighton UNIVERSITY

Health Sciences - Multicultural
and Community Affairs



Editors: Dr. Kosoko-Lasaki, Mervin D. Vasser and Andre Tan

For more information about the Health Sciences Multicultural and Community Affairs visit our website:
<https://healthsciences.creighton.edu/diversity> or contact us by phone: (402) 280-2124