

Defining “Disorder” How Cultural and Self Concepts Affect Eating Pathology and Experience Abstract

Current literature surrounding the prevalence and treatments of eating disorders ED are largely centered around western notions of how they are experienced severely disregarding the cultural economic and political factors that affect eating pathologies in non western states in order to overcome this linear interpretation of EDs a greater expanse of literature focusing on the phenomenon that affect ED acquisition community responses and language surrounding the disorder as well as language surrounding treatment is crucial

First focusing on structural and institutional features of three separate communities in India Chile and Japan will provide context through which disorder can be understood Specifically research will focus on the economic conditions political changes and socio cultural presence in each community investigating the way language acts as a medium for understanding EDs within the greater communal context provides an active conversation about their interrelationships Analyzing the language through which adolescents describe their eating behaviors and pathologies will serve as insight into their unique self conceptions Trends in cultural idioms and language usage reflect broader values conceptions and experiences on the regional scale by analyzing other prominent theories for eating pathology prevalence and ethnographies targeting the lived experiences of adolescents in specific communities a more enriched understanding of EDs can be attained

Research has shown that oftentimes communities undergoing rapid or sudden change in the economic political or social sectors show greater rates of eating disorders and altered self conceptions Although the globalization and dissemination of media and research likely

Abstracts

influences these trends, understanding these findings on the basis of cultural significance on an individual and regional scale is necessary for productive shifts away from mental health standardization.

Alice Moylan

Social Support and Norms in Relation to the Sexual and Reproductive Health of Adolescent Girls in West Africa

Abstract:

Motivation: Adolescent girls in West Africa have increased risk of negative sexual and reproductive health (SRH) outcomes including HIV, STIs, and unwanted pregnancy. However, adolescent girls in West Africa still have low SRH knowledge and a high unmet need for family planning. Adolescence is a unique and emerging life stage in West Africa and there is not yet robust research and data on effective methods for improving SRH of this population. **Purpose:** The health of girls is a cornerstone of sustainable development because of its wide implications for child health, education, and economic development. The goal of this paper, via an analysis of the current literature, is to examine the institutional and sociocultural barriers to SRH education and care that adolescent girls in West Africa face and propose interventions that can effectively reduce this vulnerability to improve health.

Methods: A literature review was conducted on interdisciplinary databases including PubMed, Sociological Abstracts, and Family and Society Studies Worldwide.

Results: Common concepts that appeared were (1) the effects of increased agency on adolescent SRH knowledge and outcomes, (2) the limited success of institution-only interventions for SRH, and (3) the profound social norms and networks influencing SRH outcomes and knowledge. The results presented in this paper focus on how social ecology and social resilience theories relate to existing SRH interventions.

Conclusion: Social structures are an integral part of how adolescent girls in West Africa learn about and practice SRH. Therefore, interventions aiming to improve SRH in a sustainable manner must engage with adolescent girls' social networks in addition to standard SRH education and care within institutions such as schools and clinics.

Andrew Namkung

The Embodiment of Healing Among Indigenous People: Understanding Different Forms of Healing

Abstract:

Medicine has transitioned gradually over time from indigenous, religious, or folk medicine into bio-medicine. The meaning of healing has been changed too. How does one claim they are fully "healed"? In terms of biomedicine, to cure the individual with no pain is the definition of healing. However, patient care can be understood differently in other parts of the world. Why should other forms of treatment be ignored or shunned by western doctors?

My aim is to focus on the "indigenous" forms of healing in different parts of the world and how those forms of healing are sometimes as effective as western bio-medicine. This analysis will generally be focused around mental health and the idea of mind-body in healing.

The types of healing focused on is not only "indigenous/folk" but also religious healing as well too.

Abstracts

Preliminary results show psychotherapy was the main issue behind healing with the idea of duality. How can these individuals with such “old” ideas of healing seemed to be able to fight the diseases of mental issues which western bio-medicine with superior medicine was able to fight.

I argue that there might be circumstances in which western biomedicine will not be as effective. Some circumstances could be not enough funding or man-power to do the treatments of healing. Being a Global Health major, we should focus on the biosocial approach in order to provide treatments to other people that need it. However, there are cultural models that are in conflict. As a result, we should expand our horizons on the notion of healing to understand the many different cultural models in order to give the best possible treatment possible.

Carol Uyen Nguyen

The Persistence of Contemporary Child Prostitution in Thailand: A Long-lasting Consequence of Global Capitalism

Abstract:

Purpose: To examine the problem of child sex work and its health consequences in order to seek for policy change.

Problem: Children who are exploited in the commercial sex industry are at high risk for infectious diseases, STDs, HIV/AIDS, mental traumatization, substance abuse and violence (Lau, 2008). Child prostitution is a complex global health problem that needs to be addressed. In Thailand, child prostitution is a product of poverty and economic exploitation (Montgomery, 2001). However, these factors are no longer responsible for the contemporary child prostitution. The Thai government had imposed policies to legalize prostitution as the social developmental progress (Lau, 2008). Yet, by passing strict laws to regulate sex work, Thai society has generated unintended consequences for families and children-they still engage in prostitution because they need income, but they avoid getting medical assistance due to the fear of the law. The root cause of child prostitution is Thai society being increasingly dominated by the capitalist desire for material products generated by the growth of modern economy. **Method:** Using the literature review method and comparison studies to analyze the child prostitution in Thailand and identify the dimensions of the problem and solution with the most current up to date sources from Google Scholar and UCSD Library Databases.

Results: The political and social ramifications of Thailand's transformation to develop the international capitalism ideology has allowed the persistence of child prostitution. The Thai governmental policy change with better NGO's intervention programs focusing on the child behavior in the capitalist consensus are desired. The contemporary child prostitution diverse into many forms under the impact of capitalism, which has been overlooked by the NGOs and governments.

Conclusions: Ending child prostitution in Thailand requires a greater emphasis on a realistic and interdisciplinary perspective from global health workers, especially in a capitalist world where the morality and human values are alienated to generate the outcome commodities and financial achievements. Thus, the exaggerated and distorted campaigns to generalize and identify the cause of the child prostitution to poverty and lack of education are outdated. Other

Abstracts

factors such as gender discrimination, family structure, children's choices and their perspectives on prostitution, and sex tourism all reflecting modern capitalism should also be investigated. References:

Lau, C. "Child prostitution in Thailand". Journal of Child Health Care, 2008.

<http://dx.doi.org/10.1177/1367493508090172> (accessed January 31, 2018)

Montgomery, Heather. Modern Babylon: Prostituting Children in Thailand. Oxford: Berghahn Books, 2001

Hanvit Oh

"Health Begins with Maternal Health"

Abstract:

Problem: How the social determinants of health affect the mother's health, and how that, in turn, affects the child's physical health.

Public health heavily focuses on prevention of poor health outcomes, and one of the most effective and fundamental interventions is to educate women and mothers in communities. Society needs to support women through their journey from pregnancy and the postnatal period through the life span. There is much less awareness on the effects of mother's status on her child's physical health. The mother's marginalized status can be the cause of a cycle of poor health.

Purpose: The purpose of this paper is to understand the health disparities shaped by the various intersecting marginalized statuses of mothers: socioeconomic, racial and ethnic, and the absence or presence of family and social support (relationship status). The ultimate aim is to analyze the effects of disadvantaged and marginalized status of mothers for infant health outcomes (still birth, pre-term birth).

Method: I use a series of statistical and quantitative data to understand the above challenges for the health status of mothers in the United States and how it interacts with infant health outcome. I use this data to define the vulnerable status of mothers and the link between the infant health outcomes. I also use literature that talks about the vulnerable status of the mothers and different challenges affecting the health of mother and infants, mainly the access to health resources and support.

Results: Evidence supports a link between these statuses of mothers and subsequent poor health outcome in the infant. By assessing the different barriers to having a healthier child, the paper shows the cause of less healthy infant population, the next generation of society. The recommendation is to increase access to health resources for marginalized mothers that caters to their specific marginalized status. The aim is to decrease the disparities among the mothers to decrease the health disparities among the infants.

Ginikachi Olelewe

"Roll With The Punches:" An Analysis on the Decline of Mental Health Among Amateur and Professional Athletes in the U.S.

Abstract:

Background: Over the past several decades, sports has remained one of the largest industries in the United States. Within U.S. universities alone, there are over 480,000 NCAA athletes

Abstracts

competing across 24 different sports (NCAA 2017). In nearly all major U.S. sports, discussions of mental health amongst amateur and professional athletes have come to the forefront. Lately, multiple studies have been published that suggest how participation in contact, as well as non-contact sports, can place athletes at a high risk of developing mental health issues.

Aims: With that being said, the purpose of this paper is to examine the mental health patterns observed among U.S. amateur and professional athletes. Specifically, I will analyze the prevalence of psychological disorders in relation to the social pressure, training load, and injuries faced by these athletes. The main essence of this paper aims to tackle the question,

"How do psychological and physiological stressors correlate to the decline of an athlete's mental health in the U.S.?"

Methods: This literature review will be based on a number of research articles related to mental disorders, mental health and athletes, concussions, sports-related injuries, overtraining, college sports, professional sports, athlete burnout, sports psychiatry, and chronic traumatic encephalopathy. The search engines used were ProQuest and PubMed.

Conclusion: Based on the research provided, a connection between mental health issues and psychological and physiological stressors does exist among U.S. athletes. However, further research must be conducted in order to determine the strength of this relationship. With these findings, support for mental health interventions, such as on-campus counseling and psychological services, will continue to expand. Furthermore, as mental health awareness increases within sports, more athletes will feel encouraged to step forward and seek treatment for their troubles.

References: Estimated probability of competing in professional athletics. (2017, March 13). Retrieved February 14, 2018, from <http://www.ncaa.org/about/resources/research/estimated-probability-competing-professional-athletics>.

Lauren Olson

The sun rises for everybody: The Long Lived Struggle of Mapuche People for Mental Health Care In Inequitable Health Care Systems in Chile

Abstract:

The Mapuche population of Chile is an indigenous community in South America known for its traditional healing practices used to treat both physical and mental illnesses. Mental illnesses found within the Mapuche community include, but are not limited to, depression, anxiety, and post-traumatic stress disorder. Historical experiences in Chile may have contributed to intergenerational trauma among the Mapuche, as untreated trauma in a parent can be transmitted to children through familial bonds and personal messaging about life. Such experiences began with the arrival of the Spanish in 1541, continued with the Mapuche endurance of colonization and the resistance of Chilean state formation in the 1800's, escalated with the late twentieth-century Pinochet dictatorship, and linger on today with the current fight for state recognition as a legitimate indigenous group. The population of Mapuche in Chile constitutes around ten percent of the entire Chilean population, yet insufficient research has been performed regarding the community's health. While this may be unsurprising, due to the historical neglect of the indigenous populations in all regions across the globe; it is nevertheless unacceptable in the modern world. The mental health needs of the Mapuche must be

Abstracts

understood to establish a proper culturally competent model of healthcare. Traditional healing practices can be combined with western biomedical practices and carried out within highly-indigenous communities. To better understand this issue, extensive reviews of literature and narratives in both English and Spanish were conducted on the Mapuche peoples, the Chilean healthcare system, and the history of traumatic experiences and mistreatment of indigenous peoples in Chile. Articles cited also include insight into traditional and western biomedical healing practices with regards to mental illness. Research findings show that the mental illnesses of Mapuche are rarely discussed and largely ignored within discussions of Chilean public health. In order to resolve the issue of low access to mental health services, an intercultural health system must be established with the mutual respect and acknowledgment of the two medical systems.

Elizabeth Pairis

Why do we remain in a global water crisis?

Abstract:

Water is the most basic element of human health; it is universally accepted as one of the most important elements of life, yet 2.1 billion people are still lacking access to safe drinking water (WHO, 2017). In India alone, 163 million people lack access to safe water. Thus, accessibility to clean water remains a major global health problem that impact billions of people who consequently suffer adverse health effects such as: diarrhoeal disease, malnutrition, waterborne infections, and child mortality. While efforts, such as improved water sources have been made to eliminate this issue in rural India, the problem remains. If this issue remains unsolved, millions of Indians both presently and in the future will experience adverse health effects, which will inhibit their ability to succeed educationally and economically.

This thesis will examine both successful and unsuccessful water interventions in rural India. This examination aims to use these successes and failures to produce a recommendation for a lasting development project that would improve access to water for rural Indians by attending to relevant contextual factors. This would lessen many of the health burdens resulting from water inaccessibility. Through examining the successes and failures in India, I seek to determine which steps to take towards creating water accessibility globally, as safe drinking water is a right that everyone deserves, not a privilege.

Melissa Palafox

Protect Mothers At All Costs: How Socio-Economic and Cultural Disparities Contribute to the Growing Rates of Maternal Mortality in Rural South India

Abstract:

India currently has inequality when it comes to health care and access to resources. Comparing rural cities, urban cities have 20% more health care coverage and easy access than those from rural areas (Montgomery et al. 2014). Maternal health continues to be one major health issue that I was able to witness when visiting South India for my field experience. Specifically, one fifth of all deaths relating to maternal health and preventable maternal diseases occur in India

Abstracts

alone (Montgomery et al. 2014). In order to decrease the increasing rate of maternal mortality in India and have the current health system improve their maternal health programs, socio-economic and cultural disparities need to be addressed.

My aim is to show the increasing rate of preventable maternal mortality cases and the various factors that contribute to the disparities that hinder a woman's access to preventative care. My goal is to specifically target my research on socio-economic and cultural disparities that are present among rural India, and the inequality it creates on access to care and utilization rates. I will be comparing those findings to urban areas and other countries with similar qualities like China.

There are vital connections between inadequate maternal health and rural areas in India. Aside from proper maternal health, socio-economic disparities and a lack of knowledge were linked to high maternal mortality rates, which can trace back to the lack of access to preventative care and proper health education (Singh et al. 2014).

Recommendations for more inclusive and broad interventions will be provided.

Education is key to keep every mother in India informed about their exposure to risks and increase their utilization of preventative care. If interventions start by focusing on the community level and incorporate educational techniques that resist socio-economic disparities, women will be more informed of their health routine and be able to utilize medical resources, thus lowering the rates of preventable maternal mortality cases.

References: Montgomery, Ann L., Usha Ram, Rajesh Kumar, and Prabhat Jha.

"Maternal Mortality in India: Causes and Healthcare Service Use Based on a Nationally Representative Survey." PLoS ONE 9, no. 1 (2014), e83331.

Singh, Prashant K., and Lucky Singh. "Examining Inter-Generational Differentials In Maternal Health Care Service Utilization: Insights From The Indian Demographic And Health Survey." Journal of Biosocial Science 46, no. 03 (2013), 366-385.

Shani Park

Highly Addictive, Highly Effective; A Look Inside The Killer Opioid Epidemic

Abstract:

Problem/Background: The Prescription Opioid Epidemic has become a destructive problem sweeping the United States. "On average, 115 Americans will die each day from overdosing on opioids" (CDC). Physicians, with the assistance of pharmacists, have prescribed medications at high rates; contemporaneously, the United States experienced a dramatic increase in persons with addictions to opioids. I investigate what social, political, and economic factors caused the prescription opioid epidemic occurring in 2018.

Purpose: This study will examine how the US understands addiction as either a chronic disease, a curable disease, or a cultural problem. Treating pain with prescription drugs will be challenged. It will include why doctors prescribe medications to their patients—when they are highly addictive. Investigating the issue's root causes will help to understand the viewpoints of the stakeholders, which can fuel insight on the United States' steps to recovery.

Implications: These results are important in eradicating the opioid epidemic and will help save lives—of all socioeconomic backgrounds and ages—in our nation.

Methods: This study will be constructed using interdisciplinary literature on the statistics of the

Abstracts

opioid epidemic, addiction prevention/treatment, and the public's response to the crisis. The history of opioids will be considered in order to gain both knowledge of and perception on how prescriptions have shaped society to form a national emergency. Trends in prescription uses, death overdose rates, and what groups are most susceptible will be interpreted.

Results: After looking at the opioid epidemic from the perspectives of different stakeholders—the physicians, the pharmacists, and the patients—I will examine how each group conclude the epidemic occurred.

Centers for Disease Control and Prevention (2017, August 30). Understanding the Epidemic: Drug Overdose Deaths in the United States Continue to Increase in 2016. Retrieved from <https://www.cdc.gov/drugoverdose/epidemic/index.html>

Thi Phan

Heat Waves, Climate Change, and Health in India

Abstract:

Climate change, a pressing contemporary issue, has tremendous implications not only for the physical condition of our planet but also the human condition. It intensifies and multiplies existing threats, such as heat wave mortality and morbidity. In my study, I compare the complex ways in which climate change will interact with existing vulnerabilities to answer the question: how can the health burden of heat waves in India be decreased in the face of climate change? To begin, I examine how existing vulnerabilities contribute to heat-related health burden. Populations in India that are most vulnerable to heat waves include people dwelling in densely populated slums, people with pre-existing health conditions, children, outdoor laborers, and the elderly. Adaptive capacity is also an important characteristic that determines resulting health burdens. Then, I explore how climate change increases these health burdens by altering the magnitude, frequency, and duration of heat waves. Lastly, I propose a policy for heat wave adaptation and management that emphasizes multi-lateral cooperation, strong local leadership, and community engagement. As with most research regarding climate change's impact, respective degrees of uncertainty still exist due to aggregated uncertainty of scientific models, emission scenarios, future socioeconomic development, and policy implementation. Because the health impacts of climate change are not distributed uniformly, we must undergo the tremendous multidisciplinary endeavor of examining the health inequalities exacerbated by climate change and its symptoms to bring us one step closer to achieving the goal of health equity.

Breanna Jahaira Reyes

Living with Diabetes As a Mexican Deportee: The Difficulty Immigrants Face to Obtain Proper Healthcare and Social Support

Abstract:

Motivation: Undocumented Mexican immigrants are faced with many obstacles that impede their outcome to live a healthy life. Some of the barriers that these immigrants must overcome when they are deported are: dealing with the loss of social support, obtaining access to healthcare services, overcoming structural violence and social suffering. According to a study, "When individuals migrate, they run the risk of severing social and institutional ties in their

Abstracts

home communities, which may include loss of insurance coverage.” As a result, being able to treat chronic diseases becomes a struggle that they must endure in their journey as an immigrant.

Problem: The Mexican Diabetic diaspora lose access to healthcare and social support that was once available to them while they resided in the United States, and this affects their ability and motivation to seek help to treat their disease. This research aims to demonstrate that the programs made available to aid this population needs to be modified to better support their access to biosocial support.

Methods: I used a series of investigations on interdisciplinary literature. The literature reviews were conducted on a topics that focused on Mexican immigrant health, structural violence within the Mexican and American government, immigration policy, social suffering and systemic barriers.

Results: The findings demonstrate that there are connections between an immigrant’s biosocial support and their health outcomes. Furthermore, the research conducted also indicates how the interactions made between social systems, such as interaction with police enforcement, plays a key role in determining the patients access to reliable healthcare. Finally, it is noted that the programs made available to assist this population need to be improved.

Conclusion: This review on the lack of biosocial support for undocumented Mexican immigrants who are deported brings awareness to the need to create and improve programs that serve to protect their right to have access to health.

Reference: Wassink, J. (2018). Uninsured migrants: Health insurance coverage and access to care among Mexican return migrants. *Demographic Research*, 38, 401-428.

Omar Sajjad

Walking to the Finish Line: Polio Eradication and the Remaining Hurdles

Abstract:

The worldwide campaign to eradicate polio has enjoyed considerable success since its enactment in 1988. However, the disease is still endemic in three countries: Pakistan, Afghanistan, and Nigeria. In this thesis I analyze the socioeconomic, political, and cultural barriers to polio eradication for each endemic country. To determine which methods have worked and which can be improved, I also evaluate the current eradication efforts by global health and philanthropic organizations in these countries. After performing a comprehensive literature review, I have found that distrust in government, anti-Western sentiment, and militant threats and propaganda are the primary factors in the persistence of polio. These results not only illustrate the negative connotations that are often associated with humanitarian programs, but also highlight the alarming prevalence of general anti-vaccination attitudes around the world. Ultimately, I argue that polio eradication in Pakistan, Afghanistan, and Nigeria largely depends on the efforts of in-country institutions; the governments of these countries need to build trust, encourage community participation, and integrate polio vaccination within existing health programs.

Abstracts

Branden Salgado

The Devastating Effects of Climate Change and Displacement Among Asia and Remote Islands Abstract:

Climate change is projected to increasingly impact life on earth, altering biodiversity and affecting mankind directly and indirectly through issues such as diseases, displacement, and food insecurity. The Intergovernmental Panel on Climate Change (IPCC) identifies natural variations and anthropogenic pollution as the primary contributors to climate change. The purpose of this research is to increase understanding of how climate change occurs and how it produces natural disasters among low-to-middle income countries leading to displacement. This research examines at overlooked areas such as Asia and the remote islands – Maldives, Tuvalu, and Kiribati. My findings will help facilitate the understanding of the topic through qualitative literature review, focusing on the following areas: politics, migration, and adaptation. The study will provide intensive research that is obtained via reliable search engines and the meticulous review of the environmental refugees in Asia and the remote islands, which will lead me to discuss their living conditions, experiences, policies and practice, and ways to promote better health security. Also, these findings infer that if the efficacy of climate change and displacement is handled effectively, then conflicts will be avoided, humanitarian crises will diminish, and environmental justice will be served.

Cassidy Shapiro

Life in Limbo: A Literary Analysis of Somali Refugee Camps, Mental Health, and Refugee Policy Abstract:

Within refugee camps, humanitarian aid facilitates access to treatment for various factors of health. Although adverse health conditions such as infectious disease, malnutrition, and traumatic injury are consistently addressed, mental health services are often inadequate or overlooked. Among these populations, the prevalence of psychopathology is abnormally high due to the experience and conditions undergone as a refugee. This study considers the effects of living within a refugee camp on the mental health of Somali refugees in Ethiopian camps. While studies consider the effects of war, trauma, and other pre-flight factors to the development of psychopathology, the conditions within these camps are not main considerations. The analysis in this literature review examines studies on the prevalence and experience of mental health, conditions inside camps, and the refugee experience of agency. Among the Somali refugee population residing in Ethiopian camps, various psychopathologies including depression, anxiety and PTSD are seen to have high prevalence. These mental illnesses are aggravated by the lack of adequate services, living conditions, and cultural expectations within the camps. These results reveal that adverse mental health still develops and worsens post-flight, and that conditions within the camp play a role in the overall psychological experience of refugees. To truly lower the burden of psychopathology and enable members of this population to regain agency over their lives, mental health must be addressed and adequate services must be prioritized along with other health services. Improving current refugee policy implementation and discourse will be an essential component in achieving this.

Abstracts

Stephanie Sin

Performance over Health: Eating Disorders and Co-Morbidities among Collegiate Student Athletes

Abstract:

Background: Eating disorders are currently on the rise. Collegiate athletes are faced with struggles with academics and their sports throughout their lives, especially increasing the pressures when coming to college. Among collegiate student athletes, there are may be certain pressures, comparisons of body image to others, and other psychological reasonings which can lead an individual to develop an eating disorder. Most often, there is a likelihood of the individual or also develop other co-morbidities such as depression and anxiety. This paper seeks to state the importance and need of better education and prevention for student athletes with an eating disorder.

Method: Most of my research was based on literature using PsycINFO and PubMed, narrowing my keywords to eating disorders, collegiate athletes, and mental health.

Results: With all of the readings, there was a common theme of social and environmental pressures which can influence an individual. There has been studies which have shown that specific sports may have a more prevalence of eating disorders as it might be due to the leanness and non-leanness of the sport. Collegiate athletes are faced with parental, social, academic, environmental, and personal pressures which can ultimately lead to the development of an eating disorder along with co-morbidities such as depression and anxiety. **Conclusion:** It is vital to understand the importance of eating disorders and co- morbidities that may occur among collegiate student athletes. There are possible long term effects physically and mentally that can affect an individual. Many studies have shown that there can definitely be a higher level of education, prevention, and treatment of eating disorders among collegiate athletes.

Mona Singh

Diving into Sri Lanka to analyze the Association between Climate Patterns and Mosquito Borne Diseases

Abstract:

Problem: Dengue fever is a mosquito-borne viral disease estimated to cause about 230 million infections worldwide every year, of which 25,000 are fatal (Wilder-Smith et al., 2012). Global incidence has risen mainly in urban centers of the tropical and subtropical areas. In addition, rainfall increases the abundance of mosquitoes, which may increase susceptibility for inhabitants of urban and rural areas in the tropical region of Sri Lanka to contract mosquito borne diseases.

Aim: To research whether climate patterns, specifically precipitation and/or rainfall patterns, lead to an increase of mosquito borne diseases like dengue fever in Sri Lanka. Not much research has been shown to associate climate change/patterns and the prevalence of mosquito borne diseases in conjunction, so this paper would illustrate this and potential interventions to combat the problem and improve mortality rates and health.

Methods: Research on rainfall patterns, climate change, climate patterns, and statistics on mortality rates from dengue fever were done using academic search engines.

Abstracts

Results: *Aedes aegypti* and *Aedes albopictus* are the major mosquito vectors of dengue (Sirisena and Noordeen, 2014). In addition, there exhibits various rainfall patterns in different regions of Sri Lanka depending on seasonal rainfall and the amount of rainy days. This thesis will discuss the relationship between rainfall patterns and dengue fever. In tropical and semi tropical countries, like the tropical north region of Sri Lanka, dengue is of major public health concern.

Conclusion: There is a correlation between dengue fever outbreaks in urban, semi-urban, and rural areas, and the rainfall pattern that also increase the number of breeding habitats of *Aedes* vector. This demonstrates the importance of using interventions, like improved mosquito nets, to combat the spread of dengue fever and protect the health of Sri Lankan citizens since many populations could be at risk.

Sirisena, P., & Noordeen, F. (2014). Evolution of dengue in Sri Lanka—changes in the virus, vector, and climate. *International Journal of Infectious Diseases*, 19, 6-12. doi:10.1016/j.ijid.2013.10.012

Wilder-Smith, A., Renhorn, K., Tissera, H., Bakar, S. A., Alphey, L., Kittayapong, P., . . . Gubler, D. (2012). DengueTools: innovative tools and strategies for the surveillance and control of dengue. *Global Health Action*, 5(1), 1-9. doi:10.3402/gha.v5i0.17273

Thomas Skaggs

"The Monsters That Follow": The Long-Term Consequences of Refugee Children Exposed to Various Forms of Psychological Trauma.

Abstract:

Refugees and Asylum seekers have been displaced by war, natural disasters, and political violence in their home country making them one of the fastest growing populations concerning global health experts today. The variations of traumatic events experienced by refugees is crucial to the understanding of their long-term health and well-being. However, these variations have been neglected in the screening processes of health professionals thus not giving them the specialized care that they need to improve their condition in their receiving country. Some research has suggested that different types of trauma has lasting effects on mental health, quality of life, and poor social adaptation in the refugee's receiving country. Especially for refugee children; a population that is extremely susceptible to trauma have high rates of mental health problems later onto adulthood. With the expected rise in the refugee population, it is important to understand the variations of trauma experienced so screening methods and health policies can become more efficient in assisting to the needs of these individuals. Through library research, this thesis plans to describe the variations of trauma and how it manifests itself in the long-term wellbeing of refugee children in hopes to create more opportunities to improve the screening processes that are specific to the traumatic experienced.

Abstracts

Saraka Smith

Black Mental Wellness: Equity For Lives That Matter

Abstract:

Problem: Structural social determinants of health create direct and indirect pathways for inequities and inequalities between black and white populations who suffer from mental illness in the United States. These health disparities need to be addressed so that preventative measures can be taken to narrow the gap and ensure equal access to healthcare for black communities. This could significantly reduce the rates of mental illnesses that have adverse effects on this demographic.

Background: Structural racism greatly contributes to the on-going mental illnesses Black communities suffer from today. Only in the past two decades have these health inequities been given serious consideration, review and examination. Also, given historical racisms, this compounds the well-founded distrust in the primarily white healthcare system that the black population currently has.

Purpose/ Why it is important- Policies and institutional practices are designed that continually work to perpetuate racial inequity and inequality. Marginalized groups, specifically the black population in the United States, have insufficient access to health care or have it unequally distributed because of racial prejudices. This barrier awards their White counterparts further privilege to obtain better access in a variety of facets in healthcare, including resources, doctor availability and choice as well as insurance options. Current failures in the mental healthcare system for black populations may therefore create or further contribute to impaired mental wellness, both individually and on a community level.

Methods: I am reviewing literature from various disciplines which include psychological, sociological and medical that verifies the multiple perspectives that are offered in understanding the contributing and exacerbating factors in mental wellness and illness. Data is being drawn from extensive literature review about comparative mental illness between black and white people.

Melissa Vajanaphanich

Would you like a side of sweet and sour sauce with that? An Examination of the Growing Obesity Pandemic in Asian Nations

Abstract:

Background: As more countries in the East are transitioning from agrarian to industrial and post-industrial economies, built food environments and food consumption habits are changing rapidly. The emergence of new businesses, such as Western supermarkets and fast food chains, are colonizing local food systems, disrupting indigenous food cultures, and alienating people from traditional taste preferences, and as a result accelerating the rates of obesity in Asia. With the inevitability of the global nutrition transition, we must develop more potent policies to mitigate this alarming disease trend.

Aims: My intention is to explore the economic, the sociocultural, and the political forces driving the obesity pandemic in Asia. I will analyze the phenomenon producing the obesity pandemic, such as Burgerization and Big Food. Moreover, I will also evaluate the efficacy of current politics with the goal of redressing the disparities that exist in food policy.

Methods: My analysis of current policies is based on an interdisciplinary literature review on the topics of obesity prevalence, business development, food policy, nutrition

Abstracts

transition, and economic growth in the greater Asian region.

Conclusion: To combat the growing waistlines in Asia, a multi-level approach within the global food chain must be developed. It is imperative that regulators collaborate with producers to devise solutions that incorporate education and policy in order to equip consumers with the necessary information and resources to lead healthier lives.

Cara Valenti

Low Incidence, High Mortality: Women with Breast Cancer in Sub-Saharan Africa

Abstract:

Problem: Why are women with breast cancer in sub-Saharan Africa showing high rates of mortality?

Purpose: Women present advanced stage breast cancer in sub-Saharan Africa and data has revealed that they are experiencing lower incidence rates yet higher mortality rates compared to developed countries. The aim of this study was to examine the reasons why these high mortality rates were being experienced. It was important to focus on the factors contributing to these rates, while also considering the perspectives of the women living with breast cancer. Methods: I used online data and literature to conduct my research. When searching online, I used keywords such as 'breast cancer', 'sub-Saharan Africa,' 'women,' 'mortality,' and 'treatment.' My sources were found primarily through EBSCOhost. The remaining were found through ProQuest and PubMed.

Results: This study demonstrated that the existing health disparities profoundly impacted a woman's survival. The results suggest that the lack of resources were key factors that help explain why mortality rates were so high. Women faced financial constraints and lacked access to early detection and treatment options which reinforced this ongoing issue.

Implications: This research draws attention to a major problem that continues to occur today. The results suggest the urgent need to provide women with available resources and low-cost or free services. Implementing free programs providing breast cancer patients with access to diagnoses and care could drastically help with bringing mortality rates down.

Kirstine Walker

Understanding Antibiotic Resistance & the Consequences of Antibiotic Resistance in Primary Care

Abstract:

Problem: Antibiotic Resistance (ABR) is becoming a major health threat due to persisting overuse and misuse of antibiotics. This study addresses how increasing antibiotic resistance rates are affecting primary health care patients and their communities.

Purpose: This paper contributes to the importance of preserving antibiotics and steps communities can take to ensure our limited amount of antibiotics remain sustainable for future generations. I argue that certain factors are contributing to the over distribution of antibiotics and in turn contributing to the growing antibiotic resistance of bacteria affecting primary care patients worldwide.

Methods: A biosocial approach is necessary to address the many factors that are involved in making the over distribution of antibiotics so prevalent around the world

Abstracts

today. The components discussed in the paper include the common trend of healthcare physicians excessively dispersing antibiotics to their patients, the knowledge deficient of antibiotic consumers, the alternative uses for antibiotics, the lobbying of pharmaceutical companies, and the under regulation and lack of adherence to antibiotic laws and guidelines by doctors and communities.

Results: Coming together as a community to gain public awareness and addressing biosocial influences through policy creation and preventative measures will help to advance towards controlling increasing levels of resistance.

Interpretation: By adopting these methods and taking control of the rising levels of resistance, communities will be able to continue to treat infections of very ill patients in primary care facilities in a timely manner and with minimalized fears of antibiotic resistance.

Wayne Wefel

The Future of US Healthcare

Abstract:

"Problem: The healthcare transition under the Trump administration poses many changes to the social welfare system implemented by the PPACA. How vulnerable populations (Low SES and refugees) are particularly impacted in Texas in comparison to a liberal state, California are analyzed. Due to Medicaid being federally and state funded but controlled by the state, accessibility and cost utilization for populations that are already at a disadvantage are at an elevated risk to lose essential services and see an increase in worse health outcomes. Purpose: This analysis seeks to consider the role of welfare institutions in different state government models. Understand models of healthcare and how they are impacted based off future legislation such as the repeal of a required individual mandate, essential health services and other cost containment methods. Adaptation styles by refugees to gain care in differing states are also analyzed.

Methods: Literature review pertaining to case studies of refugee families and individuals are used to analyze the state of health access across states. Review of health outcomes pre and post PPACA are also examined.

Results: States that chose to expand Medicaid saw a major reduction in uninsured residents and overall better health outcomes. GOP passed legislation that undermines the Affordable Care Act, including the individual mandate. States that rely more on the private healthcare model lead the nation in uninsured citizens and worse health outcomes. Refugees are less likely to seek care due to cultural barriers, future policies may increase disparities.

Interpretations: Diverse backgrounds of low SES for each state examined will experience different repercussions.

Implications: A baseline model of healthcare should be implemented across state boundaries to ensure adequate basic care. New methods of insurance should be implemented amongst vulnerable populations to ensure cost effectiveness."

Abstracts

Jing Yu Weng

Food insecurity, vulnerability and susceptibility to HIV/AIDS

Abstract:

Problem: Morbidity and mortality rates related to human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) and food insecurity are unacceptably high in developing countries such as South Africa. One major cause; food insecurity that of being without reliable access to a sufficient quantity of affordable and nutritious food is associated with the risk and transmission of HIV/AIDS. Food insecurity and HIV/AIDS are intertwined in a vicious cycle that worsens the severity of each condition.

Purpose and Methods: Drawing on literature reviews and studies found in Google Scholar and PubMed, this paper will analyze the significant causes that intertwine food insecurity and HIV/AIDS. This paper seeks to explain the social and economic causes of how food insecurity leads to HIV/AIDS for individuals living in South Africa, ultimately there are interventions that must be implemented in South Africa and Africa as a whole to improve the health and wellbeing of people living in South Africa. Research methods that are present in my research paper; case study, interviews and anonymous surveys. The words used in the search engines were but not limited to; South Africa, food insecurity, HIV, AIDS, vulnerability and susceptibility. **Results:** In conclusion, food insecurity pushes individuals living in South Africa to partake in risky behavior that heightens the risk and transmission of HIV/AIDS. Whether it be social or economic factors, by partaking in risky behaviors the individuals are prioritizing their wellbeing and the wellbeing of others in order to improve their food security status. Overall by improving the food security status for individuals living in South Africa it will improve their overall physical health.

Vijit Yadav

Refugees Escaping Syria: Structural Violence and its Active Limitation of Women's Health

Abstract:

Problem: After the 2011 Syrian civil war, millions of civilians have become refugees looking for safety in countries nearby and overseas. While the Syrian refugee population as a whole has received attention worldwide, Syrian refugee women require particular attention. The systemic issue of structural violence has led to this subpopulation facing higher burdens of disease and restricted access to health care, especially within the context of refugees living in camps in neighboring countries.

Purpose: My study is important because it studies marginalization against Syrian women specifically who have not received enough attention by both news and media worldwide as well as by academic literature. In addition, I am addressing an issue that is ongoing and that continues to target Syrian refugee women today.

Methods: Research is done through case studies that are conducted within Syrian refugee camps including perspectives from female refugees themselves, as well as theoretical papers that address the problem within a structural-based context. Statistical studies also serve particular importance here as they provide a foundation to draw upon data highlighting the discrepancies in healthcare that refugee women are forced to deal with on a day-to-day basis. **Results:** Due to failed government protection within Syria

Abstracts

and in host countries including Lebanon, Jordan, and Turkey, perpetual military threats, patriarchal social hierarchies, and inadequate healthcare systems, Syrian refugee women's health is disproportionately impacted. Interpretation: These results show that Syrian refugee women's health, which includes sexual and reproductive health as well as mental health and well-being, are affected by larger factors that are out of their direct control.

Implications: My results are important because in order to holistically understand why Syrian refugee women's health is undermined, social, cultural, and economic factors all need to be addressed. In the long run, this would hopefully contribute to more studies that take this perspective into account not only for Syrian refugee women, but refugee populations worldwide facing similar barriers.

Alana Young

Growing Apples in the Big Apple: Investing in Urban Community Gardening to Mitigate Climate Change-Related Food Insecurity

Abstract:

Climate change threatens global food security, which encompasses availability, access, utilization, and stability of food sources, and is a basic pillar to health (Schmidhuber and Tubiello 2007). Taking preventative action to reinforce food security can bolster health and help populations be more resilient to extreme climate events (Tirado et al. 2013, 538). This thesis seeks to evaluate the specific health impacts of climate change on food security in the United States (US) and suggests actions that urban communities can take to mitigate these issues. Preliminary searches revealed conflicting beliefs about the net positive or negative effects of climate change on US agriculture. While several authors advocate for actions to make American agribusiness resilient to climate change, I suggest that this exploitative system is a part of the problem itself and offer urban community gardens as a legitimate alternative food system that can mitigate both climate change and food insecurity. Climate change is a global problem that affects populations at community levels, thus it is important to find scalable community-based solutions, so individuals can take active roles in defending their human right to food security in a rapidly change climate. Local projects can and should be scaled up to address these global issues. Based on the past success of World War II US Victory Gardens, it is feasible to support large populations with community led agriculture (Okvat and Zatura 2011, 384). Through urban community gardening, people can take an agentive role in combatting climate and food security issues that affect them personally but are often perceived as overwhelming on a global scale. References: Okvat, H. A., and A. J. Zautra. 2011. "Community gardening: a parsimonious path to individual, community, and environmental resilience." *Am J Community Psychol* 47 (3-4):374-87. doi: 10.1007/s10464-010-9404-z.

Schmidhuber, Josef, and Francesco N. Tubiello. 2007. "Global food security under climate change." *Proceedings of the National Academy of Sciences* 104 (50):19703-19708. doi: 10.1073/pnas.0701976104.

Tirado, M. C., P. Crahay, L. Mahy, C. Zanev, M. Neira, S. Msangi, R. Brown, C. Scaramella, D. Costa Coitinho, and A. Müller. 2013. "Climate change and nutrition: creating a climate for nutrition security." *Food Nutr Bull* 34 (4):533-47. doi: 10.1177/156482651303400415.

Abstracts

Lena Zinner

Not By Biology Alone: An Analysis of Social Determinants of Health Amidst the Syrian War

Abstract:

Question: How does the war environment of Syria impact trajectories of mental and physical health among individuals?

The diagnoses, experience, and treatment of a specific illness relies not only on its biomedical properties, but is also heavily impacted by surrounding environmental factors. Treatment of mental and physical injury needs to be equitable-- or in other words understood, diagnosed, and treated within the context of the obstacles that patient faces. Due to Syria's current war, there is a serious health burden on the rise. Despite this, the number of physicians in Syria right now is increasingly low¹, meaning victims are often treated outside of the nation, by doctors who know significantly less about the environment. Much of this health burden is compounded and worsened by structural violence, or the idea that social structures can harm an individual by preventing basic needs.² This paper analyzes three forms of structural violence perpetrated by the war— crumbling infrastructure, bacterial resistance caused by remnants of weapons, and immense and consistent violence, and their subsequent effects on health. Literature reviews were conducted using search engines such as Pubmed, Sociological Abstracts, and Google Scholar. Search terms included war trauma, conflict, Syria, epigenetics, bacterial resistance, mental health and equity. Based on these reviews, it is evident that environmental factors prompted by the war have a significant negative impact on the health trajectories of individuals living there. The structural violence perpetuated by the war has complicated treatment of even simple afflictions meaning an analysis of the environment within treatment settings is critical. When taking a universal biomedical view of illness, crucial details pertaining to treatment may be overlooked. The current hostile climate of Syria provides an example of why health equity is a crucial perspective to take in any discipline within the health sciences, because of the immense role of the environment in shaping health outcomes both in the short and long term.

Works Cited

Stone-Brown, Keir, and Richard Hurley. "On the Brink of Collapse." *BMJ: British Medical Journal* 347, no. 7937 (2013): 18-19. <http://www.jstor.org/stable/43513370>.
Farmer, Paul. "An Anthropology of Structural Violence." *Current Anthropology* 45, no. 3 (2004): 305-25. doi:10.1086/382250.