

2023 Baltimore Health Equity Impact Grants Awards – Funded Partnerships

Graduate Student – Community Research Grants

- **Research Grants**
 - Assessing the Relationship Between a Community Safety Program and Beliefs Toward Substance use Disorder Treatment
 - Linkage from Jail to Treatment for Opioid Use Disorder at PCARE: A Mixed Methods Evaluation
- **Program Development Grants**
 - Community-engaged Approach to Increasing Electrification and Health Equity in East Baltimore
 - Eat 2 Thrive Sandtown-Winchester
 - Refugee Health Partnership with Asylee Women’s Enterprise

Undergraduate – Community Research Grants

- **Research Project**
 - Together for Youth: Barriers, Facilitators, and Opportunities to Support Delivery of Comprehensive Sex Education in Baltimore City

Faculty – Community Research Grants

- **Research Project**
 - Visions and Voices: A Docu-Series of Black Youth Storytelling Through the Nobody Asked Me Campaign
- **Program Development Project**
 - Trauma-Informed Care Program – Esperanza Center, HEAL Collaborative, and Johns Hopkins Partnership

Graduate Student – Community Grants

Research Grants

Assessing the Relationship Between a Community Safety Program and Beliefs Toward Substance use Disorder Treatment

Graduate Student: Justin Rose, PhD Student, Johns Hopkins Bloomberg School of Public Health

Community Partner: Daisy Heartberg, Director of Public Safety Programs, Greater Baybrook Alliance

Public stigma represents a significant barrier to accessing treatment for people with substance use disorder and substance use-related needs (e.g., harm reduction). Stigmatizing attitudes toward people with SUD and SUD treatment are driven by criminal stereotypes and a lack of knowledge about effective treatments. Public stigma may be formed in contexts where perceived threats to community safety occur alongside perceptions of drug use and informal drug market activity, particularly in socioeconomically disadvantaged neighborhoods. This research proposal seeks to elucidate neighborhood-level factors that may contribute to public stigma and the underutilization of services for people with substance-use related needs in Brooklyn/Curtis Bay, a geographically isolated part of south Baltimore that faces major health disparities. The proposal focuses on the role and attitudes of residents, called Ambassadors, who are recruited and trained to identify, report, and follow-up on safety and quality-of-life issues in their neighborhoods. The research seeks to (1) identify the barriers and facilitators that Ambassadors in Brooklyn/Curtis Bay perceive to be most important for resolving neighborhood safety concerns, and (2) assess whether and how Ambassadors' increased capacity to identify and report safety concerns in Brooklyn/Curtis Bay influences the Ambassadors' beliefs about residents with SUD and SUD treatment providers.

Linkage from Jail to Treatment for Opioid Use Disorder at PCARE: A Mixed Methods Evaluation

Graduate Student: Ashley Truong, PhD Student, Johns Hopkins Bloomberg School of Public Health

Community Partner: Deborah Agus, Behavioral Health Leadership Institute

The United States is experiencing an overdose crisis driven primarily by fentanyl and its analogs. Individuals involved in the criminal legal system (CLS) have an elevated risk of opioid overdose and death but face barriers accessing and engaging in treatment for opioid use disorder (OUD), including buprenorphine. Behavioral Health Leadership Institute (BHLI) aims to provide high-quality buprenorphine treatment to individuals with OUD who are CLS-involved. Through a van parked outside the Baltimore City Booking and Intake Center (BCBIC), BHLI operates a low-threshold buprenorphine program called Project Connections at Re-Entry (PCARE). To expand efforts, BHLI partnered with BCBIC to establish a jail-based initiative that provides education about OUD, harm reduction, and treatment to individuals who are incarcerated and facilitates post-release linkage to PCARE for those interested. The proposed mixed methods study seeks to evaluate this new jail-based initiative, examining its strengths, limitations, and impact on treatment referrals received from BCBIC. This evaluation will inform program improvement efforts and identify best practices for replication in similar settings. Findings will be shared with participants and other key stakeholders, including BCBIC and a network of community-based organizations and correctional facilities seeking to improve treatment for OUD in carceral settings.

Program Development Grants

Community-engaged Approach to Increasing Electrification and Health Equity in East Baltimore

Graduate Student: Katie Nelson, PhD Student, Johns Hopkins School of Nursing

Community Partner: Melanie Santiago-Mosier, Vice President, Climate, Energy & Equity | Green & Healthy Homes Initiative

Individuals in low-income areas spend a higher proportion of their earnings (10-20%) on energy costs than those in non-low-income areas (3.1%), nationally, statewide, and locally in Baltimore City. The best way to reduce this disproportionate energy burden is through electrification—replacing home appliances that use fossil fuels. Increasing participation in this process requires targeted investment and education, which must center relationship-building to mitigate distrust and promote health equity. Therefore, this community development project aims to establish a Community Advisory Council, ENER-G-E: Engaging Neighborhoods Effectively in Replacing Gas Equipment, to partner with Green & Healthy Homes Initiative staff and increase electrification efforts in five East Baltimore neighborhoods.

Eat 2 Thrive Sandtown-Winchester

Graduate Student: Monique Parker, MEH Program, Johns Hopkins School of Nursing

Community Partner: Jayson Green, New Song Community Learning Center

Eat 2 Thrive Sandtown-Winchester is a program designed to encourage families to swap out junk food for healthier choices. We will show families how to use “unfamiliar” vegetables and other items they receive in the weekly food boxes they pick-up from the New Song Community Learning Center. The program also teaches families how to maximize their food stamp subsidies to make healthy and nutritious meals on a budget.

Refugee Health Partnership with Asylee Women's Enterprise

Graduate Student: Marcelina Kubica and Katie Welgan, MD Student, Johns Hopkins School of Medicine

Community Partner: Laura Brown, Asylee Women Enterprise

Resettled forced migrants face a high burden of mental health conditions, infectious diseases, and untreated chronic conditions, and often encounter barriers to accessing high-quality medical care (1). Although 29% of refugees in Maryland reside in the Baltimore area, medical students at JHUSOM receive limited training in attending to the needs of this community (2). The Refugee Health Partnership (RHP), a student group at JHUSOM, has partnered with Asylee Women Enterprise (AWE) to establish a refugee health advocacy program. Through this partnership, we address disparities in refugee health in Baltimore by supporting forced migrants' health needs and equipping students with skills required to provide high-quality care to this patient population. A pilot of this program, involving 3 clients and 15 students, will run until December 2022, after which we will gather feedback from students and AWE staff. Beginning in January 2023, we plan to expand the program to serve 10 clients. At the conclusion of this expanded intervention, we will conduct an impact evaluation to understand 1) the impact of the program on refugee clients' ability to independently navigate the U.S. healthcare system and 2) the impact of the program on students' knowledge and attitudes towards refugee health.

Undergraduate Student – Community Grants

Research Grants

Together for Youth: Barriers, Facilitators, and Opportunities to Support Delivery of Comprehensive Sex Education in Baltimore City

Undergraduate Student: Maclaine Barre-Quick, Student, Johns Hopkins Krieger School of Arts & Sciences

Community Partner: Karen Hodges, Baltimore City College

Baltimore City has some of the highest rates of Sexually Transmitted Infections (STIs) in the country, and that burden is especially carried by youth ages 13-24. Baltimore City teen (15-19 years old) pregnancy rates are double that of the Maryland average teen pregnancy rates. Youth in Baltimore City face numerous barriers to sexual and reproductive health (SRH) care and education, which for many, results in lifelong trauma and adverse health outcomes. Comprehensive sexual education is vital to young people, not only to prevent unsafe sexual practices, but to promote understanding of bodily autonomy and healthy relationships.

This project seeks to unify multiple stakeholders within Baltimore City who all seek to improve adolescent sexual health outcomes through a variety of programming. The first part of the project will gain key insights from educators themselves, on what they believe is and is not working within their schools, among their colleagues, and in learning from their students, when it comes to delivering comprehensive sex education. The second part of the project seeks to develop a manual and comprehensive sexual health education toolkit to make educators feel more supported and well-equipped to deliver quality education to the youth we all hope to better empower.

Faculty – Community Research Grants

Research Grants

Visions and Voices: A Docu-Series of Black Youth Storytelling Through the Nobody Asked Me Campaign

Faculty Partner: Richard Lofton, Assistant Professor, Johns Hopkins School of Education

Community Partner: Charneice Fox, Partner/Executive Producer, The PKWY Agency

For over 110 years, Black Baltimoreans have confronted a persistent state of quarantine that intensified with the COVID-19 pandemic. In 1910, Baltimore City Mayor J. Berry Mahool declared that Blacks should be "quarantined in isolated slums...to reduce the incidence of civil disturbance, to prevent the spread of communicable disease into nearby white neighborhoods, and to protect property values among the white majority" (Rothstein, 2015). This rhetoric has since manifested into Baltimore's present-day Black Butterfly, which Larry Brown (2020) specifies is not just a segregated spatial location; rather, it reflects the systemic devaluation and divestment of resources and capital from Black communities. As a result, Nobody Asked Me will partner with a Baltimore Based local production company to work with youth to help them develop skills through a docuseries to explore the issues they are confronted with and their ways of addressing to seek transformation and healing. The Nobody Asked Me Campaign aims to address unasked questions by researchers and policy makers to gain answers from students and their parents regarding the challenges they face in their everyday journeys. Our goal with this grant submission is to collaborate with a select group of students to create a series of documentary shorts to produce a story that allows them to be social-change agents in their communities.

Program Development Grants

Trauma-Informed Care Program – Esperanza Center, HEAL Collaborative, and Johns Hopkins Partnership

Faculty Partner: Katie O'Connor, Research Associate, Johns Hopkins School of Medicine

Community Partner: Amy Collier, Division Director, Community Services Catholic Charities of Baltimore

Trauma is pervasive and profoundly affects the health outcomes of the individuals affected as well as their families, peers, and surrounding communities. Esperanza Center and its affiliate, HEAL Refugee and Asylum Health Collaborative, are healthcare organizations that serve Baltimoreans and new arrivals with significant histories of physical and psychological trauma who are at high risk of adverse consequences of these traumas and retraumatization during healthcare and other service encounters. These individuals are also at high risk of healthcare inequity due to language barriers; financial barriers; legal barriers; structural, implicit, and explicit bias; and challenges in navigating a new environment. Our collaborative team from Esperanza Center, HEAL Collaborative, and Johns Hopkins University is proposing a learner-centered trauma training program to benefit the clinicians, interpreters, and staff who work for Esperanza and HEAL, as well as to benefit the patients and clients of these organizations. By providing training on vicarious trauma and trauma-informed care, our project will strengthen the quality of healthcare communications, minimize retraumatization, mitigate service provider burnout and trauma, and overall improve the health and wellness of the growing population of immigrants and trauma survivors in Baltimore as well as the Baltimore-based individuals who care for them.
