



PARKINSON
SCHOOL of HEALTH SCIENCES
AND PUBLIC HEALTH

Bachelor of Science in Public Health Fall 2020 Newsletter

Public Health Faculty Spotlight by Maria Price

Welcome Dr. Sparkle Springfield!



A week before the start of the academic year, third year student Maria Price had the opportunity to interview Dr. Sparkle Springfield. They discussed her educational trajectory and Dr. Sparkle's thoughts on her most transformative teaching moment, as well as her insights on COVID-19's potential to encourage unity and collective activism throughout the U.S.

When you were an undergraduate, what event or circumstance set you on the path to pursue a double major in biology and chemistry?

Actually, my high school experience led me to pursue a double major in biology and chemistry in college. As an International Baccalaureate (IB) scholar, I had to pick one science subject to focus on for IB testing. I chose biology because it seemed the most colorful and fun to learn about at the time. However, during the summer before my senior year, I took an introductory chemistry class at a community college with a great professor! He pointed out examples of chemistry in daily life (i.e., make-up, weather, food digestion, etc.) and how it was central to other sciences (including nutrition). That course encouraged my double major as well as my interdisciplinary approach to problem-solving moving forward.

What encouraged you to pursue a Ph.D. in integrative pathophysiology, human nutrition and health promotion?

I became interested in pursuing a career in academia after completing various summer research undergraduate fellowships, as a MARC U-STAR (Maximizing Access to Research Careers - Undergraduate Student Training for Academic Research) scholar. These fellowships included the Summer Research Opportunities Program (SROP) at the University of Illinois at Chicago, where I collaborated with staff at Project Brotherhood – a culturally consistent and gender-specific clinic within the Cook County Bureau of Health Services – on a project examining the perceived benefits of Qi Gong in African American men. Working in collaboration with my SROP mentor (who would later serve as my doctoral mentor), Dr. Angela Odoms-Young, I learned the importance of engaging community partners in all aspects of research and how community leadership in research can improve the relevance and usability of study findings.

When you began your Ph.D. work what idea, notion, or subject matter was most compelling to you? Why?

Early in the nutrition doctoral program, I learned more about diet-related diseases, in particular obesity, which heavily impacts African American women. This led to my focus on African American women as an entry point to positively impact the entire African American family and community. Subsequently, I participated in several studies targeting

subpopulations of African American women, including healthy adults, adolescents, and breast cancer survivors. While writing my first first-authored publication, I saw the need for effective culturally tailored interventions for this high-risk population.

In the last five years, how have you seen the field(s) of health promotion, human nutrition, and or integrative pathophysiology advance? What do you think is most significant about this?

I have observed an increased focus on interdisciplinary and translational approaches to health science (i.e., bench-to-beside, cells to society) and recognition of the importance of social determinants of health.

Perhaps most significant, the recent highlighting of historical, structural, and direct violence committed against African Americans has led to racism being correctly acknowledged as a driver of inequities within health determinants. I think this has advanced the field(s) of health promotion, human nutrition, integrative pathophysiology (etc.), by encouraging more emphasis on multilevel and interdisciplinary health interventions that consider racism and health. As an African American woman, nutritionist, and health equity researcher, I have always considered these dynamics. I am glad to see the appreciation for aspects of my work and that of my mentors and colleagues.

What is an obscure aspect of the work and research you have done that you feel should be more widely understood and discussed?

The need for public health researchers and professionals to engage in activism. Bearing in mind the critical importance of historical, political, and social factors to health behaviors and health promotion, improving health outcomes in populations who have experienced historical and contemporary injustices requires social justice advocacy. I believe public health researchers and professionals should receive training focused on the root causes of health inequities, social justice advocacy, and anti-oppressive practices that consider the lived experiences of the populations they intend to serve.

Throughout your life who have you considered to be your most impactful mentor? In one sentence, what is the most meaningful thing you have learned from them?

The person in my life who has led and mentored me most meaningfully is my Mother. She has always said to me "Treat people how you want to be treated". This life mantra continues to help me successfully navigate various situations and remain light-hearted.

What has been your most valuable teaching moment? How has it influenced the way you have taught since then?

My most valuable teaching moment was during this last spring while teaching a social determinants of health and health equity course at the Stanford School of Medicine. The events of spring 2020, the start of the COVID-19 Pandemic followed by the George Floyd protests, provided an opportunity that I have never experienced, until that point in my teaching career, to help my students make sense of current events through the concepts discussed in class. It is one thing to be teaching concepts in the context of past events or case studies, and it is another thing to teach about these same concepts and relate them to such current and historically defining events and circumstances. The moments will never be duplicated, and I will never forget how moving it was to witness the students' minds expand (as well as my own) in such a way because of the circumstances that surrounded that semester's course. I plan to continue to employ culturally responsive teaching methods. Shout out to Stanford's CHPR 232 Spring 2020 and my future students at LUC!

What about Loyola's values, mission, program, etc. was most encouraging as you pursued a position on the faculty of the Public Health Program in the Parkinson School? How are you hoping to impact the BSPH and MPH programs?

The Jesuit values, mission, and guiding principles of promoting social justice initiatives compliment my personal and professional values. Whenever there is social unrest it indicates that a segment of the population is not being heard. I plan to serve that population through my research, teaching, and service. I bring a health equity lens and my lived experience to the program. I hope that it resonates with the student population and cultivates their personal vision of constructive service and societal change.

What is the one book you believe every university student should read before graduating?

Emergent Strategy: Shaping Change, Changing Worlds by Adrienne Maree Brown.

What do you think is a unique aspect of Chicago or its culture?

I think Chicago uniquely displays the good, the bad, and the ugly of our society. The city demonstrates the ways in which structural violence leads to direct violence and unequal distribution of power and resources. Likewise, Chicago has a rich

history of activism and resistance. Despite deep social wounds, the way everyone comes out to play during the summer (people, animals, plants), is one of the most beautiful and inspiring things I have ever seen, in addition to the one-of-a-kind skyline architecture.

How does your knowledge of health equity and nutrition inform your habits or daily routine?

I eat something green every day. I shop for food at least four times per week. Whenever possible I patronize farmers' markets/local and Black-Owned businesses. I prioritize the (formal and informal) mentorship of African American students as well as those who are interested in health equity.

What was the last book you read for leisure?

Becoming by Michelle Obama.

What is your ideal breakfast? Why?

I love smoothies; they are the best way to make sure I get at least five servings of vegetables and fruit a day. My go-to morning smoothie recipe: spinach, banana, mango, water, ginger, and lime juice. That ginger will wake you right up! You're welcome!

If you need a laugh, where do you go/ what do you do?

I call my grandmother (79 years old) and great grandmother (105 years old). They are both filled with energy, wisdom, and humor. My grandmother always tells me about her day and everything I missed on the news. It is still fun to hear her description and rendition of the day's events because we always share a laugh. I believe my grandmothers are living proof that having a good sense of humor can lead to greater resilience, as they find laughter in everyday life.

What positive or optimistic phenomena have you observed about yourself, or your community, in the time since that start of the COVID-19 pandemic? How does this give you hope as you consider the future?

Increased awareness. People have been more self-aware and more aware of their surroundings. Coupled with this, people have displayed more empathy and respect toward the cultural differences between one another. As I see it, this has allowed us to keep one another more accountable for our choices, actions, and inactions. Ultimately, the display of unity I have observed nationally and internationally has been encouraging, particularly around the Black Lives Matter movement. Widespread support of BLM and other social justice initiatives gives me hope that we will take meaningful steps toward achieving health equity during my lifetime.

Maria Price is a junior BSPH major and BSPH Newsletter contributor.

BSPH Program Director's Notes by Julie Darnell, PhD, MHSA

Our BSPH Program is celebrating its first anniversary. Anniversaries provide an occasion for reflection on what has come before and anticipation of what lies ahead. I'll reflect first on our growth. A year ago we started with 15 students; today we have 65 BSPH majors. Our four-fold growth in just a year has vastly exceeded our expectations. Now, although we must acknowledge that the COVID-19 situation raised the visibility of public health and drew students into this major, our strong out-of-the-gate growth also reflects our current majors, who have clearly served as highly effective ambassadors for the BSPH within the University.

BSPH Program Enrollment		
	Fall 2019	Fall 2020
Freshman	6	25
Sophomore	6	18
Junior	3	19
Senior	0	3
TOTAL	15	65

As a professional degree program, our mission is to prepare students for careers in public health—but also in related fields. We know, for instance, that while many of our students are thinking in terms of a “traditional” public health job (for example, epidemiologist) for their career, many others wish to build a “hybrid” career combining public health with one of the health professions.

We've tried to build a BSPH program that ensures that both of these paths are open to our graduates. They'll leave the program with practical and highly marketable skills that they can apply toward a variety of issues in myriad settings to

understand problems and make decisions. Our program is solidly grounded in science and math. That means our graduates emerge with a skillset that includes:

- analyzing and interpreting health data using R and SAS, two pervasive computer programming languages
- visualizing geographic data using ArcGIS, a state-of-the-art mapping software program
- planning, executing and overseeing projects using the concepts of Lean Six Sigma
- crafting a well-reasoned argument based on asking the “right” questions

(...just to name a few!)

We continually strive to strengthen our BSPH toolbox. This year we've integrated Tableau, a data visualization software program, and Digication, Loyola's preferred e-portfolio platform, into our curriculum. Tableau extends our students' capabilities in data visualization beyond geographic data. A very different kind of tool, Digication allows students to showcase their interests, experiences, knowledge, and skills in an electronic format accessible to prospective employers and graduate-school admissions officers, but it is in-and-of-itself a learning tool because it fosters reflection, synthesis and integration.

Believing that authentic, real-life experiences help prepare students for future careers, we have embraced engaged learning—learning outside of the classroom—as a key feature in our curriculum. Engaged learning is not a novel learning method as all students at Loyola are required to complete one engaged learning course, but our emphasis on engaged learning sets us apart. Our BSPH curriculum now has three courses that satisfy the engaged learning requirement. I am pleased to announce that PUBH 399, Capstone, was approved recently by the Center on Engaged Learning as a course satisfying the undergraduate research category. As the culmination course, PUBH 399 gives students the opportunity to integrate, synthesize, and apply the knowledge and skills they have acquired throughout the BSPH program. We use Digication to capture, organize and curate samples of students' work. The Digication tool also helps students elicit meaning from their learning experiences, make connections across ideas and experiences, and become more aware of their development as emerging public health professionals who are prepared to promote social justice in their communities.

We bolster career readiness through our co-curricular activities as well, particularly our Parkinson Professional Development Workshop series, which we launched last year with three career events. We've doubled our offerings this year. The 2020-2021 slate includes professional development sessions devoted to topics ranging from networking to applying to graduate-level schools to professional ethics. This newsletter lists all the past and upcoming events (which are all recorded and archived).

Perhaps the most challenging—and most important—change we're making in the BSPH program is to take up racism and racial justice more intentionally and more concretely. In their call to action last spring, our BSPH students rightly held us accountable to make meaningful improvements in this arena. Toward that end, our BSPH program is supporting university-wide activities, including the establishment of the Loyola Anti-Racism Initiative, development of a new institute devoted to promoting racial justice, efforts to increase faculty diversity and improve the culture for faculty of color, mandatory anti-bias training in hiring, a series on anti-racist pedagogy, and *White Fragility* book club discussions.

But the BSPH program is also charting its own path. In this regard, we have adopted learning objectives related specifically to racism in our PUBH courses and have created graded assignments on the topic of racism. Together with the MPH program, we are also developing an anti-racism lecture series that will commence this fall. We view our initial efforts as a work-in-progress and invite our BSPH community to help us continue to do better.

Thanks to all of you, Loyola's BSPH program has now taken its first steps. In doing so, like any toddler, it propels itself forward, at times a bit unsteadily, but always with firm resolve. We are resolved to deliver a high quality and enriching educational experience. Please let us know how we're doing, and how we can do better. We have created an anonymous virtual Suggestion Box where we can collect your feedback, [BSPH Suggestion Box](#). We want to hear from you!

Protecting the Greater Loyola Community by *Christina Paskon*

As freshmen packed their bags and eagerly purchased their dorm essentials, many were met with a wave of disappointment receiving an email just weeks before their scheduled move-in stating that no resident was going to be living on Loyola's campus this upcoming semester. As disheartening as this news was for both these new college students and their families, now realizing their at-home stay would be extended another few months, this difficult decision made by the University is not only one in the interest of their students and staff, but one that protects the greater Loyola community and home within Chicago.

Since March, nearly every person on this planet has been affected by Coronavirus in one way or another. Unfortunately, the United States has been one of the hardest hit as we just surpassed over five million cases, and Chicago alone has had over 100,000 confirmed positive results. Even if most people's lives have been impacted physically, emotionally, economically, academically, or socially, some groups have been devastated disproportionately in comparison to others.

Minority populations already experiencing many systematic disadvantages in a normal day-to-day setting have been most greatly impacted since the beginning of this pandemic further suppressing their strides towards equality. African American populations have been arguably the most inordinately impaired as they account for an estimated 34% of positive COVID-19 victims despite only comprising around 13% of the United States population. Alongside higher incidence rates, they are also 2.5 times more likely to die from the virus in comparison to their white counterparts according to Dr. Anthony Fauci, the nation's top infectious disease doctor.

Even if the virus doesn't genetically discriminate by race, there are a few theorized factors as to why minorities are being hit the hardest, especially African Americans in major cities such as New York, Detroit, and here in Chicago. Without stereotyping demographics, African American populations in crowded urban areas often hold essential jobs due to pre-established social hierarchies and inauspicious economic disparities. As financially rewarding as it was for these individuals to keep their jobs and continue earning money to support their families, it also put these workers and their loved ones at a much higher risk of infection as their contact with people of unknown exposures was increased. Alongside unfavorable working conditions, African Americans have disproportionately higher rates of underlying conditions due to long term social determinants of health. Diseases such as Diabetes, Heart Disease, Obesity, and Hypertension not only leave individuals more susceptible to contracting Coronavirus, but also puts them at higher risk of more detrimental or fatal outcomes. Both of these input factors have been thought to blame for the medical inequality seen in the face of this pandemic.

Now what does all of this have to do with Loyola students not returning to campus? Well in short, by not having scholars on campus, there are simply less people potentially spreading this virus around our increasingly vulnerable city. Many Universities are committed to returning to a new "normal" with single occupancy dorms and frequent COVID tests being administered to keep their students safe, but what has failed to be taken into consideration is that a campus is not its own ecosystem. Students must leave to get groceries or on breaks, they visit with their friends and family, and they frequent nearby local businesses. All of which are healthy habits to keep college attendees socially acclimated outside of their campus bubble, but in a time of crisis the interconnectedness between students and the city they inhabit puts the whole community at risk. For Loyola specifically, the danger presented through interactions of students off campus is substantially more significant as Chicago's population is composed of more than 30% African Americans who are at a greater risk of the deadly effects of COVID than any other subpopulation. As cases in Chicago continue to increase, disproportionately by demographic, it is the safest option to minimize any possible exposure as a means of slowing down the spread of this virus and protecting the crucial diversity of this beautiful city.

Through many uncertainties, Loyola has stayed true to their value of *cura personalis* or caring for the whole person. As much as this pertains to its scholars and faculty that administration is dedicated to protecting through these challenging times, the phrase encompasses a metaphorical whole person symbolizing our city. The recent decisions to remove on-campus housing, as well as to partake in a fully online educational experience this fall semester, were made in the best interest of the greater community including Loyola families, local workers and businesses, nearby diverse neighborhoods, and the extraordinary Chicagoland ecosystem. As much as this fall semester is a letdown for many Ramblers, taking these measures now and encouraging all possible precautions for students beyond Loyola's walls creates a promising future for what is hopefully an approaching return to the life we all knew and loved in the Windy City before the tragedy of COVID-19.

Christina Paskon is a junior BSPH major and BSPH Newsletter contributor.

Public Health Club Updates by Maria Price

Communities nationwide have seen much change throughout recent months. Executive board members of Loyola's Public Health Club (PHC) have worked relentlessly throughout the summer in order to continue leading the student body with clarity, shrewdness and mindfulness. A statement, *Pressing Concerns of Parkinson Students*, developed by the executive board and released to Parkinson School leadership on June 4, 2020, raised concerns about racial diversity, equity, and inclusion within LUC and across the nation. What followed was a flurry of Parkinson School staff, faculty, and student virtual gatherings: town halls, meetings and one-on-one's, to provide a space for listening as well as to devise a thoughtful, more inclusive and equitable way forward for the Parkinson School and its many programs.

A Parkinson wide Town Hall called by Dean Elaine Morrato on June 12, 2020 gave space to uplift the voices and experiences of those underrepresented within university community. The PHC statement on student concerns was openly discussed and has received acknowledgement, praise, and an earnest commitment from many within LUC to respond directly and be accountable for achieving measurable goals leading to improvement on the issues identified within the statement.

In the time since, leaders of The PHC have carried out one-on-one meetings with faculty and staff members throughout the Parkinson undergraduate program to understand their perspectives on diversity, equity and inclusion matters within

the Parkinson community. From this, a report on DEI insights, findings, and recommendations specific to LUC experience was formalized and shared with Parkinson's office of the Dean. PHC plans to remain focused and steadfastly committed to creating and pursuing opportunities to improve aspects of diversity, equity and inclusion within Loyola's educational community because we know these are the concerns of many new and returning students.

We are encouraged by the prospect of continuing to act in every way possible to be the change we demand for current and future generations. Echoing the words of Dean Elaine Morrato, we believe that *through our collective work, we will gather the moments of this time and create momentum for real change.*



Mark Your Calendars!

Parkinson Professional Development Workshop Series

- **Building a Competitive Pre-Health Application**, October 15, 4 – 5:30 PM, Andrea Beaumont, Health Sciences Advising: <https://luc.zoom.us/j/97170097491>
- **Developing Your Professional Network: LinkedIn and Networking Strategies**, November 12, 4 – 5:30 PM, Christie Andersen Asif, Career Services: <https://luc.zoom.us/j/97170097491>
- **Is Graduate School in Your Future?**, January 28, 4 – 5:30 PM, Christie Andersen Asif, Career Services: <https://luc.zoom.us/j/97170097491>
- **Internships & Job Search Strategies**, February 25, 4 – 5:30 PM, Christie Andersen Asif, Career Services: <https://luc.zoom.us/j/97170097491>
- **Healthcare Ethics**, April 1, 4 – 5:30 PM, TBD: <https://luc.zoom.us/j/97170097491>

Public Health Club

- **Pediatric Health & Tobacco Use with Dr. Brian Jenson**, October 19, 6:30 PM: <https://luc.zoom.us/j/92947042310#success>
- **Pediatric Health Equity and the Effect of Policing on Children with Dr. Katie McPeak**, October 26, 6:30 PM; <https://luc.zoom.us/j/99429728161#success>

Resources

Public Health Resources:

- [Public Health Job Board](#)
- [Career Services](#), Christie Andersen Asif, Career Development Advisor (Health Sciences), casif@luc.edu
- **Librarian for the BSPH Program**, Geoff Swindells, Associate Dean of Research, Learning, & Engagement, gswindells@luc.edu; [Public Health Guide](#)

Student Support Resources:

- [Parkinson School of Health Sciences and Public Health Student Handbook 2019-2020](#)
- [Student Accessibility Center](#)
- [Tutoring Center](#)
- [Writing Center](#)

Interested in Contributing to the BSPH Newsletter?

We are always looking for new content for the BSPH Newsletter. Students may hone their communication skills, share their thoughts, interests, and ideas on a variety of public health topics. Email Keith Kramer, kkramer4@luc.edu.

For more information about the B.S. in Public Health program, please contact:

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