

Marshall University's Center for Rural Health: Appalachian Coalitions

PROJECT OVERVIEW

Marshall University's Center for Rural Health aimed to build the capacity of diabetes coalitions in rural, low income counties in the Appalachian Region to improve the health status of people living with diabetes and other chronic conditions. A collaborative partnership between the Appalachian Regional Commission (ARC), the Centers for Disease Control and Prevention (CDC) and Marshall University was created since 2000 to reduce health disparities within the Appalachian region. As part of the Together on Diabetes project, ten coalitions were funded by the Bristol-Myers Squibb (BMS) Foundation to address diabetes in Appalachia with the technical assistance and guidance of the ARC, CDC, and Marshall University. The three partners intended to build on the existing infrastructure of diabetes coalitions and substantially upgrade their ability to organize and implement best practice or evidence-based programs through training on how to plan, implement and evaluate their projects. The first five coalitions funded by the BMS Foundation are: 1) Adams/Brown County, Ohio (Adams-Brown Diabetes Education Coalition); 2) Graham County, North Carolina (StepUp Diabetes Coalition); 3) Lawrence County, Kentucky; 4) Meigs County, Tennessee; and 5) Mingo County, West Virginia.

The five coalitions worked continuously since 2011 to reduce the burden of Appalachia through targeted interventions focusing on diabetes education, increasing healthy nutrition, and physical activity within schools, community settings, senior centers, grocery stores, and health departments. Using limited resources, the coalition members sought to increase diabetes self-management and reduce health disparities within the specific counties.

CONTEXT AND PARTNERS

The Appalachian region outlines the Appalachian Mountains and comprises of 420 counties in thirteen states. It includes West Virginia, Alabama, Georgia, Kentucky, Maryland, Mississippi, New York, North Carolina, Ohio, Pennsylvania, South Carolina, Tennessee, and Virginia. It has a population of approximately 24 million people, 42% of residents live in rural areas, compared with 20% of the national population.

Appalachia suffers from high rates of poverty, low education, high unemployment, an aging population, limited access to health care, high rates of cigarette smoking, and generally poor health status. Recent Behavioral Risk Factor Surveillance System (BRFSS) data indicate that the prevalence for diabetes in Appalachia is 9.7%, while it is 7.8% for the United States. Distressed counties of Appalachia, as defined by the ARC, had a diabetes prevalence of 13.1% and whose socio-economic status places them in the bottom 10% of all counties in the nation.

Below is a table of county-specific information and context based on 2011 data, using the County Health Ranking and Roadmaps as a resource. The table highlights the high prevalence of diabetes, physical inactivity, low access to healthy foods, and low ranked counties.

Table 1: Cohort 1 County-Specific Information on Disparities

County/State	Population	Diabetes Rate	Physical Inactivity	Access to Healthy Foods	Rural	Ranked
Adams/ Brown, Ohio	28,043 44,003 (11,542,645 Ohio)	11% 10%	28% 20%	64% 50%	89.8% (22.6% in Ohio) 80.8% (22.6% in Ohio)	82 out of 88 54 out of 88
Graham, North Carolina	8,001 (9,380,884 North Carolina)	10%	26%	50%	100% (39.8% in Ohio)	80 out of 100
Lawrence, Kentucky	16,573 (4,314,113 Kentucky)	12%	35%	25%	78.1% (44.2% in Kentucky)	105 out of 120
Meigs, Tennessee	12,108 (6,495,978 Tennessee)	11%	35%	33%	100.0% (36.4% in Tennessee)	67 out of 95
Mingo, West Virginia	26,387 (1,819,777 West Virginia)	13%	38%	33%	89.0% (53.9% in West Virginia)	54 out of 55

Table 2: Cohort 2 County-Specific Information on Disparities

County/State	Population	Diabetes Rate	Physical Inactivity	Access to Healthy Foods	Rural	Ranked
Grundy County, Tennessee	14,130 (6,296,254 Tennessee)	11%	32%	63%	100.0% (36.4% in Tennessee)	94 out of 95
McMinn County, Tennessee	52,739 (6,296,254 Tennessee)	12%	33%	33%	58.6% (36.4% in Tennessee)	53 out of 95
Meigs County, Ohio	22,838 (11,542,645 Ohio)	10%	30%	25%	78.9% (22.6% in Ohio)	83 out of 88
Montgomery County, Mississippi	11,129 (2,951,996 Mississippi)	14%	39%	50%	61.5% (51.2% in Mississippi)	36 out of 81
Murray County, Georgia	40,621 (9,829,211 Georgia)	11%	27%	33%	72.5% (28.4% in Georgia)	107 out of 156

Grundy County Health Council/ McMinn Living Well/ Montgomery County Diabetes Coalition/ Each coalition engaged local partners to implement different projects and reduce diabetes within Appalachia. All coalitions had the ARC, CDC, and Marshal University as support partners. The ARC works for sustainable communities and economic development in Appalachia. The ARC and CDC offered financial support to fund coalition work in Appalachia to reduce health disparities. Marshal University took a lead in technical support and consultation on building the capacity of the coalitions to address diabetes. Table 2 below highlights the implementation partners for each county.

Table 3: Implementation Partners

Cohort 1 County/State	Implementation Partners	Cohort 2 County/State	Implementation Partners
Adams/Brown, Ohio	<ul style="list-style-type: none"> Schools Worksite Wellness Committee Future without Poverty Lay health advisors 	Grundy County, Tennessee	<ul style="list-style-type: none"> Schools Grundy County Mayor’s Office Health Network, National Guard Armory and Mountain Goat Trail Alliance Share Our Strengths Grundy County Food Ban
Graham, North Carolina	<ul style="list-style-type: none"> Schools Health Department Local churches 	McMinn County, Tennessee	<ul style="list-style-type: none"> Starr Regional Medical Center Diabetes Center Arthritis Foundation Athens-McMinn YMCA Sam’s Club/Walmart
Lawrence, Kentucky	<ul style="list-style-type: none"> Ambassadors for Health and Wellness Hospital 	Meigs County, Ohio (Creating Healthy Communities)	<ul style="list-style-type: none"> Freedom for Appalachia Community Development Organization (FACDO) Meigs County Ohio Public Libraries Meigs County Farmers' Market Schools Meigs County Health Department
Meigs, Tennessee	<ul style="list-style-type: none"> Schools 	Montgomery County, Mississippi	<ul style="list-style-type: none"> Grocery Stores Mont. County State Extension Office Senior Citizen Center
Mingo, West Virginia	<ul style="list-style-type: none"> Local farmers Appalachian Leadership Academy Williamson Farmers Market 	Murray County, Georgia (Northwest Georgia Healthcare Partnership)	<ul style="list-style-type: none"> Senior Center Verizon Schools Food Bank

ASSESSMENT AND PLANNING

The assessment phase began when the ARC developed a method for classifying distressed counties through socio-economic status. This was done by comparing three-year unemployment rates, per capita income, and poverty rate in Appalachia and comparing these to the United States as a whole. The assessment revealed that all the coalitions in this project were located in distressed counties. The ADCTP project establish diabetes coalitions in distressed Appalachian counties. Through a competitive grant application, coalitions applied for a grant to organize coalitions and initiate diabetes prevention and control activities in their counties.

In 2011, the Bristol-Myers Squibb Foundation’s Together on Diabetes project offered an opportunity for Appalachian coalitions to apply for grants. With funding from the BMS Foundation the ADCTP’s plan was to:

1. Build the capacity diabetes coalitions in rural, low-income counties in the Appalachian Region to mobilize their community for sustained health development.
2. Equip diabetes coalition leaders to implement evidence-based programs through a program of train-the-trainers;

3. Develop systems to support and sustain implementation of countywide programs that help residence experience the benefits of taking control of their diabetes and other chronic conditions.

All grantees attended planning workshops based on their geographical location. Using the CDC’s Diabetes Today for Community Leaders curriculum, MU delivered additional workshops. A minimum of five coalition members attended the two-day workshop where they assess their organizational capacity, identify training needs, and write a detailed plan for implementing their grant. Coalitions identified the behavioral, policy and environmental changes they intend to achieve through their grant, and identify the Evidence Based Programs (EBP) or best practices that will facilitate that change. This workshop was used to build teamwork and establish a common vision for what the coalition will accomplish.

INTERVENTION COMPONENTS

Coalitions sponsored support groups, organize community events such as biggest loser competitions, sponsor community screenings, build walking tracks, build community gardens, partner with local businesses for worksite wellness programs, and organize walking clubs. Table 3

Table 4: Cohort 1 Table of Components and Elements

INTERVENTION COMPONENTS	SPECIFIC ELEMENTS & MODE OF DELIVERY				
	Adams/Brown, Ohio	Graham, North Carolina (StepUp Diabetes Coalition)	Lawrence, Kentucky	Meigs, Tennessee	Mingo, West Virginia
Diabetes Self-Management Education	<ul style="list-style-type: none"> • Arthritis Exercise Sessions for seniors • Cooking Matters 	<ul style="list-style-type: none"> • Shopping Matters Class • Diabetes Education classes 	<ul style="list-style-type: none"> • Diabetes self-management classes • ASK ME 3 • Cooking Matters classes 	<ul style="list-style-type: none"> • Youth: Nutrition Education in classrooms • Adults: Chronic Disease Self-Management classes; Cooking Matters • Seniors: Chronic Disease Self-Management Class; Cook Smart-Eat Smart class 	<ul style="list-style-type: none"> • Chronic Disease Self-Management program • canning workshop
Support for Managing Diabetes and Distress	<ul style="list-style-type: none"> • Lay health advisor program • Worksite Wellness Committee 	<ul style="list-style-type: none"> • Health Department Lifestyle Balance Program 	<ul style="list-style-type: none"> • Ambassadors for Health and Wellness • Healthy Living with Diabetes Support Group 	<ul style="list-style-type: none"> • Youth: Walking Program • Adults: Lunch and Learns; Pathweights; Walking Programs • Seniors: Walking Program 	<ul style="list-style-type: none"> • Arthritis Foundation approved Walk with Ease program • Lunch Walk Challenge
Enhanced Access/Linkage to Care	<ul style="list-style-type: none"> • School garden (Ripley, St. Michael) 	<ul style="list-style-type: none"> • Distribution of food at local churches • Walkways • Zumba classes • Yoga classes • Afterschool dance classes 	<ul style="list-style-type: none"> • NA 	<ul style="list-style-type: none"> • Youth: Tasty Days; Give a Kid a Chance • Seniors: Garden 	<ul style="list-style-type: none"> • Williamson Farmers Market community gardens and farmers market

Community Organization, Mobilization, and Advocacy	<ul style="list-style-type: none"> • “Future without Poverty” received a grant to start a factory named Ripley Gourmet Tortillas 	<ul style="list-style-type: none"> • Family Fitness Fair 	<ul style="list-style-type: none"> • "Bless Your Heart" • "Walk with the Doc" 	<ul style="list-style-type: none"> • Youth: Healthy Horizons • Adults: parent-night at schools; 5K participation 	<ul style="list-style-type: none"> • Appalachian Leadership Academy • “Our Children, Our Future” Symposium to encourage policy change in West Virginia
Unique Aspect of the Intervention	The diversity of people involved. Futures without Poverty hired clients from the local developmental disabilities program to work in the greenhouse. Additionally, single parents, or ‘the involuntary poor’ along with recovering addicts, small farmers, and Hispanics are becoming involved in the community gardens.	Enhancing the built environment through safe walking environments (green way, pedestrian paths, and greenhouses)	Meeting at the hospital helps keep people at the table including. The team includes a dietitian, hospital CEO, nurses, and physicians.	Health education time slots built in to the Meigs County School calendar.	Use of Health and Wellness Promoters

Table 5: Cohort 2 Table of Components and Elements

INTERVENTION COMPONENTS	SPECIFIC ELEMENTS & MODE OF DELIVERY				
	Grundy County, Tennessee	McMinn County, Tennessee	Meigs County, Ohio	Montgomery County, Mississippi	Murray County, Georgia
Diabetes Self-Management Education	<ul style="list-style-type: none"> • Cooking Matters • Zumba classes at Altamont City Community Center 	<ul style="list-style-type: none"> • Lead an Arthritis Foundation Tai Chi program • Shopping Matters • CDC's Diabetes Prevention Program 	<ul style="list-style-type: none"> • 5K run for middle-school aged students • Shopping Matters • Education Fair on Nutrition [salad bar included at lunch time after pilot at the fair] • School Gardens (an elective) 	<ul style="list-style-type: none"> • Shopping Matters • Partnered with the Mayor's Health Council sponsored a Mini-Health Fair 	<ul style="list-style-type: none"> • Gentle Yoga • Cooking Matters • Wellness and Diabetes education and prevention class
Support for Managing Diabetes and Distress	<ul style="list-style-type: none"> • Partnered with Tracy City Baptist Church to deliver diabetes information to congregation 	<ul style="list-style-type: none"> • Dining with Diabetes class • 6 week Walk Across Tennessee program for adults in the community 	<ul style="list-style-type: none"> • Gentle Yoga session held at Pomeroy Public Library • [sustainability As a result, implementing DPP] 	<ul style="list-style-type: none"> • Community members gathered to clean up property, restore basketball goals, build cool down area, paint lines for basketball area 	<ul style="list-style-type: none"> • Community Health Worker led the diabetes/wellness support group • Community Health Workers joined a local church to bring Christmas gifts to families through a program called "Sharing is Caring"
Enhanced Access/Linkage to Care	<ul style="list-style-type: none"> • Distributed food through Grundy County Food Bank 	<ul style="list-style-type: none"> • Athens-McMinn YMCA provides healthy, nutritious meals to children daily 	<ul style="list-style-type: none"> • The Meigs County Farmers' Market • Completed resurfacing of the community 	<ul style="list-style-type: none"> • Access to fresh fruits and vegetables by developing and maintaining raise 	<ul style="list-style-type: none"> • Organized the 10K/ 5K/ 2K for Murray and Whitfield Counties

			<ul style="list-style-type: none"> basketball court at Ferman Moore Park [salad bar included at lunch time after pilot at the fair] Implemented a bike-share program in partnership with the library to increase access to transportation (Book A Bike Program) Community Gardens 	beds, growing vegetables and distributing the vegetables	<ul style="list-style-type: none"> Bike Around Murray Program Free registration to 2K run and transportation was provided by the school
Community Organization, Mobilization, and Advocacy	<ul style="list-style-type: none"> Wrote and published 43 health articles related to diabetes management 	<ul style="list-style-type: none"> Published weekly article on diabetes in the Daily Post Athenian 	<ul style="list-style-type: none"> The Daily Sentinel featured Creating Healthy Communities on the front page 	<ul style="list-style-type: none"> Implemented a community garden for senior citizens 	<ul style="list-style-type: none"> Seniors gathered and prepared the community garden Door to door education from Community Health Workers Community Cycling
Unique Aspect of the Intervention	Teams participated in the 100 miles in 100 days	Quarterly Staff Fitness Challenge offered to McMinn County School employees	Implemented a bike-share program in partnership with the library to increase access to transportation (Book A Bike Program)	"40 days to Freedom" smoking cessation workshop within four churches	Partnered with South Carolina Rural Research Center to implement a study, where 300 participated in the program with 100 receiving technology supported diabetes management

ILLUSTRATIVE COHORT 1 STORIES OF COMMUNITY TRANSFORMATION, PERSONAL TRANSFORMATION, & ORGANIZATIONAL TRANSFORMATION

Adams/Brown, Ohio

The diabetes prevalence in Adam and Brown Counties exceeded the national average. Further, the challenges related to healthy food and physical activity opportunities made this region difficult to address diabetes. There was no formal diabetes education within this southwestern part of Ohio. For this reason, the Adams Brown Diabetes Education Coalition (ABDEC) was created over a decade ago to address the burden of diabetes within Adam and Brown Counties. In 2012, ABDEC applied for and received the Together on Diabetes grant. With this money, a Coalition Coordinator was hired and was responsible for outreach and increasing visibility within the two counties. Community transformations that occurred included the development of a new community garden in Ripley and the adoption of a new physical activity policy for the region’s seven Head Start Centers. Both community transformations increased enthusiasm among community members and parents to address healthy eating and physical activity in an effort to control diabetes.

Graham, North Carolina

The STEP UP Diabetes Coalition was formally organized in 2004 in Graham County, NC. The Coalition focused on various projects. One of the main projects focused on pedestrian walkability and safety. The Pedestrian Connectivity Plan had three objectives. First, to slow traffic down so that pedestrians are safe when walking outside. Second, to include sidewalks where needed so community members can walk to downtown,

community facilities, shopping centers, and recreational facilities. Finally, to take additional pedestrian safety measures including painting a pedestrian lane on some streets, extend the curb with shoulders in places where installing sidewalks are difficult.

Meigs County, Tennessee

The program implemented by the Meigs County Health Council in their community has been successful in shifting the social norms towards a healthier, more active mindset. This has especially been evident in the school-age children as they continue to receive classroom education regarding healthy eating and physical activity. Post-evaluations for the Health Council's annual Healthy Horizon event has shown a decrease in sugary drink consumption over the past 5 years and student now report drinking fewer sugary drinks regularly than the national average. Also, the Meigs Health Council continues to strive to sustain their efforts in the community and county by installing more permanent physical activity fixtures such as outdoor fitness equipment and walking trails. The group also received their 501c-3 non-profit designation in June 2016 so that the coalition can pursue additional funding opportunities in the future.

Mingo, West Virginia

Community gardens in Mingo County were developed as part of the effort to address healthy eating and the reduce diabetes burden. The Coalition in Mingo County developed accessible plots that were centrally located so community members are able to participate in gardening. The Coalition had to double the number of plots because of the high number of community members engaged. People used this activity to get together with others and provide support for healthy living, learn together how to live healthier lives, engage in physical activity, and selling produce at the Farmers Market. Because of the gardening project and diabetes-related efforts in Mingo County, the Robert Wood Johnson Foundation gave Williamson, WV the 2014 Culture of Health Prize Winner.

COHORT 2 STORIES OF COMMUNITY TRANSFORMATION, PERSONAL TRANSFORMATION, & ORGANIZATIONAL TRANSFORMATION

Meigs County, Ohio

The Meigs County Coalition wanted to continue to address diabetes through the CDC's Diabetes Prevention Program (DPP). In order to implement this effort, the Coalition identified a local Federally Qualified Health Center (FQHC) as the implementation partner. This FQHC has a behavior change program using a behavioral health consultant, who was trained using the DPP curriculum. The Coalition worked with the FQHC to continue the diabetes screening, diagnosis, and support for behavior change. Five life style coaches have been trained to implement the DPP in Meigs County, Ohio.

Murray County, Georgia—Personal Transformation

Jim was introduced to the Murray County diabetes program in December of 2015. During that time, his health was out of control. His daughter was diagnosed with leukemia two years earlier and it made life difficult for Jim. He was at 419 pounds during that time. When Jim began the program in December 2015, he was 370 pounds but his A1C level was at 11.5% and the doctors were threatening not to renew his health card under new Department of Transportation regulations. Jim asked his doctor to give him a second chance. At the same time, one of Jim's customers introduced him to the Northwest Georgia Healthcare Partnership's diabetes program. He started eating better and taking care of his health. Jim lost more than 42 pounds and his A1C reduced to 6%. Jim says his doctor is also pleased with his health outcomes. He said, "From the bottom of my heart I would just like to say thank you and God bless!"

EVALUATION RESULTS AND FINDINGS

Figure 1: Services Provided and Development Activities Over Project Period

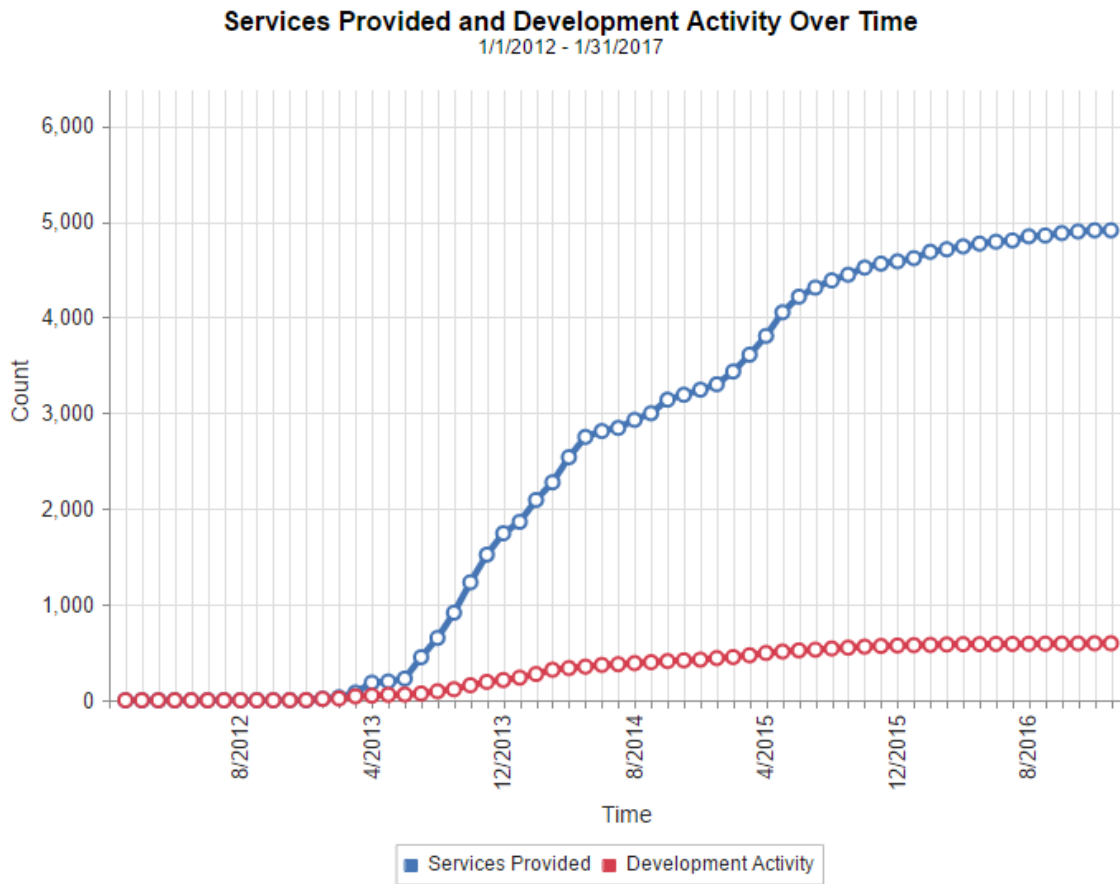
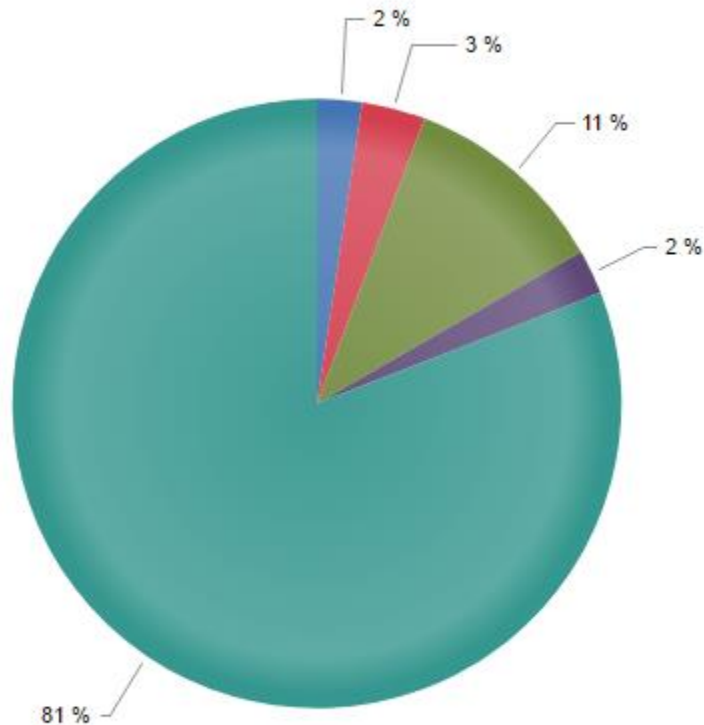


Figure 2: Project Activities by Goal

Project Activities by Goal Addressed

1/1/2011 - 5/1/2017

N = 8783



■ Improve access/linkage to care
 ■ Improve clinical health outcomes
 ■ Improve diabetes self-management
■ Improve quality of care
 ■ Increase preventive health behaviors

WHAT WE ARE LEARNING

All coalition staff identified restraining and facilitating factors for implementing the projects within their counties. Facilitating factors made the project easier to implement, while restraining factors made the program more difficult to implement.

Table 6: Cohort 1 Coalition Facilitating and Restraining Factors

County	Facilitating Factors	Restraining Factors	Coalition Lead
Adams/Brown, Ohio	<ul style="list-style-type: none"> Village Participation Outreach to the entire community to get involved. (empowerment) Having a leader that is passionate about the project. 	<ul style="list-style-type: none"> Negative community attitudes toward low-income individuals. Transportation Floods pose a challenge to the garden work 	Sue Basta Phyllis Smith

	<ul style="list-style-type: none"> • Brown County Health Department partnership 	<ul style="list-style-type: none"> • Communicating project events in the county has been challenging • Ripley's Grocery store closed in Spring 2015 • Staff wearing so many different hats within the county • Certified Diabetes Educator 	
Graham, North Carolina (StepUp Diabetes Coalition)	<ul style="list-style-type: none"> • Collaborative partnerships: schools, Graham County Extension Office, Graham Fellowship Distribution Initiative • Volunteers enable the success of the programs • Community buy-in 	None noted	Rick Davis
Lawrence, Kentucky	<ul style="list-style-type: none"> • Faith-based • Program Ambassadors (5) • A new Minister 	<ul style="list-style-type: none"> • People retire and relocate • Change in Leadership 	Carolyn McGinn
Meigs, Tennessee	<ul style="list-style-type: none"> • The investment and "buy-in" of the community partners and health council members. • Easy access to the community • Partnerships enables success of the project. 	Health council members have other obligations and responsibilities resulting in health council tasks to be put on hold.	Brittany Kirkland
Mingo, West Virginia	<ul style="list-style-type: none"> • Farmers Market vendors accept payment through EBT SNAP benefits • Using social media to invite community members to events • Community buy-in • Ability to allocate funding 	None noted	Jenny Hudson

Table 7: Cohort 2 Coalition Facilitating and Restraining Factors

County	Facilitating Factors	Restraining Factors	Coalition Lead
Grundy County, Tennessee	<ul style="list-style-type: none"> • 	<ul style="list-style-type: none"> • 	Sofia Leon-Meza
McMinn County, Tennessee	<ul style="list-style-type: none"> • 		Brittany Kirkland
Meigs County, Ohio	<ul style="list-style-type: none"> • A community that cares. The investment and "buy-in" of the community partners and health council members. • Strong Partnerships and Opportunity to Network 	<ul style="list-style-type: none"> • Limited Funds and Other resources like people's time • Limited Time 	Laura Cleland

Montgomery County, Mississippi	•	•	Laura Tucker
Murray County, Georgia	• Key Board members created community buy-in	• Distance is a barrier—the target service area is 15 to 20 miles away • Limited funding	Greg Dent & Ali Harp

MOVING FORWARD AND PLANS FOR SUSTAINABILITY

The ten coalitions aim to sustain their efforts in Appalachia through various tactics of sustainability. Table 2 below outlines tactics for sustaining the projects.

TACTICS OF SUSTAINABILITY	SPECIFIC EXAMPLES
Share positions and resources with organizations that have similar goals	Meigs County, TN: Partnerships with Meigs County Coordinated School Health and Meigs County University of TN Agriculture extension
Become a line item in an existing budget of another organization	
Incorporate the initiative’s activities or services into another organization with a similar mission	
Apply for grants	Meigs County, TN: Applied for and received Regional Roadmap Grant from East TN State University in 2016 Murray County, GA: The Coalition in Murray County, GA has been applying for grants
Tap into available personnel resources	
Solicit in-kind support	Meigs County, OH: The coalition didn’t pay for her service Used library space. Murray County, GA: Have solicited in-kind support through partnerships with businesses to host our classes and provide stipends to participants.
Pursue third party funding	Murray County, GA: Have pursued third party funding fundraising proposals and partnerships with other organizations writing grants.
Develop a fee-for-service structure	
Acquire public funding	
Establish a donor or membership base	Murray County, GA: Created a donor list

PROJECT PUBLICATIONS AND MATERIALS

Crespo R, Hatfield V, Hudson J, Justice M. Partnership with Community Health Workers Extends the Reach of Diabetes Educators. *In Practice, The American Association of Diabetes Educators*. 2015:24-29.

- The article describes how CHWs can work efficaciously with CDEs to affect medication adherence, self-management behaviors, and health outcomes.

Project Materials

- Cooking Matters Curriculum

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EVALUATION CONTACT INFORMATION

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