Hope for the Economically Underprivileged in America’s Urban Core
Clendening Summer Fellowship Proposal
Andy Patton (KUSOM 2014)
February 14, 2011

Introduction

The project I propose for a Clendening Summer Fellowship involves researching primary care medicine in America’s inner-cities. Specifically, my research will focus on prenatal care amongst the patient population served by the Hope Family Care Center in inner-city Kansas City, Missouri. Data will also be collected regarding demographic factors related to prenatal care, including rates of teenage pregnancies, unwed pregnancies, adoption and abortion rates, and parent demographics (including age, education level, employment, substance abuse, and gang membership). Information obtained will be included in a report submitted for the Clendening Summer Fellowship and given to the staff of the Hope Family Care Center to help them better understand the needs of their patient population.

A Word from Nathan Jackson of the Hope Family Care Center

As a new medical clinic that just recently opened our doors full-time, the Hope Family Care Center is very interested in further understanding the needs of our patients, especially in the realms of prenatal care and women’s health. As Practice Administrator, I was excited about Mr. Andy Patton's proposal to assist in pursuing this knowledge, ultimately helping us provide the best patient care to our neighborhood. I've discussed the project with our Medical Director and Lead Practitioner, Dr. Jeremy Kirchoff, who is also excited and supportive of the project. We are prepared to assist and support Mr. Patton in his research endeavor while complying with HIPAA Privacy Rules. Feel free to contact me if you have any questions.

Background

The summer preceding my freshman year of college, I read Tracy Kidder’s book Mountains Beyond Mountains which forever changed my life. The book told the story of a man named Paul Farmer, a physician who has given his life to serving some of the world’s poorest people in Haiti. Since that time, I have had an ever growing desire to serve the world’s poor as a medical missionary. This past November, I attended the Global Missions Health Conference in Louisville, Kentucky. The conference strengthened my desire to someday practice medical missions in a developing country, but it also opened my eyes to the tremendous potential for medical mission work in America’s urban core. One of the conference’s keynote speakers was a man named Rick Donlon, one of the founders of Christ Community Health Services, an inner-city medical clinic in Memphis, Tennessee. Dr. Donlon’s stories, pictures, and videos of life at his clinic inspired me, and showed me that making personal and financial sacrifices to provide care for the poor is one of the most fulfilling career decisions a physician can ever make. He also showed that you don’t have to give your life to doing either inner-city medical missions or foreign missions, but you can do both! At one point, he even mentioned that nothing can better prepare a person for medical missions in a developing country than doing inner-city work in the United States.

After looking into summer opportunities to do research on medical mission work in America and abroad, I decided that learning and working in an inner-city clinic in America would be the best option for me during the summer of 2011. I contacted Rick Donlon at Christ Community Health Services, told him about my interest in medical missions and the Clendening Summer Fellowship, and asked him if there were any summer opportunities for me at his clinic. He told me that they do offer 4-week elective
rotations for medical students during the summer. I then contacted the Hope Family Care Center (HFCC) about my interest in doing Clendening research on inner-city primary care. I asked if there was any research I could do that would somehow help the HFCC better understand the needs of its patients and provide better care.

The Hope Family Care Center opened in October of 2009, and is a subsidiary of a community development organization called The Hope Center, whose vision is to contribute to the betterment of Kansas City, Missouri’s east-side community in a holistic manner through youth development, a charter school, housing, a neighborhood-based church, and the Hope Family Care Center. The Hope Family Care Center envisions all residents of its community receiving quality, personal health care, with preventive health care becoming the norm, regardless of one’s income.\(^1\)

**Description**

Nathan Jackson (Practice Administrator) and Dr. Jeremy Kirchoff (Medical Director) of the Hope Family Care Center determined that a prenatal research focus would be helpful to the clinic. Specifically, they requested that data sets be collected regarding rates of teenage pregnancies, unwed pregnancies, adoption and abortion rates, and parent demographics (including age, education level, employment, substance abuse, and gang membership).

The aforementioned demographic factors have been shown to have profound implications on the health of both children and mothers in both the prenatal and postnatal periods. For example, teenage pregnancies have been correlated with premature birth and low birth weight,\(^2\) pregnant teens are less likely to receive prenatal care,\(^3\) and children born to teen mothers are more likely to suffer from health issues in childhood or be hospitalized than those born to older mothers.\(^4\) Maternal substance abuse during pregnancy raises major concerns regarding long term health of children after in utero exposure, as well as being correlated to increased risk for placental abruption and premature rupture of membranes during pregnancy.\(^5\) A better understanding of these demographic factors among the patient population of the HFCC would allow it to better meet the needs of patients and the community.

Additionally, I will spend four weeks this summer doing a non-credit rotation at Christ Community Health Services (CCHS) in Memphis. CCHS is one of the largest inner-city medical clinics in the country, and has done much to help the HFCC start the same kind of practice in Kansas City. While in Memphis, I will see patients in the clinics in the mornings, and do supervised discipleship and community outreach events in the afternoons. This rotation will be a great opportunity to learn about my broad interest of inner-city primary care medicine. Also, CCHS has years of experience providing prenatal care to the communities it serves. In 2008, CCHS launched an initiative called “Centering Pregnancy,” a unique approach to prenatal care which includes self-care techniques, group prenatal care, and facilitated meetings. For this reason, I will pay close attention to learn as much as possible about CCHS’s handling of prenatal care, and all findings that could be helpful to the HFCC will be carefully recorded. Because I will begin volunteering for the HFCC during February, I will be able to begin conducting my research during the spring semester, and will have plenty of time to finish interviewing patients and compiling results upon returning to Kansas City in June. The HFCC is aware that I will spend four weeks in Memphis and will not be volunteering or conducting research in Kansas City during that time.

**Timeline:**

February – May 12

Begin volunteering bi-weekly at HFCC to become acquainted with the patient population and staff. Review medical literature and refine pre-interview
questionnaire and interview questions. Begin conducting interviews as time permits.

May 12  Academic year ends.
May 13 – May 28  Begin volunteering on a more frequent basis at HFCC and continue interviewing patients.
May 29  Drive to Memphis.
May 30 – June 25  Participate in rotation at Christ Community Health Services.
June 26  Return to Kansas City.
June 27 – July 23  Resume volunteering and research at HFCC.
July 24 – August 1  Compile data and finalize report for HFCC as well as Clendening report.

Methods

Data will be collected through interviews with patients of the Hope Family Care Center who are willing to volunteer to be interviewed. Additionally, short pre-interview questionnaires will be given to interviewees in order to maximize time efficiency during the interviews. A draft of the questionnaire as well as interview questions can be found in Appendices B and C of this proposal, respectively. In order to become more familiar with the Hope Family Care Center’s patient population, I will begin volunteering for the HFCC on a bi-weekly basis in February. My primary responsibility at first will be working at the clinic’s front desk, which will provide great opportunities for patient interaction. Once classes get out for summer, I will be able to increase my time volunteering at the Hope Family Care Center, while also conducting my research.

Potential interviewees will include patients who are currently receiving prenatal care, or those who have received prenatal care in the recent past. Candidates will be approached, given a description of the project, and allowed to choose whether to participate. Written consent will be obtained; a copy of the written consent form can be found in Appendix A of this proposal. For patients who are not yet 18 years old, additional consent will need to be obtained from a parent or legal guardian. For the sake of brevity, that consent form is not included in the appendices of this proposal. The audio of interviews will be recorded to ensure accurate recording of the information, as well as to save patients time that would otherwise be spent waiting for their responses to be written down. Since calculating an adequate sample size would be difficult, as many interviews as possible will be sought. If it is determined that not enough interviewees are being found within the HFCC’s patient clientele, opportunities to conduct interviews among the community’s general population will be explored. Gift cards will be purchased through funds obtained from the Clendening Summer Fellowship and given to interviewees as an expression of gratitude for their participation. Medical literature pertaining to prenatal care in the inner-city will be reviewed, which will be obtained through databases provided by Dykes Library, such as PubMed and MEDLINEPlus. Also, pertinent data will be obtained from local and state organizations, such as the Health Care Foundation of Greater Kansas City, the KCMO Health Department, and the Missouri Department of Health and Senior Services. This information will be included in the final report given to the Hope Family Care Center and submitted for the Clendening Summer Fellowship.

Housing: While in Kansas City, I will live at my current residence, a house at 4206 Cambridge Street in Kansas City, Kansas. In Memphis, I will live at Christ Community Health Service’s guest house, where a spot has been reserved for me from May 29th through June 25th.

Travel: My 2004 Honda Accord will be my means of transportation to Memphis and for all research-related travel in Kansas City.
Contacts:

<table>
<thead>
<tr>
<th>Hope Family Care Center</th>
<th>Christ Community Health Services</th>
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<tbody>
<tr>
<td>3027 Prospect</td>
<td>2595 Central Ave.</td>
</tr>
<tr>
<td>Kansas City, MO 64128</td>
<td>Memphis, TN 38104</td>
</tr>
<tr>
<td>(816) 861-6500</td>
<td>(901) 260-8500</td>
</tr>
<tr>
<td>Nathan Jackson – Practice Administrator (HFCC)</td>
<td>Rick Donlon, MD</td>
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<tr>
<td><a href="mailto:njackson@hfcckc.org">njackson@hfcckc.org</a></td>
<td>Associate Executive Director (CCHS)</td>
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<tr>
<td>(816) 547-6283</td>
<td><a href="mailto:Rick.donlon@gmail.com">Rick.donlon@gmail.com</a></td>
</tr>
<tr>
<td>Judy Bodenhamer – Clinic Leader (HFCC)</td>
<td></td>
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<td><a href="mailto:judyb@hopecenterkc.org">judyb@hopecenterkc.org</a></td>
<td></td>
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<tr>
<td>(816) 509-0685</td>
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Budget

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The $116 budgeted above the allotted $2000 and any additional expenses incurred will be paid out of my personal savings. Money has been reserved for same.

Conclusion

The stated mission of the Hope Family Care Center is “To honor God by providing quality, personal health care.” Personally, if I were to write a mission statement for my medical career, it would sound very similar to that. As a follower of Jesus Christ, I believe it is my personal responsibility to use my medical career to glorify God and to love and serve the people He created, especially those who do not have the financial means to purchase the medical services they require. That is why I came to medical school, and that is why I’m applying to do research on medical work in America’s inner-cities amongst her poorest people. Thank you very much for your consideration of this proposal.

Bibliography


Appendix A: Consent Form

I am a medical student at the University of Kansas School of Medicine, and I am conducting interviews for a Clendening Summer Fellowship research project. I am studying inner-city medical care, with a specific focus on prenatal care and demographic factors.

If you choose to participate in this study, you will be asked to answer some questions regarding prenatal care you are currently receiving or have received in the past. You will also be asked questions about certain factors, including age, education level, employment, substance abuse, and gang membership. Please take as much time as you need to answer the questions, and feel free to expand on the topic or talk about related ideas. If at any time during the interview you are asked a question which you would rather not answer, please say so and we will either stop the interview or move on the next question, whichever you prefer. All the information will be kept confidential, and you will not be asked to give your full name, address, phone number, birthday, or other identifying information. All information will be destroyed or kept in a secure location once the research work is complete.

Participant’s Agreement:

I am aware that my participation in this interview is voluntary. I understand the intent and purpose of the research. If, for some reason, I wish to stop the interview at any time, I may do so without having to give an explanation. I am aware that the information obtained in this interview will be used in a Clendening Summer Fellowship research project, and may be used in a presentation at the University of Kansas School of Medicine. I have the right to review, comment on, and/or withdraw information prior to the project’s submission. The information gathered in this interview is confidential with respect to my personal identity unless I specify otherwise. I understand that the audio from this interview is being recorded, and if I say anything that I believe may incriminate myself, the interviewer will immediately rewind the tape and record over the potentially incriminating information. The interviewer will then ask me if I would like to continue the interview.

If I have any questions about this study, I am free to contact the student researcher (Andy Patton,apatton@kumc.edu, 913-961-6909). I have been offered a copy of this consent form that I may keep for my own reference. I have read the above form and, with the understanding that I can withdraw at any time and for whatever reason, I consent to participate in today’s interview.

_________________________________
Participant’s signature                                               Date

_________________________________
Interviewer’s signature

Form adapted from template provided by Bard College Institutional Review Board. http://inside.bard.edu/irb/consent/
Appendix B: Pre-Interview Questionnaire Questions

1. What is your first name?
2. What is your age?
3. How many children do you have, and what are their ages?
4. What is your level of education? Please circle your highest level of education: No high school, some high school, high school graduate, some post-secondary education, associate degree, bachelor degree, graduate degree.
5. What is your current relationship status? Please circle one: Single, dating, engaged, married, other.
6. Have you ever had a pregnancy that was terminated? Yes/No.
7. If answer to question #7 was yes, how many pregnancies have you had that were terminated?
8. Have you ever adopted? Yes/No.

Appendix C: Interview Questions

1. Approximately how many months into your pregnancy/pregnancies did you begin receiving prenatal care?
2. Where did you go to receive prenatal care?
3. How were you able to pay for your prenatal care? Was cost a factor that prevented you from receiving prenatal care you would have otherwise sought?
4. Do you feel that the prenatal care you received was adequate? Why or why not?
5. While you were pregnant what was your living situation?
6. During your pregnancy, did you smoke? Drink any alcohol? Use drugs?
7. Are you currently employed? If so, please describe the nature of your employment. If not, do you have some other means of income?
8. Do you know who the father of your child/children is? (Ask for all children listed in question 3 of the pre-interview questionnaire.)
9. Are you still in contact with your child(ren)’s father(s)?
10. How involved is/are the father(s) in the life/lives of your child(ren)?
11. Have you or the father of any of your children ever been involved in a gang?
12. If answer to pre-interview questionnaire question #7 was yes: What factors made you decide to terminate your pregnancy?