

# STUDENT HEALTH ACTION COALITION



2008-2009 NEWSLETTER



# Friends of SHAC,

**W**e are excited to present our annual SHAC newsletter so that you can see what we have been doing over the past year. Our medical clinic has expanded substantially this year to include another specialty clinic and an HIV prevention program in Durham. Our dental clinic now provides hygiene services. The outreach team continues to build new partnerships with local community organizations to affect positive change in the community. We continue to listen and respond to our community's needs.

Our passionate student volunteers continue to remind us why SHAC functions so well as a student-run organization. We would not exist, however, without our faculty and community advisors, the dentists that volunteer at the dental clinic, and the physicians that give their time to the medical clinic. We are constantly reminded of the unique environment at SHAC as we watch the interactions between the many interdisciplinary students and faculty who all come together to work towards a common goal.

As we near the end of our co-directorships, we are thankful for the opportunity we have had to lead such a wonderful organization and to be part of such a powerful community. As the partnership between SHAC and our community grows stronger, we are confident that next year will bring many new and exciting changes as well.

*With thanks,*

Brian and Lindsey  
SHAC Co-Directors, 2008-2009

*Brian Zeithaml is a second year medical student, and Lindsey Bach will complete her nursing degree (BSN) in December 2009.*



# About the Student Health Action Coalition (SHAC)

A University of North Carolina at Chapel Hill (UNC) student-led organization, SHAC's mission is threefold: to provide free health services to local underserved individuals and communities, to partner with communities to develop and implement sustainable programs, and to create interdisciplinary service learning environments for students in the health science programs at UNC. SHAC is run entirely by student volunteers from UNC's School of Medicine and Allied Health Sciences, School of Nursing, Eshelman School of Pharmacy, School of Dentistry, Gillings School of Global Public Health, and School of Social Work.

SHAC began as free medical clinic in 1967 and remains the nation's oldest student-run free medical clinic. Since 1967, SHAC has expanded to include community outreach programs, a free dental clinic, partnerships with Native American communities in North Carolina, home health and support services for elderly community members, and a Habitat for Humanity core of volunteers. Through participation in

health fairs, diabetes clinics, wellness and educational programs, SHAC Community Outreach works with local groups to support community members in maintaining and improving their health. The oldest student-run dental clinic, SHAC's Dental Clinic provides free screenings, cleanings, restorative procedures and extractions. The Native Health Initiative is dedicated to providing educational programs about health inequities in American Indian communities, creating tribe-directed sustainable health projects, and empowering youth to become health leaders in their communities through a summer internship program. Volunteers with SHAC's Beyond Clinic Walls visit, support, and design interventions for elderly community members who have limited access to healthcare resources. SHAC's Habitat for Humanity partnership provides the opportunity to help construct a house for a family each year. The medical clinic is held every Wednesday night and provides work, school and annual physicals, vaccinations, women's health physicals, and acute care.

To provide health services, SHAC depends on donations from the community and from non-profit organizations. The current economic climate presents significant challenges for SHAC in the form of increased demands for clinic services and decreased funding. Your generous gifts can make a significant difference.

To support SHAC, please find the enclosed envelope for mail-in donations. Please make

your check payable to "Medical Foundation of North Carolina" with "SHAC" in the memo line. Alternatively, if you would like to donate online, please go to:

<http://www.med.unc.edu/shac/fundraising>

(after reaching the Medical Foundation of North Carolina webpage, select "Centers" and then "Student Health Action Coalition" to designate your funds). **Many thanks!**

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# SHAC Reaches Beyond Clinic Walls

by Cherie Rosemond

In the fall of 2007, senior citizens Maury Land and Jean Feldman of Chapel Hill found their lives becoming increasingly difficult to manage on their own. Maury recalls feeling that it was unsafe to be walking independently and that he was having difficulty planning and remembering daily schedules. His wife Jean, an accomplished backpacker who traversed the entire Appalachian Trail at age 76, was experiencing knee pain that was starting to limit her mobility. The Feldmans' hope was that they could continue living independently in their home of 40 years despite these challenges, but they weren't sure how they would succeed.

Enter Beyond Clinic Walls (BCW), a branch of SHAC that provides in-home health and support services for elderly members of the community. SHAC BCW was founded with people like the Feldmans in mind. In 2007, SHAC BCW team members from the UNC schools of social work, pharmacy, occupational therapy, medicine, and nursing teamed up with several community agencies to bring stability and support to the Feldmans' lives.

During their monthly consultations with the Feldmans, the BCW team identified problems and worked to solve them. After several visits it became evident that Jean was very fatigued because of the amount of care she provided for Maury. Moreover, she was taking laundry into town on a daily basis for washing. Twice weekly, Jean was filling up gallon jugs of water to bring home for cooking and drinking for fear that the well on their property would run dry. Since the Feldmans rarely drew water from their tap, they didn't even have hot water for bathing. Overshadowing and further complicating these daily struggles were the Feldmans growing insecurities about their financial situation. They wondered where

they would go if they could no longer live independently in their own home.

The BCW team worked to solve these problems. They enlisted the help of Andy McWilliams, a former BCW leader and fourth year UNC medical student, who researched the well situation and found that their water supply was ample. The Feldmans began drawing water from their tap again, and the hot water heater was re-connected using a monetary donation from SHAC BCW.

The BCW team further coordinated with two other community agencies to help the Feldmans restructure their lives in ways that would allow them more independence. The Orange County Department on Aging helped secure personal aid services for Maury, thus enabling Jean to continue participating in her water aerobics class at the Chapel Hill YMCA. Project Compassion, a community agency of Chapel Hill, organized a group of UNC students to clean up the Feldmans' yard. While the students with Project Compassion worked in the Feldmans' yard, BCW team members helped Jean clean inside the home and organize the attic space.

SHAC BCW, working in unison with local organizations, serves as an example of how a multidisciplinary approach to community problem-solving can improve the lives of people like the Feldmans. Before SHAC BCW became involved, Jean felt that the challenges she faced made the Appalachian Trail feel like a warm-up. She and her husband are grateful that their SHAC BCW team will continue to help them find more ways to connect to a broader array of healthcare and community services and to support them in their goal to live independently.

# Health, Housing, and Helping Build a Better Tomorrow

by Edward Jernigan

**M**arlene Drummond was smiling. Standing in the doorway of her new home, she talked about the experience of working side-by-side with SHAC volunteers to construct her house—"It was so wonderful. I was so happy!"

After more than 600 hours of work by UNC health sciences students, the home for her and her family was complete in the Fairview neighborhood of Hillsborough. The culmination of a long-time partnership between Habitat for Humanity of Orange County, University Presbyterian Church and SHAC, the home dedication in April of 2008 demonstrated one of the many ways that SHAC volunteers work extends beyond the clinic walls.

SHAC has partnered with the Habitat for Humanity of Orange County (HHOC) for the past five years, working to satisfy the HHOC mission: "To help families in need build and own quality, affordable homes."

"Health does not exist in a vacuum and well being can not be achieved without a safe place to live," Lindsey Bach (SHAC Co-Director) points out; "At SHAC, we try to care for the many different health needs of our community members, including adequate housing."

The collaboration between SHAC and Habitat for Humanity of Orange County was established with four primary goals: to build at least one house a year to benefit families of need in Orange County; to provide a means for students to donate their time and effort to a non-academic area; to bring students from all of the UNC Health Affair Schools to serve to the community; and to educate students about affordable housing

and home safety in the area. In the past five years, this partnership has provided enormous benefit to students and the families they have worked to serve.

"Working with Habitat gives me the chance to become part of something bigger than me and my schoolwork," volunteer, and second year medical student, Jordan Holmes says. "It is a lot of fun to build a house from the ground up, and there is a huge amount of satisfaction from seeing a completed house that I and my fellow volunteers helped build."

Student-volunteers do not work alone to build a Habitat house; they work side-by-side with the family to construct the home. Drummond explained to student volunteers that home-owners are expected to contribute significantly to their own home and those of others: "You have to complete 325 sweat equity hours; the first 125 are spent on other people's houses before you begin working on your own." The chance to work with the home-owner gives volunteers the chance to build a relationship with the person they are trying to help.

"Nothing compares to going to a house dedication and seeing the homeowner, whom I worked side by side with to build a house, move into their new home with their family...I still get emotional every time I see a deserving family being given the keys not only to a new home, but to a new life," Jordan Holmes remarks.

SHAC is committed to continuing to partner with Habitat for Humanity of Orange County and other community organizations to continue to support the whole patient—both within and outside the clinic walls.



Marlene Drummond

# *The Gift of those “aha” moments:* Sitting Down with Laura Nasir, Alumna and Faculty Advisor to SHAC

by Sally Wood and Julie Hamra

We recently had the pleasure of sitting down with Laura Nasir, a Clinical Assistant Professor at the UNC School of Nursing and a Nurse Practitioner (NP) at the Caswell County Health Department Family Practice. As a key member of the SHAC Faculty Advisory Board, Professor Nasir is used to talking with students about their experiences at SHAC.

We were especially honored to be able to talk with her, as it is very rare that we are able to sit down with UNC faculty who are also alumni of SHAC. As a nursing student (1996-1997) and during her NP program at UNC (2000-2001), Professor Nasir volunteered with the SHAC medical clinic: she measured blood pressure, gave immunizations, organized the clinic flow of patients, and cared for patients as a member of the medical team. “The clinic was a natural draw,” she said, as she told us that her initial interest in healthcare was to work with underserved communities. SHAC provided her with the experience to apply her nursing skills in a primary care clinic—something that she was unable to do in the hospital as a student. When she came back to volunteer as an NP student, she gained confidence and the “realization that I had gathered skills to be comfortable with patients.”

When we asked her about how SHAC had shaped her career, she told us that she found that the optimistic atmosphere of SHAC helped her realize that working with underserved populations was a valuable area of practice. Her experience at SHAC seemed to reaffirm her goals of working with an underserved population. In addition, working with medical students, public health students, other nursing students and social work students at SHAC instilled a belief that interdisciplinary care should be the norm.

It is this same interdisciplinary nature of SHAC that continues to so greatly contribute to students’ educations. Every Wednesday night, she said, students have the opportunity to “share resources and learn about each other’s strengths.” Indeed, she said, “SHAC is one of the few places where [students from all the health professional schools] are able to work together.” This teamwork produces “aha” moments at SHAC where lessons from the classroom become clear amidst working together to reach a common goal of improving community health.

Together with SHAC’s interdisciplinary nature, the student leadership and level of passion in caring for patients makes SHAC unique as a free clinic, said Professor Nasir. With students from many different schools working together for a completely student-run organization, there is a special belief at SHAC – “that we can make a difference.”

As student leaders, to hear such enthusiasm, appreciation, and passion for the unique qualities of SHAC was inspiring. We often become consumed with the functional details of SHAC and lose sight of the “aha moments” at SHAC that Professor Nasir talked about. It is advisors like Professor Nasir that really bring to life the special belief that “we can make a difference” together at SHAC while reminding us that SHAC can have lifelong influences on our futures as healthcare providers.

We sat down to talk with Professor Nasir about her role as a SHAC faculty adviser. But, we came away with an “aha” moment of our own—enlightened, holistic motivation and appreciation for SHAC.

*Many thanks to Professor Nasir for the time you spent with us and for your continued dedication to SHAC.*

# Native Health Initiative Internship: Summer 2008

by Lee Lowery, Ginger Jacobs, and Cheryl Boone

Since 2004, Native Health Initiative (NHI) has worked to address health inequities through serving others, building community capacity, undoing the power structures of racism and colonialism, empowering youth, and bringing Tribal leaders and health professional students together to address causes of sub-optimal health in our indigenous communities.

During the summer of 2008, NHI sent 12 undergraduate and graduate students from 4 states and 3 countries, to 3 different American Indian communities in North Carolina. These students spent 5 weeks working as interns on a number of projects within these communities. During this time, the students were able to immerse themselves in indigenous culture by living

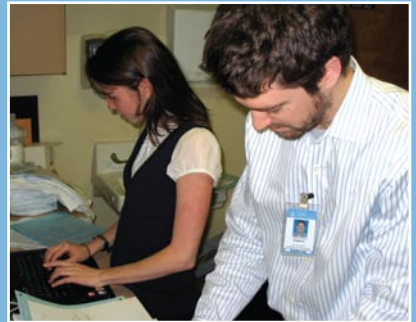
and working with community members. They were also able to participate in and develop programs that they believed would benefit the overall physical, mental and social health of these communities.

Students were able to work with a home health agency to learn more about community elders. They were able to shadow American Indian physicians to learn more about the particular health needs of the community. Students were encouraged to design projects, such as developing health awareness pamphlets for community members. By the end of the summer, the NHI interns walked away with a better understanding of indigenous people and a better understanding of themselves.

## SHAC Returns to Durham: HIV Prevention and Education

by Chris Dibble and Courtney MacKuen,  
Co-Founders of SHAC HIV at Lincoln

Thirty years after the closing of the SHAC Durham clinic, SHAC has returned to Durham. Durham County has one of the highest rates of HIV infection in the state, and there is currently little local funding and infrastructure to combat the pandemic. In response to this need, SHAC HIV Services started offering free testing and counseling at Lincoln Community Health Center on Fayetteville Street in August of 2008. Founded with help from the UNC Infectious Disease department, the Albert Schweitzer Fellowship, and the weekly SHAC HIV Clinic, the Lincoln Clinic embodies the SHAC spirit. With volunteer counselors from UNC Schools of Medicine, Social Work, Public Health, Nursing, and Pharmacy, this clinic is a collaboration of diverse student efforts. The Lincoln Clinic operates 5pm to 8pm on the first and third Tuesdays of each month and provides free, rapid, confidential testing with pre- and post-test counseling. Now, with services at the Lincoln Clinic and the Carrboro clinic, SHAC HIV Services are offering more crucial preventative health services than ever before.



# Spotlight on a Specialty Clinic: SHAC's Dermatology Clinic

by Daniel Schneider, Sonya Adams, and Julian Willoughby

It all started three years ago when Hallam Gugelmann, now a fourth year UNC medical student, discovered a community need while volunteering at Carrboro Community Health Center during the summer after his first year of medical school. The community physicians indicated that their patients, most of whom did not have health insurance or received Medicare or Medicaid, did not have access to dermatology services.

Hallam went to work. He partnered with Dr. Craig Burkhardt and Dr. Luis Diaz of UNC's Dermatology Department. Together, they designed a monthly dermatology clinic with medications and pathology services provided at no cost by UNC's Department of Dermatology. Furthermore, Dr. Burkhardt and Dr. Diaz arranged for the patients with complicated dermatology problems to be seen by the joint UNC/Duke Dermatology Conference.

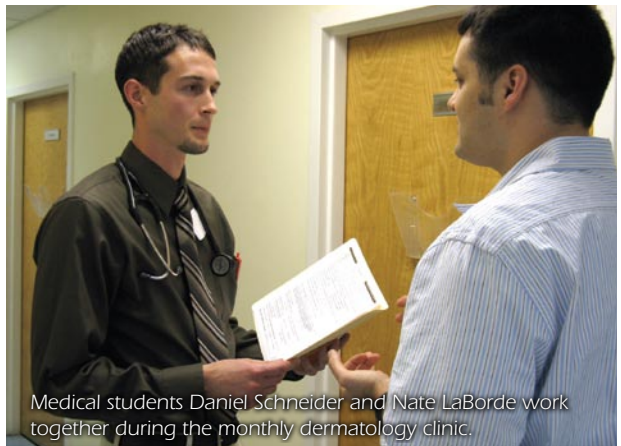
"Dr. Diaz was very intent on providing care for the state's indigent population, who face insurmountable barriers in their attempts to obtain dermatology services," said Hallam. After all the hard work, SHAC's first specialty clinic debuted in 2005—incorporating both the service and teaching aspects of SHAC's mission and expanding the services that SHAC provided.

Ever since then, on the third Wednesday of every month, dermatologists and medical students work together to treat a variety of skin conditions from acne to skin cancer. As the only free dermatology clinic in Orange County, this clinic continues to provide valuable services that are otherwise unavailable to an underserved population, thereby preventing dermatologic emergencies like skin cancer and skin infections.

In addition, the interaction between physicians and medical students continues to fulfill SHAC's mission of collaborative learning. This clinic creates a unique opportunity at SHAC by providing students with experiences working in a focused specialty. Dr. Bradley Merritt, one of the dedicated physician volunteers, said, "The SHAC Dermatology clinic gives first and second year medical students an idea about the type of care that dermatologists provide. Residents are able to refine their decision making skills and teach medical students, which helps solidify a developing knowledge base."

So, three years later, the dermatology clinic has proved to be a critical, sustainable part of SHAC: the appointments continue to fill up months in advance and, with the continued help of UNC's Department of Dermatology, physicians and students work together to provide a much needed service.

"The Dermatology Clinic has been a remarkable addition to SHAC," says Brian Zeithaml, SHAC's Co-Director. "I am confident it will serve as a model for future specialty clinics as SHAC continues to expand to serve our community."



Medical students Daniel Schneider and Nate LaBorde work together during the monthly dermatology clinic.

# A New Start at HomeStart: A Health Education Program Begins

by Shelby Addison

This year, in addition to continuing to serve Chapel Hill and the surrounding area through involvement in local health fairs, diabetes clinics and Club Nova, volunteers of SHAC Community Outreach have started collaborating with Dr. Patricia Lally, a local pediatrician, to develop a health education program for the women and children living at HomeStart, a homeless shelter in Chapel Hill. Because homeless women and children often lack access to healthcare and the vast majority of them do not have primary care physicians, this population has been identified as one especially in need of health education.

Each month SHAC volunteers prepare the curriculum and deliver a fifteen minute lesson at the shelter's house meeting. Topics cover a broad spectrum of health-related issues, ranging from nutrition, exercise and oral hygiene to effective parenting and communication skills. When appropriate, lessons are designed to include both the mothers and their children. A special effort

is made by volunteers to create an interactive learning environment with an emphasis placed on skill-building activities.

Like other projects coordinated by SHAC Community Outreach, the HomeStart health education program attracts volunteers from a variety of professional schools including medicine, nursing, public health and social work. The diverse group of volunteers benefits from the opportunity to employ and further develop patient education skills that are useful in all health professions. Dr. Lally, who is currently working to complete her Masters in Public Health in Maternal and Child Health, serves as the primary advisor and community liaison for this project.

Although the HomeStart health education program is a new endeavor for SHAC Community Outreach this year, the long-term goal is for this project to become a sustainable program. SHAC hopes that this curriculum, in addition to serving as a prototype for future years, will function as a model for similar programs at other shelters.



Kaitlyn Bailey, a second year medical student, checks the blood pressure of a woman attending the Nuestra Fiesta de la Salud (Our Health Fair), a health fair organized by El Centro Hispano. At the fair, SHAC volunteers also measured the height and weight of attendees to calculate Body Mass Index (BMI).

# New and Exciting: Medical Clinic Updates

## Reinventing SHAC's Pharmacy

Kathryn Merkel, a third year student at the UNC Eshelman School of Pharmacy and one of the directors for SHAC's Clinic Pharmacy, and other pharmacy students recently initiated a retrospective review of prescriptions written for SHAC's patients. They worked with faculty to update and revise SHAC's list of available drugs to better fit the needs of SHAC's patient population, and the students conducted a chart review to analyze the medical problems most commonly seen and the drugs prescribed at SHAC. Through this research, they were able to streamline inventory in the free formulary to accurately reflect the needs of SHAC's patients and the judgments of the physicians. This updated formulary will result in better care for SHAC's patients and more efficient management for the care-team!



Omar Awan, a first year medical student, performed a hearing test on a SHAC patient during the Winter Well Child Clinic.

## Caring for Kids at our Well Child Clinics

With the help of more than 80 medical, nursing, dental, social work and pharmacy students, and guidance from 12 UNC physicians, over 110 children were seen at SHAC's Well Child Clinics this year. In addition to the summer and fall clinics, a new winter clinic was offered to meet the growing demand for sports and school

physicals—40 children were seen at this clinic alone! These clinics provided vision and hearing screenings, physicals, dental fluoride treatments and vac-



Fourth year medical student Jeanne Rittschof smiles with her patient after a Well Child Clinic visit.

cines among other services. Over 80 vaccines were given during these clinics to ensure better health for children in the future. In addition, volunteers read to and provided books for patients as part of the nationwide "Reach Out and Read" physician initiative. Volunteers provided education about health insurance options for children and applications for Medicaid, S-CHIP and state health insurance programs. A special thanks to Dr. Julie Byerley, Dr. Christy Anderson, Dr. Richard Gugelmann, Dr. Wally Brown, Dr. Jessie Stewart, Dr. Mike Steiner, Dr. Patricia Jones, Dr. John Meier, Dr. Jimmy Wallace, Dr. Kenya McNeal-Trice, Dr. Andy Babcock and Dr. Mohan Chilukuri who generously donated their time to the Well Child Clinics.

## Finding a "Medical Home" for Our Patients through a New Referral System

Recognizing that many of SHAC's patients do not have a primary care physician and cannot afford to regularly visit a physician, SHAC and Piedmont Health Services have partnered to ensure that SHAC patients have the opportunity to establish a "medical home" within a large and often intimidating health system. If a patient



Second year medical student Mia Yang and Dr. Christy Anderson, a pediatric resident at UNC Hospitals, discuss the medical plan for a SHAC patient during clinic.



Third year medical student Shereen Alavian guides second year medical student Fatima Bangura through the process of writing a summary of the medical history and physical for a patient.

seen at SHAC requires care for a chronic illness like diabetes or high blood pressure, SHAC's Continuity of Care Coordinators communicate with Amy Nayo at Carrboro Community Clinic (a Piedmont Health Services clinic) to find them a primary care provider. If the patient lives in Orange, Alamance, Caswell or Chatham county, Ms. Nayo is able to match the patient to a primary care doctor within the Piedmont Health Services' network of community clinics. With the assistance of a community health care grant, care for these patients is provided at a reduced rate according to a sliding payment scale. This collaboration between SHAC Coordinators and Piedmont Health Services provides underserved patients the opportunity for a personal, continuous relationship with a physician and the opportunity for greater health benefits associated with strong physician-patient relationships.

## A New Vision

With the help of UNC's Ophthalmology Department, second year medical students Emily Roemer and Anna Berry have designed a new specialty clinic—SHAC's Ophthalmology Clinic! Medical students, after completing ophthalmic equipment training, are able to work with ophthalmologists to provide basic and comprehensive ocular exams, treatment of some acute problems, and screenings for visual acuity, macular degeneration, glaucoma, diabetic retinopathy, and cataracts. "It is essential to identify degenerative eye diseases early to be able to effectively slow their progression," Emily Roemer says, "and we are able to do just that at our clinic." Referrals to UNC Ophthalmology are provided if more thorough medical management and evaluation is needed. Faculty adviser Dr. Maurice Landers of the UNC Department of Ophthalmology has been instrumental throughout this process and

continues to provide his expertise as the clinic begins. In addition, Dr. Landers along with Wendy Marbury, a member of the Ophthalmology Department at UNC, provided a generous donation which allowed the purchase of new ophthalmic equipment that will secure the future of the clinic. Thank you to Dr. Landers and Ms. Marbury and to the UNC Ophthalmology Department for helping SHAC to continue to meet the diverse needs of the community.



(From L to R) Dr. Isaac Porter, Dr. Graham Lyles, Anna Berry, Emily Roemer, Dr. Maurice Landers, and Thanh-Thu Tran. A generous donation from Dr. Landers and Wendy Marbury of the UNC Ophthalmology Department allowed for the purchase of new ophthalmology equipment for SHAC.

# Service As a Way of Life: Dr. Adam Goldstein reflects on 17 years of service with SHAC

**Adam Goldstein, MD, MPH** is a Professor of Family Medicine at the University of North Carolina School of Medicine. He joined the Family Medicine Department in 1993 and has volunteered as SHAC's Faculty Director for over fifteen years. He recently retired from this position, but continues to advise and volunteer with SHAC.

**When did you begin volunteering at SHAC clinic? When did you become co-director?**

AG: I began volunteering for SHAC in 1992. I became Director in 1993, and in 2000, Dr. Beat Steiner joined me as a Co-Director.

**Why did you start volunteering at SHAC's clinic? Why do you continue volunteering at SHAC?**

AG: I started volunteering at SHAC because I had participated at my own medical school in helping start a homeless clinic as a resident, and I saw in SHAC what I perceived as an amazing clinic doing amazing things. The students have always been altruistic and willing to serve, learn and teach. I find this inspiring.

**How have your experiences at SHAC shaped your career as a physician?**

AG: I have learned from SHAC that as much as I give, I receive much more. The relationships, the service, the learning--I received all these gifts from working with SHAC students, clients and community members over the years. I am more compassionate as a result, and SHAC always reminds me that one's vision drives the end product.



**UNC Family Medicine physicians work very closely with SHAC, and SHAC would not be possible without them. As you know, SHAC serves an underserved population. What can physicians learn at SHAC that they cannot learn in the standard clinic? How does this help primary care physicians and residents?**

AG: SHAC teaches physicians of all ages how to

work together in teams, how to respect the contributions that each of us makes to patient care in a culturally appropriate and compassionate way, and all the while maintaining excellence in care. SHAC is a model that says, no matter how well you take care of people's health care problems, if you don't take action in the community, you will not achieve your full potential.

**You were a co-director at SHAC for many years, and, during your leadership, there were significant changes made to SHAC. What were the most significant changes?**

AG: The willingness and ability of SHAC to change is what has always appealed to me greatly. The changes were profound for the organization, its patients and the community. These changes started with becoming an Interdisciplinary clinic, involving 7 health affairs schools. SHAC regained its focus on the community in the late 1990's, taking on one amazing community project after another, from Mobile SHAC [now, SHAC Beyond Clinic Walls] to Health Screening Fairs to the Native Health Initia-

tive. We also made SHAC an institutional commitment for faculty service in our Family Medicine Department. The most significant change involved a grant Dr. Steiner and I wrote with students that allowed SHAC to initiate the Health for Habitat project. Over 7 homes have now been completed. Simultaneously, we helped SHAC start a serious annual Endowment and Fundraising campaign. This effort has helped put SHAC on solid financial footing.

**What were the motivations for these changes?**

AG: The motivations for these changes were twofold: 1) To help make SHAC more secure internally- administratively and financially. For SHAC to survive year after year in the 21st century, with high annual student leader turnover, this is a necessity. 2) SHAC's ability to remain true to its purpose- serving the community-demanded not only excellent clinical services, but excellent outreach.

**During your time as co-director, the Dermatology clinic was added to SHAC. How do you view this expansion of services? Did you ever feel that SHAC would grow as much as it has? In what ways do you envision SHAC expanding in the future?**

AG: Specialty clinics such as Dermatology are a new innovation at SHAC that can really meet some unmet needs. Untreated skin problems in indigent patients are significant. Remembering that SHAC is not a continuity clinic, but a triage and referral clinic, and finding academic partners as committed to community service as Family Medicine as been for three decades was not and is not easy. Student leaders have turned down several requests in the past for such clinics, and

the students will need to revisit it in the future. They will always need to ask: does the proposed new service truly benefit patients, can students have a meaningful learning experience, and is the Department proposing the service committed to SHAC for at least 5 years? IF the answer to all three is yes, then expansion is indicated if the students have sufficient resources, including volunteers.

**What is the benefit of the interdisciplinary nature of SHAC?**

AG: The world is interdisciplinary, health care is interdisciplinary, and learning should also occur that way. It is wonderful for patients, providers and students.

**What is the role of SHAC in the education of medical students, nursing students, public health students, etc?**

AG: SHAC is a central learning experience for almost all health affairs students- they may not remember pharmacology or biochemistry lectures, but they will always remember patient care experiences at SHAC: taking care of a young child with an infection, a women with a breast mass, a male who is depressed, a female with out of control high blood pressure. The students take ownership, and that ownership stays with them as future health care leaders.

**What makes SHAC unique as a free clinic serving an underserved population?**

AG: SHAC is unique because nowhere else exists in all of medicine where students achieve so much, work so hard, for so little recognition and for so little personal gain. They achieve while exhibiting the highest values of compassion, humility, innovation and excellence.



**SHAC** is indebted to the Department of Family Medicine at UNC for their unwavering commitment and support for SHAC for over 30 years. We thank all Family Medicine physicians who volunteer at SHAC from the bottom of our hearts. We also thank those physicians from UNC's Pediatric, Obstetrics and Gynecology, and Medicine Departments who dedicate their time and energy to SHAC.

# Volunteer Profiles: In the Dental Clinic

Students and faculty of UNC's School of Dentistry provide fillings, extractions, and other urgent dental care during the 20 free dental clinics that are held each semester. A previous volunteer and UNC School of Dentistry alumnus, Brandon Burke, shares his thoughts on his experience at the clinic. Dr. Pimenta, a Clinical Professor, is also profiled as a faculty volunteer for the UNC School of Dentistry clinics.



*Brandon Burke graduated from UNC's School of Dentistry in the spring of 2008; as a dental student he volunteered at SHAC and eventually became one of the student coordinators for the clinic. He is now a first year Orthodontic Resident at Virginia Commonwealth University's School of Dentistry.*

## **When and why did you start volunteering at the SHAC Dental clinic?**

BB: I started volunteering during my first year of dental school (2004-2005) because I thought it would be a good experience to help those in need of free dental care and also gain further dental experience. During my first year, I volunteered at three clinics. When I became a coordinator, I volunteered at

approximately 20 clinics during my 2nd and 3rd years of dental school.

## **How did your experience affect your education and what did it add to it?**

BB: Volunteering at Dental SHAC allowed me to put into practice that which I had been taught in the classroom and also to learn the importance of serving those who are less fortunate and underserved.

## **What are some of your favorite memories from the dental clinic?**

BB: I really enjoyed my interactions with underserved patients; they seemed to really appreciate the care we provided. I also loved the time spent with my classmates, friends, and professors outside of the classroom.



*Originally from Brazil, Dr. Luis Andre Pimenta has worked at UNC since 2004 and is currently a Clinical Professor for UNC's School of Dentistry. He has volunteered his time and expertise at SHAC's dental clinic for the past two years.*

Dr. Pimenta maintains that the volunteer opportunities at the clinic “bring reality” to dental students, often in contrast to the ideal situations presented in the classroom.

He also believes that volunteering at the clinic exposes students to the idea of public health and prevention of oral disease—another important part of their education. As the Course Director for two courses about prevention of oral disease, Dr. Pimenta is excited about the opportunities for the students at the clinic to talk with patients about prevention and health promotion. Preventing the dental problems that necessitate visits to this clinic is a main focus of his, and he works to impress upon student volunteers the importance of prevention. Together, Dr. Pimenta

and his students provide not only treatment, but also education to the patients in an attempt to prevent future disease.

The opportunity for dental faculty and students to work together in a non-academic setting, as colleagues and advisors, is another benefit of the clinic, Dr. Pimenta adds. “I think the way that they see us is different—not as faculty or a professor,” Dr. Pimenta says. “This allows for a unique interaction in the clinic.” Both the students and the faculty share a common goal of helping the underserved and form a bond in their common goal.

Dr. Pimenta summarizes his reflection by stating that the dental clinic does “important work,” that the quality of the services provided is excellent, and that the goals of the clinic are generally attained. His fondness for the dental clinic is expressed in his volunteer commitment to SHAC. It is this commitment, alongside other faculty and students who share the same passion for service, that allows the dental clinic to continue doing such “important work.”

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