Partnership Brings Health Clinics to Schools

Meghan Youker

Reprint OMAHA (KPTM) — The numbers are staggering: 82,000 kids in Douglas and Sarpy Counties don't have a regular medical provider, and more than 20,000 need behavioral health intervention or treatment, but don't have access to quality care. Both figures are the targets of a new partnership, reaching out to families in a whole new way.

When kids at six Omaha Public Schools returned to class many changes greeted them. "With the addition of the health center we'll be able to provide medical services across the entire spectrum," said Melissa Comine, principal of Bellevue Elementary.

Building Bright Futures is investing $1.5 million to launch new school–based health centers. "We hope that we will cover up to 35,000 students," said Executive Director John Cavanaugh.

The goal is to help close the student achievement gap east of 72nd Street. "What are the things which impair students' ability to learn and what we found was that health care is number one," Cavanaugh said. Leaders say the problem is access, whether it's because of cost, proximity or transportation. "For a long time we understood and knew that there was a need for school–aged kids to have access to health care early so that we can provide prevention, education and intervention," said Richard Brown, CEO of the Charles Drew Health Center.

The centers will be staffed with nurse practitioners and other medical professionals who can immediately treat and diagnose illness, monitor chronic conditions and offer services like counseling, immunizations and physicals. "Clinic personnel will be able to determine if it's an illness that they need to be staying home for or be at school and they will be communicating back and forth with the primary care provider," said Andrea Skolkin, CEO of One World Community Health Centers.

If a child doesn't have their own doctor, staff will also help families find one. Leaders hope in the end, each student will get the care they need to succeed in the classroom. "There's no better place to go but to the school. That's the one place where every child has to be is the school, so that's one place where we can grab them," Comine said.

The pilot program was made possible through private donations. Building Bright Futures is hoping to expand it in the future.

The Charles Drew Health Center will operate the three clinics in North Omaha, while One World Community Health Centers will staff the other three in South Omaha. OPS families can learn more about the health centers by calling their child’s local school.

The health clinics are open to students in those schools, their minor siblings, and to kids in nearby buildings. They will accept health insurance and Medicaid and a sliding payment scale will be available depending on family size and income.
Helping Kids Deal With Bullies

Each day, 10-year-old Seth asked his mom for more and more lunch money. Yet he seemed skinnier than ever and came home from school hungry. It turned out that Seth was handing his lunch money to a fifth-grader, who was threatening to beat him up if he didn't pay.

Kayla, 13, thought things were going well at her new school, since all the popular girls were being so nice to her. But then she found out that one of them had posted mean rumors about her on a website. Kayla cried herself to sleep that night and started going to the nurse's office complaining of a stomachache to avoid the girls in study hall.

Unfortunately, the kind of bullying that Seth and Kayla experienced is widespread. In national surveys, most kids and teens say that bullying is intentional tormenting in physical, verbal, or psychological ways. It can range from hitting, shoving, name-calling, threats, and teasing becomes hurtful, unkind, and constant, it crosses the line into bullying and needs to stop.

Bullying is intentional tormenting in physical, verbal, or psychological ways. It can range from hitting, shoving, name-calling, threats, and teasing becomes hurtful, unkind, and constant, it crosses the line into bullying and needs to stop. Mocking to extorting money and treasured possessions. Some kids bully by shunning others and spreading rumors about them. Others use email, chat rooms, instant messages, social networking websites, and text messages to taunt others or hurt their feelings.

His important to take bullying seriously and not just brush it off as something that kids have to "tough out." The effects can be serious and affect kids' sense of self-worth and future relationships. In severe cases, bullying has contributed to tragedies, such as school shootings.

Why Do Kids Bully?

Kids bully for a variety of reasons. Sometimes they pick on kids because they need a victim — someone who seems emotionally or physically weaker, or just acts or appears different in some way — to feel more important, popular, or in control. Although some bullies are bigger or stronger than their victims, that's not always the case.

Sometimes kids torment others because that's the way they've been treated. They may think their behavior is normal because they come from families or other settings where everyone regularly gets angry, shouts, or calls names. Some popular TV shows even seem to promote meanness — people are "voted off," shunned, or ridiculed for their appearance or lack of talent.

Signs of Bullying

Unless your child tells you about bullying — or has visible bruises or injuries — it can be difficult to figure out if it's happening. But there are some warning signs. You might notice your child acting differently or seeming anxious, or not eating, sleeping well, or doing the things that he or she usually enjoys. When kids seem moodier or more easily upset than usual, or when they start avoiding certain situations, like taking the bus to school, it may be because of a bully.

If you suspect bullying but your child is reluctant to open up, find opportunities to bring up the issue in a more roundabout way. For instance, you might see a situation on a TV show and use it as a conversation starter, asking "What do you think of this?" or "What do you think that person should have done?" This might lead to questions like: "Have you ever seen this happen?" or "Have you ever experienced this?" You might want to talk about any experiences you or another family member had at that age.

Let your child know that if he or she is being bullied — or sees it happening to someone else — it's important to talk to someone about it, whether it's you, another adult (a teacher, school counselor, or family friend), or a sibling.

Helping Kids

If your child tells you about a bully, focus on offering comfort and support, no matter how upset you are. Kids are often reluctant to tell adults about bullying. They feel embarrassed and ashamed that it's happening. They worry that their parents will be disappointed. Sometimes kids feel like it's their own fault, that if they looked or acted differently it wouldn't be happening. Sometimes they're scared that if the bully finds out that they told, it will get worse. Others are worried that their parents won't believe them or do anything about it. Or kids worry that their parents will urge them to fight back when they're scared to.

Praise your child for being brave enough to talk about it. Remind your child that he or she isn't alone — a lot of people get bullied at some point. Emphasize that it's the bully who is behaving badly — not your child. Reassure your child that you will figure out what to do about it together.

Sometimes an older sibling or friend can help deal with the situation. It may help your daughter to hear how the older sister she idolizes was teased about her braces and how she dealt with it. An older sibling or friend may also be able to give you some perspective on what's happening at school, or wherever the bullying is happening, and help you figure out the best solution.

Take it seriously if your hear that the bullying will get worse if the bully finds out that your child told. Sometimes it's useful to approach the bully's parents. In other cases, teachers or counselors are the best ones to contact first. If you've tried those methods and still want to
speak to the bullying child's parents, it's best to do so in a context where a school official, such as a counselor, can mediate. Many states have bullying laws and policies. Find out about the laws in your community. In certain cases, if you have serious concerns about your child's safety, you may need to contact legal authorities. 

Advice for Kids
The key to helping kids is providing strategies that deal with bullying on an everyday basis and also help restore their self-esteem and regain a sense of dignity. It may be tempting to tell a kid to fight back. After all, you're angry that your child is suffering and maybe you were told to "stand up for yourself" when you were young. And you may worry that your child will continue to suffer at the hands of the bully. But it's important to advise kids not to respond to bullying by fighting or bullying back. It can quickly escalate into violence, trouble, and someone getting injured. Instead, it's best to walk away from the situation, hang out with others, and tell an adult.

Here are some other strategies to discuss with kids that can help improve the situation and make them feel better:

- **Avoid the bully and use the buddy system.** Use a different bathroom if a bully is nearby and don't go to your locker when there is nobody around. Make sure you have someone with you so that you're not alone with the bully. Buddy up with a friend on the bus, in the hallways, or at recess — wherever the bully is. Offer to do the same for a friend.

- **Hold the anger.** It's natural to get upset by the bully, but that's what bullies thrive on. It makes them feel more powerful. Practice not reacting by crying or looking red or upset. It takes a lot of practice, but it's a useful skill for keeping off of a bully's radar. Sometimes kids find it useful to practice "cool down" strategies such as counting to 10, writing down their angry words, taking deep breaths or walking away. Sometimes the best thing to do is to teach kids to wear a "poker face" until they are clear of any danger (smiling or laughing may provoke the bully).

- **Act brave, walk away, and ignore the bully.** Firmly and clearly tell the bully to stop, then walk away. Practice ways to ignore the hurtful remarks, like acting uninterested or texting someone on your cell phone. By ignoring the bully, you're showing that you don't care. Eventually, the bully will probably get bored with trying to bother you.

- **Tell an adult.** Teachers, principals, parents, and lunchroom personnel at school can all help stop bullying.

- **Talk about it.** Talk to someone you trust, such as a guidance counselor, teacher, sibling, or friend. They may offer some helpful suggestions, and even if they can't fix the situation, it may help you feel a little less alone. Remove the incentives. If the bully is demanding your lunch money, start bringing your lunch. If he's trying to get your music player, don't bring it to school.

Reaching Out
At home you can lessen the impact of the bullying. Encourage your kids to get together with friends that help build their confidence. Help them meet other kids by joining clubs or sports programs. And find activities that can help a child feel confident and strong. Maybe it's a self-defense class like karate or a movement or other gym class. And just remember: as upsetting as bullying can be for you and your family, lots of people and resources are available to help.
Clarification and Retraction on EIE – Omaha

Retraction from July NOAH: A article written by two of our students, Marisa Lewis and Anthony Negron, regarding the incredible work that the organization, Enough is Enough-(Omaha), has done in the community. Although the article was well-intended, the source was a national organization by the same name, and not the local chapter, headed by President & Senior Pastor of World Fellowship Christian Center John Voner, In the short time this pastor and church have been serving our community they have performed incredible work here in the North Omaha area. The EIE (Enough is Enough) program started, largely in response to the rise of gang violence and deaths that had occurred in this community, EIE-(Omaha) is worthy of recognition and the young people attempted to pay tribute to that fact. In sum, Pastor Voner and the local EIE are worthy of the kudos and this retraction is an attempt to ensure that this is the case. There will be future articles in the NOAH about other programs and community related programs that World fellowship Christian is sponsoring. Some people believe the role of the church is to provide spiritual nurture exclusively, World Fellowship Christian Center is one of those ministries that strive to meet not only the spiritual needs of the community but the total needs of its community and congregation.

Four out of five people wash their hands.* Talk to the fifth person.
STROKE
KNOW THE WARNING SIGNS
If you experience any of these symptoms, CALL 9-1-1 or your local emergency number immediately.

Weakness
Sudden loss of strength or sudden numbness in the face, arm or leg, even if temporary.

Trouble speaking
Sudden difficulty speaking or understanding or sudden confusion, even if temporary.

Vision problems
Sudden trouble with vision, even if temporary.

Headache
Sudden severe and unusual headache.

Dizziness
Sudden loss of balance, especially with any of the above signs.

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North Omaha, Why Should You “Ask Me 3”?  
Good Questions for Your Good Health
Phyllis Nsiah-Kumi, MD, MPH; Internal Medicine-Pediatrics, UNMC Physicians Baker Place Clinic

Introduction
As you read this, you might be asking yourself, “who are you?” and “why should I ask you anything?” So, I thought I’d tell you a little about me. While my last name may look scary, everyone calls me “Dr. Kumi” (pronounced “coo-mee”). I am a doctor at the Baker Place Clinic, and I take care of children (pediatrics) and adults (internal medicine) there.

I also do research about health literacy in minority communities. The goal of my work is to make sure that all patients are able to get and understand good, clear information about their health. Good communication between patients and their health care teams is important for good health.

QUICK QUIZ
Answer these quick questions about health information.

1. How interested are you in learning about health?
   a. Very interested
   b. Sort of interested
   c. Very uninterested

2. How easy is it to understand health information?
   a. A. Very easy to understand
   b. Sort of easy to understand
   c. Sort of hard to understand
   d. Very hard to understand

3. Who would you ask if you had an important health question?
   a. I would ask a doctor or nurse
   b. I would ask a friend
   c. I would ask a family member
   d. I would go to the internet or other information
   e. I would ask someone else

4. How well do you understand what your medical problems are?
   a. I understand very well
   b. I sort of understand

5. How well do you understand what you have to do to be as healthy as possible?
   a. I understand very well
   b. I sort of understand
   c. I don’t understand at all

6. How well do you understand why it is important for you to do these things?
   a. I understand very well
   b. I sort of understand
   c. I don’t understand at all

If you did not answer “a” to every question in the quiz, then there is more for you to learn about health literacy and taking charge of your health. Keep reading!

What is Health Literacy?
Health literacy is being able to read and understand information about your health, so you know how to take care of yourself and make good decisions about being healthy. It is one of the best ways to tell if someone will have good. It predicts health better than their age, income, whether or not they are working, how much school they have had, or the racial or ethnic group they belong to. So having health literacy is very important.

If you are reading this article, then you’re literate, but that is just part of what we are talking about. You also have to know where to get good health information. Then you have to understand it. Finally, you need to use the information to make good decisions about your health. And all of this is a process. It doesn’t happen all at once.

I have a problem: My patients often don’t ask me any questions.
Now, I know some people are not comfortable asking me questions. Last week, I had someone tell me “Dr. Kumi, doctors are like clergy. You do what they say and you don’t ask any questions.” I disagree. When you ask me questions, you give me the chance to help you learn more about your health.

I have recently seen a TV ad that says it well. A woman goes into a restaurant. She asks the waiter LOTS of questions. What do they serve? How is it prepared? Can she trade one side for another? Did the waiter go to such and such a high
school? You get the idea. She has a long list of questions. In the next scene, she is in a doctor’s office wearing a gown and sitting on an exam table. When the doctor comes in and asks her if she has any questions, she says “no.” Why is it so easy for that woman to ask so many questions about food but no questions about her health?

Health Information Can Be Very Confusing

We can all use some help with health information. If health information seems confusing to you sometimes, you are not alone! Asking questions will help you know how to get better (if you are sick) or stay well.

Now, I’m not saying we health professionals do it right every time. We have a very bad habit of using complicated medical words when simple words and everyday examples will do. So, if you don’t understand what we are saying, ask. And if we explain and it is still not clear, ask again. And if we are still not clear, ask someone else—but definitely ask.

The doctors, nurses and pharmacists that take care of you want to help you know:
- All you can about your health and medicines
- Why this is important for your health
- Steps to take to stay as healthy as possible

I Love it When my Patients Ask Questions!

There is lots of health information all around us. The internet, books, pamphlets, health care providers, family, friends, and neighbors. It is sometimes hard to know what information is true and what applies to you. One way to get good information is to ask your health care providers questions. I LOVE it when my patients ask questions. Even the hard ones. Even when I sometimes have to say, “I don’t know, but I will find out.” When patients ask questions, it tells me they want to learn more about their health so they can do all they can to be as healthy as possible. And I want to help my patients do all they can to be healthy.

So, Go Ahead: “Ask Me 3”

When you ask the first question, you find out the “diagnosis.”

When you ask the second question, you find out what tests you need to have or what medicines you need to take to be healthy. This is also known as the “treatment plan.”

And when you ask the last question, you find out what will happen if you don’t do what is suggested (follow the “treatment plan.”)

Who should ask the 3 Questions?

Everyone who wants to take better care of their health should ask these 3 questions.

When Should I ask the 3 questions?

When you see your doctor, nurse or pharmacist
When you get ready for a medical test or procedure
When you pick up your medicine

What if I ask and I still don’t understand?

Ask again!!!
Let your doctor, nurse or pharmacist know if you still don’t understand what you need to do.
You might say: “This is new to me will you please explain that to me one more time?”

At the end of every visit or talk with your health care provider, if you know the answers to the 3 questions, you know you are on your way to better health. All the best to you as you “Ask 3” every chance you get!

By the way, I hope this article was easy to understand. It is written at a fifth grade reading level. Health literacy experts suggest this reading level for all health information. If the information providers share is simple and clear, most patients can understand it.

You can ask Dr. Kumi health questions at: askme3omaha@gmail.com.

The national “Ask Me 3” Program is sponsored by the National Patient Safety Foundation and Partnership for Clear Health Communication. For more information about this program, ask your health care provider or visit http://www.npsf.org/askme3/index.php.
Five Steps to Safer Health Care

1. Ask questions if you have doubts or concerns.
   Ask questions and make sure you understand the answers. Choose a doctor you feel comfortable talking to. Take a relative or friend with you to help you ask questions and understand the answers.

2. Keep and bring a list of ALL the medicines you take.
   Give your doctor and pharmacist a list of all the medicines that you take, including non-prescription medicines. Tell them about any drug allergies you have. Ask about side effects and what to avoid while taking the medicine. Read the label when you get your medicine, including all warnings. Make sure your medicine is what the doctor ordered and know how to use it. Ask the pharmacist about your medicine if it looks different than you expected.

3. Get the results of any test or procedure.
   Ask when and how you will get the results of tests or procedures. Don’t assume the results are fine if you do not get them when expected, be it in person, by phone, or by mail. Call your doctor and ask for your results. Ask what the results mean for your care.

4. Talk to your doctor about which hospital is best for your health needs.
   Ask your doctor about which hospital has the best care and results for your condition if you have more than one hospital to choose from. Be sure you understand the instructions you get about follow-up care when you leave the hospital.

5. Make sure you understand what will happen if you need surgery.
   Make sure you, your doctor, and your surgeon all agree on exactly what will be done during the operation. Ask your doctor, “Who will manage my care when I am in the hospital?” Ask your surgeon, “Exactly what will you be doing? About how long will it take? What will happen after the surgery? How can I expect to feel during recovery? Tell the surgeon, anesthesiologist, and nurses about any allergies, bad reaction to anesthesia, and any medications you are taking.
About The Presenters:
Clayton Freeman, BA — Program Director, Alzheimer’s Association Midlands Chapter
Mary Bulford-Wilson, JD — Bulford Law Office
Nichelle Horton-Brown, MD — Endeveren Family Medicine

North Area Caregiver’s Support Group Meeting
3rd Tuesday of each month
6:00 - 7:00 pm
at the
Washington Branch Library
2868 Ames Avenue
Omaha, NE 68111

The group meets once a month. There is no charge to attend this group.

If you are a caregiver for an individual with dementia, please come and join the group.

The North Area Caregiver’s Support Group has continued to serve as consultants for this event.

Target Audience:
Families and caregivers of individuals with Alzheimer’s disease and other dementias, Nurses, Social Workers, Parish Nurses and Clergy.

Registration:
Registration is required, since a light dinner will be provided. RSVP by Thursday, September 9, 2010 at 402.502.4301.
Program fees:
$5.00 per individual
$25.00 for individuals receiving Continuing Education Units

Presentation Objectives:
- Identify community resources and services provided by the Alzheimer’s Association Midlands Chapter.
- Explain the difference between dementia and Alzheimer’s disease.
- Understand the basics of Alzheimer’s and other dementias.
- Identify how Alzheimer’s disease affects African-Americans.
- Explain the legal issues and documents involved in caring for an individual with Alzheimer’s disease or other dementia.

Continuing Education Credits:
Continuing Educational Units are provided by Iowa Western Community College, IBN provider number 6.
NE Nurses 2.4 CEU’s; IA Nurses .2 CEU’s; NE & IA Social Workers 2.0 CEU’s; NE & IA Facility Administrators 2.0 CEU’s; Care Staff Members of Assorted Disciplines 2 clock hours.

Make your reservation TODAY!
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Health Care and the Need for a Free Clinic

Omaha’s central city may not be as decayed or down-trodden as those in other urban areas, but the quality of life of a community can be measured by the quality of health care it receives. With one of the highest black unemployment rates in the nation for a city its size, Omaha should be doing better. And while individuals talk about an “affordable option,” the fact is, The uninsured rate and number of uninsured for blacks in 2008 were not statistically different from 2007, at 19.1 percent and 7.3 million nationally, and in Omaha according to UNOs Center for Public Affairs Research, that figure is 22% (we have to believe that this figure is conservative and low since the sampling methods when it comes to the black community are always skewed).

The National Association of Free Clinics defined free clinics as ones that are volunteer based, safety net health care organizations that provide a range of medical, dental, pharmacy, and or behavioral health services to economically disadvantaged individuals who are predominantly uninsured. DePaul (2009) documents that there are 8,692 free clinics nationwide and 4,000 more that are unaccounted for.

It is clear then, that the concept of and conviction to a free clinic in Omaha’s urban core is an idea whose time has come. For a city its size, Omaha should be ashamed to treat its low income residents with such disdain-and-how-dare-you. Even Grand Island has one free clinic, and that can be compared with mega sized (by Nebraska standards) Omaha. One of the poorest cities in the nation, Corinth, Mississippi has a free clinic (“Helping Hands Free Clinic”), and the state of Louisiana sees the need, boasting 15 clinics statewide, 13 of them in New Orleans alone. Its not only about black and white, but also about rich and poor. One of the most financial stable cities in the nation, Providence, Rhode Island, has FOUR free clinics. Compare all this with the state of Michigan that boasts 42 free clinics.

Sure, its not just Omaha. Seth Doane reported in June of 2008 on a CBS Report that despite the rising unemployment rate, the places that are willing to help serve the uninsured are “few and far between.” A study by the University of Pennsylvania in 2009 found that only 123 clinics were located in areas defined by the federal government as being medically underserved, and that areas with clinics had lower percentages of minorities, higher median incomes and higher rates of home ownership. In other words, those who can afford health care still have free health care being offered, while those who don’t have insurance at all are being left out, once again.

The issue of race and class both impact upon black people at the same time. As I’ve written elsewhere, there are a lot of poor whites, but they ain’t po’ because they’re white! According to the Policy Institute in 2009, “Non-Hispanic whites make up two thirds of the population but less than half of the uninsured, and they are also more likely than any other race to have private insurance.”

According to an article by Tony Pugh of the McClatchy newspapers, “twice as many blacks ages 45 and older reported having trouble paying the mortgage or rent, having to cut back on medications, and twice as many reported losing a job.” It doesn’t take a rocket scientist to know that when you lose the job, you lose the insurance. And the future doesn’t look much better: Algernon Austin of the Economic Policy Institute says that the data bodes ill for the future of black workers, since many of them are using their retirement savings for health care, living expenses and supporting adult children.

A FREE CLINIC IN NORTH OMAHA:
FACTS AND FOUNDATIONS

So, there is a design and cycle to who is unemployed, how long and the impact of that unemployment on the quality of health care. But when it comes to black folks, its not just having a job, because most who work still as yet don’t have health insurance and cannot afford it.

Since that is the case, then there should be a response that is as direct and dire as the problem is. This is therefore a logical reason for a free clinic in the heart of North Omaha – not the fringe, not “nearby,” but in the heart of it. Why? Because poverty and the lack of transportation work hand-in-hand and accessibility is an important consideration.

If Omaha is the progressive city it claims and supposedly seeks to be, then these kinds of facts should be condemned and then corrected with the introduction and establishment of such clinics. The fact is, there are many more clinics in the south and midwest than on either coast (Nadkarni & Philbrick, 2005: p. 27).

Right here in Omaha I’ve noticed that clinics thrive in or near academic medical settings. Why? Because they can work hand in hand with the student populations. Since most free clinics are funded by donations from private individual and corporate philanthropy, what is Omaha’s excuse since this state boasts more millionaires per capita than any other state in the nation? With schools here stockpiled with interns
majoring in everything from medical sociology and human services to pre-med and public health, there should be a ready stock of volunteers ready to man a free clinic in North Omaha in exchange for college credits and/or experience.

The need and numbers justify such a clinic.

In North Omaha there are 4.2 women for every male between the ages of 18 and 44. There are more women than men who visit free clinics on a national level (60%). According to the American Journal of Medical Science (2005), there is a disproportionately high number of Hispanic and Blacks who visit free clinics, relative to their representation in the national population. Latinos represent 14% of the national population, but make up 19% of visitors to free clinics; Blacks make up 13% of the population but make up 22% of free clinic patients.

So with a free clinic in North Omaha, the city would be following a number of national normative patterns in terms of proximity to major hospitals (Creighton, UNMC, Immanuel, etc.), in terms of racial utilization, accessibility, addressing the transportation issue, and in regard to need and financial necessity.

Henri Frederic Amiel once said that, “In health there is freedom. Health is the first of all liberties.” When residents of North Omaha charge that they are being oppressed, neglected and denied certain rights, perhaps those in power, especially in the health field, should listen. It is health care, and access to it, that is a reflection of one’s quality of life. If Omaha is “the good life” as majority residents claim it is, then share it. Or pay the consequences down the road.

The views and information in this commentary are not necessarily those of the agencies that support and sponsor the publication of North Omaha Area Health—Editor Ira Combs RN

LUNG CANCER

kicks nearly twice as many American women as breast cancer each year.

KNOW the signs and symptoms of this disease.


MIDLANDS LGBT COMMUNITY NEEDS ASSESSMENT

ARE YOU LESBIAN, GAY, BISEXUAL, OR TRANSGENDER?

Do you live, work, and/or play in Nebraska?

If so, we’d like to invite you to participate in a research study looking at the experiences and health of LGBT people in and around Nebraska. The results may help LGBT organizations around the state to better address the needs of the community.

If you self-identify as Lesbian, Gay, Bisexual, or Transgender, are 19 or older and live in or near Nebraska, then you may be eligible.

Visit our website for more information and to take the survey.

app1.unmc.edu/lgbt

Participants can receive a gift card for taking this 30 minute online survey

Questions?
Email cfisherm@unmc.edu or jirwin@unomaha.edu

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E.I.E.
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