

Growing up in the small town of [REDACTED], I have had unique experiences that have given me a keen awareness of how limited our current understanding is of racial/ethnic health disparities. My family owns and operates a human service organization that provides services for families in southeastern, NC. The organization offers a variety of community based programs and support services for citizens with social/behavioral issues, substance abuse problems, and/or mental/physical disabilities, with the primary goal of building healthy individuals and strong family units. Over the years it has seemed that there is a greater proportion of minority populations to need and rely upon these resources when compared to their counterparts. Recognizing this distinction early in my childhood created a sense of curiosity in gaining a better perception of why these disparities occur and understanding the future implications this may have for minority and low-income populations.

While an undergraduate student, I was involved in various research projects that ranged from Organic Chemistry to Epidemiology in an effort to become more exposed to research in the United States and abroad. Through these experiences, I have grown to realize the importance of clinical research and how critically the work can impact society. As a third year medical student at the University of Pittsburgh School of Medicine (UPSOM), I have also been able to recognize the significance of public health within the medical field. While clinical practice is indispensable, obtaining knowledge about how medicine functions among populations is crucial to truly understanding how race, socioeconomic status, health behavior, and education affects each individual patient and society at-large.

Through many years of watching my mother counsel adolescent mothers, watching my family work with impoverished citizens of my community, and later personally having the opportunity to work with and mentor young women, I have been able to refine and develop my growing research interests in Women's Health. As a participant of the Dean's Summer Research Program in 2011, my research pertained to understanding if a history of unintended pregnancy mitigated sterilization regret among women. This study used national, cross-sectional data collected by the 2006-2008 National Survey of Family Growth. The study sample included women ages 15-44 who had previously undergone tubal sterilization. A multivariable logistic regression model was used to examine the relationship between a history of unintended pregnancy on desire for reversal while controlling for socio-demographic confounders. We found that among women who had undergone tubal sterilization, there was no statistically significant association between a history of unintended pregnancy and post-sterilization regret. Our study suggested however, that having an unintended pregnancy makes women more likely to pursue a sterilization procedure but does not ensure that she will ultimately be satisfied with this decision.

The Scholarly Project, a 4-year longitudinal research requirement for all medical students at UPSOM, allowed me to further delve into Women's Health and health disparity related research. My project currently focuses on understanding the relationship between

self-perceived pregnancy intent via qualitative and quantitative measurements among low-income gravid women. Though pregnancy intention is difficult to assess quantitatively, the London Measure of Unintended Pregnancy (LMUP) is a new measure of pregnancy planning/intention that attempts to capture various facets of pregnancy intention. While the LMUP has been validated among British women, it is not clear if this measure accurately captures pregnancy intention among low-income black and white women in the US. This work will provide insight about the nuances and salient dimensions of pregnancy intentions in our population and determine whether these constructs vary by race. Furthermore, it will help establish if the LMUP is a useful measure of pregnancy intention among low income US women that can be used as a quantitative tool in future studies testing interventions designed to reduce unintended pregnancy in this population.

As a future clinician, I would like to go beyond singular care and work to understand the health needs of particular populations in order to better advocate on their behalf. I would like to have at least 60% of my job committed to research upon training completion. I currently intend to practice within the field of Obstetrics/Gynecology and conduct clinical research to better understand women's pregnancy intention and its impact on maternal and child health, especially among underserved populations. Ultimately, I hope that my work will help to improve contraceptive use, reduce the rates of unintended pregnancies and advance the overall well being of women and their children.

The Clinical Scientist Training Program provides the necessary foundation and skillset needed to build a career in improving maternal and child health. The program will lead me through a succession of courses addressing the key aspects of clinical research, allow me to transition into my medical career with a research centered focus, and provide me with the fundamental tools to implement change for the advancement of our society. I welcome the unique opportunity to become fully immersed into the realm of clinical research and contribute to the immense work at hand in reducing health disparities around the world.