POVERTY, POLITICS AND RACISM ARE THEMES AT MINORITY HEALTH SUMMIT

The Arkansas Minority Health Summit received a crowd of more than 350 attendees on the campus of Philander Smith College in April. The theme of the summit was centered around Healthy People 2020, a comprehensive set of national public health objectives grounded in the notion that setting objectives and providing benchmarks to track and monitor progress can motivate, guide, and focus action.

Gov. Mike Beebe opened the discussion by giving homage to Arkansas’s Surgeon General, Joe Thompson, M.D.; the distinguished panel of U.S. Surgeons General, Drs. Richard Carmona, Antonia Novello and Joycelyn Elders; and the Arkansas Minority Health Commission.

“I give thanks for the service to our country and for the service to the people that have benefited from the policies enacted by the Surgeons General,” said Gov. Beebe. “I also salute the Arkansas Minority Health Commission for emphasizing one of their many initiatives, health education and awareness.”

Other legislators in attendance were Senators Shane Broadway, Tracy Steele, Jack Crumbly, Joyce Elliott, and Representatives Fred Allen, Tommy Baker, Willie Hardy, Clark Hall, Richard Carroll, David Rainey, and Greg Reep.

Introduced by Dr. Creshelle Nash, moderator, Thomas LaVeist, Ph.D., presented questions to the panel regarding their involvement with composing Healthy People and the topics they chose to enforce while in office.

Elders, who helped to write Healthy People 2000 stated, “We wanted to increase healthy lives and we did but unfortunately we did not decrease health disparities.”

She emphasized that poverty and education was the greatest cause of health disparities. “In America, we have the best sick care in the world, but we need health care,” she said.

During her term Elders said that she tried very hard to improve sexual health. Pointing out that the country spent $9 million in teen pregnancy health care during her term.

Carmona pointed out that the role of the Office of the Surgeon General was to be a “champion for things that benefit the people.” Our job is to be the doctor of the people not of the current administration.”

For Carmona, Healthy People 2010 provided a road map to educating

L to R: Antonia Novello, M.D.; Richard Carmona, M.D.; Joycelyn Elders, M.D.
America. But Carmona stated that the one element missing was the importance of local health and that we are all interconnected.

“A child that dies in Africa of AIDS causes a ripple effect around the world. Health is a powerful tool that we need to learn to leverage.”

Standing to her feet, a spirited Novello said, “If you are like me, you’re tired of Healthy People 2000… 2010... just get it done. The most important element in health care is information. If you don’t know what you need how do you ask?” she said.

Novello pointed out there are many barriers effecting the quality of and access to health care. But the number one barrier is cultural sensitivity. In her example she said on one hand you have a patient that barely speaks English, treated by someone that is speaking so fast that the patient is embarrassed to ask questions. On the other hand you have providers prescribing medications not understanding that “once” in Spanish means 11 and that a patient is sent home taking medication 11 times a day instead of once a day.

“If you are culturally insensitive you have no business in the medical profession.” The audience erupted with applause.

LaVeist next presented the subject of public health and how to balance the science, politics and policy. All agreed that the Office of the Surgeon General should not be marginalized to be nothing more than a figure head of the current administration.

It was brought to light that many times the Surgeon General must walk a fine line between educating the people and keeping their job. Carmona expressed disappointment that the American people and the administration at that time did not support Elders during her term.

“What she did wasn’t politically insensitive; she did the job that she was sent there to do,” said Carmona. “The administration should have stood up for her. Being worried about political correctness is not the key to educating people.” With this the audience again erupted in applause.

The panel discussion was followed by a luncheon with keynote speaker, Camara Jones, Ph.D., of the CDC in Atlanta. She strategically broke down racism into three levels, institutional, personal and internalized. “We have to put racism on the agenda,” she said. “Then ask ourselves, how racism is operating ‘here’ and finally organize and strategize to act.”

That evening the Arkansas Minority Health Commission held a Founders’ Reception at the Governor’s Mansion to celebrate the founding of the Commission and to honor those whose hard work contributed to the agency’s beginning and success. Dr. Elders was presented with a medal in her name. This award was established in light of the historic role Dr. Elders played in establishing the Commission in 1991 and in recognition of her outstanding and ongoing contributions to public health policy and initiatives in the state and nation. The Joycelyn Elders Minority Health Pioneer Award was also presented to Senator Bill Walker, Larnell Davis and Former AMHC Executive Director, Representative Judy Smith.
In an effort to address a shortage of minority nurses teaching in the state's nursing programs, the Arkansas Minority Health Commission (AMHC) has established a $50,000 endowed scholarship with the University of Arkansas for Medical Sciences (UAMS) College of Nursing's Ph.D. nursing program.

The AMHC Healthcare Workforce Diversity Endowed Scholarship fund will provide financial assistance to minority UAMS College of Nursing Ph.D. students who are in need of financial aid.

“We are thankful to the commission for committing these funds,” said Claudia Barone, Ed.D., R.N., dean of the UAMS College of Nursing. “At UAMS we work very diligently to increase the number of minority students represented in all of our programs. This endowed scholarship will significantly aid our efforts toward reaching those goals.”

Idonia Trotter, executive director of the AMHC said, “This is all about recognizing the need to address the dire shortage of minority, graduate prepared nurses teaching in the state’s nursing school programs,” Trotter said. “This is a big step forward to ensure we’re moving toward reversing that trend. I’m very proud to be a part of this and look forward to seeing this scholarship’s intentions come to fruition.”

For more information about the Healthcare Workforce Diversity Scholarship visit uams.edu
Approximately 60 Springdale residents came out to voice their opinions and ask questions regarding health insurance and health care access at the public forum held in April at the Jones Center for Families in Springdale, Ark. In attendance were guest speakers Carmen S. Chong Gum, Marshallse Consul General; Margarita Solorzano, Executive Director of the Hispanic Women’s Organization of Arkansas (HWOA); Grace Donoho, former Director of Education at the Jones Center for Families; and Representative Jim House, District 89.

AMHC Medical Director, Creshelle Nash, M.D., started with a history of the public forum and how the Commission brings together the community and legislators to discuss health care issues as well as to inform the community of the role of the Commission.

Dr. Nash provided a summary of the health statistics in Washington County. She informed the attendees that the life expectancy in Washington County is 80 years, which is one of the longest in Arkansas. “Washington County is doing a good job overall,” said Dr. Nash. She added, however, there are more than 2,000 new cancer cases reported each year, 23 percent of the population has high blood pressure and 22 percent of the people do not have health insurance. “But we are here to talk about the community’s experience” she said. With that she turned the discussion over to Representative House to discuss what is going right in Washington County.

“Wonderful things are going right in Springdale,” said Representative House. “The Jones Center provides activities for all ages; we have the Community Clinic; we have great public health centers, support groups and centers.”

Solorzano said, “People within the community are engaged and we bring issues to our legislators.” She added, “It is our responsibility to voice our concerns.”

Melisa Laelan, Community Liaison for Tobacco Free and Healthy, recalls her presentation on the Hispanic and Marshallse population in Arkansas at the Minority Health Summit, “People were astounded at the health disparities within the communities.” She said “I feel that our community [Marshallse] has fallen through the cracks. We have made a lot of progress but we are still missing a piece. I don’t care if it takes five years; I’m going to push until we get it [health insurance].”

The Springdale Health Fair, the following day, had an incredible turnout! More than 300 Springdale residents from the Marshallse and Hispanic communities came out to receive various health screenings. Participants received dental screenings offered by the Community Clinic, a healthcare ministry of St. Francis House. Approximately 104 participants received flu shots offered by Arkansas Department of Health, Arkansas Division of Hometown Health.

Through a new collaborative partnership with AMHC, the AARP/Walgreens Wellness Tour Bus provided 107 attendees with screenings such as blood pressure, glucose, cholesterol, bone density, BMI and waist circumference.

Approximately 70 people received vision screenings offered by the UAMS Jones Eye Institute. Research associate (from UAMS) Guillermo Gonzalez accompanied the team and did an excellent job translating and performing frequency doubling technology. Drs. Faith Dudley and Thomas Cannon performed intraocular pressures and looked at the patient’s optic nerves. The team saw several people with eye problems and identified a few glaucoma cases.

The Advanced Family Eye Care clinic tested hand eye coordination with the Wayne Saccanic Fixator that is standard for testing, evaluating, and developing accurate and rapid eye-hand coordination, spatial integration, and reaction times. The Hispanic radio station, La Mas Mexicana, KLTK 1140 provided music and entertainment.

“This weekend’s turnout has shown me how dedicated the health care professionals of Springdale are to the community,” said Executive Director of the Arkansas Minority Health Commission, Idonia L. Trotter, J.D., M.P.S. “The community is also genuinely concerned about their individual health and the health of their neighbors,” she said. “Working together with local and state healthcare providers, we were able to provide critical information and services to many underserved Hispanics and Marshallse living in Northwest Arkansas.”
Mark your calendars and join us for our next health fair and legislative forum in Monticello, July 22, 2010
AMHC welcomes Scott Bardin, Valerie Spivey and Heather Dunlap

Scott Bardin joined the AMHC staff in May as Finance Manager. He brings more than 20 years of accounting and account management experience to the AMHC. Valerie joined the staff in June as Assistant to the Executive Director and HR Manager. Heather also joined the staff in June as Receptionist/Administrator. We welcome them to the AMHC team!

AMHC Executive Director, Idonia Trotter was named Outstanding Person in the May issue of Stand News! To read more visit stand-news.com.

Silvia Fernandez, Bilingual Administrator

Silvia joined the AMHC Staff in November 2009 and recently received a Bachelor of Science in Spanish from the University of Arkansas at Little Rock in May. She serves as Assistant to the Medical Director and Latino liaison.

Cozetta Jones, Director of Communications

Cozetta joined the AMHC staff in February and recently received a Master of Arts in Communications Management from Webster University in May.

Congratulations to Our Graduates!
Jonathan Dunkley and Regina Wilkerson

Patricia Minor, R.N., received the honor of being selected as a “Top Nurse in Little Rock” by the International Association of Nurses. Minor’s biography and photo will be highlighted in the publication *Worldwide Leader in Health Care.*

“I am not only honored but grateful to be recognized as a “Top Nurse” by the International Association of Nurses. Since graduating 19 years ago I have gained much experience and received words of appreciation but I must admit that this is the greatest recognition. It is rewarding to know that others looked upon me and thought I was “Top Nurse” among so many others that also deserve the recognition.”

Jonathan and Regina graduated from the UA Clinton School of Public Service in May. Jonathan and Regina completed their UACS Capstones at the AMHC assisting with development of a navigation “resource” system, public policy research and legislative audit presentation. Trotter served as their Capstone contact and mentor in minority health disparities. Jonathan now works at the Office of Governor Mike Beebe. Regina is now Outreach Coordinator for Girl Scouts- Diamonds of Arkansas, Oklahoma, and Texas.

Congratulations Jonathan and Regina!

Keep up with the latest AMHC news!
Visit arminorityhealth.com!
Become a fan on Facebook!

Dr. Creshelle R. Nash has been asked to join the Board of Directors of Community Campus Partnerships for Health (CCPH). CCPH is a nonprofit organization based in Seattle, WA that promotes health (broadly defined) through partnerships between communities and higher educational institutions. Dr. Nash will serve a 3-year term where she will not only bring her experience and expertise from her work in Arkansas to the organization but also introduce CCPH and its resources to our community based partners as we seek to improve health in the state of Arkansas.
It’s been nearly three months since the Health Care Reform bill became law, the debate has subsided but the hard work is yet to come and the question still remains—how will the new reform bill effect individuals and their families?

To answer this question, Arkansas Surgeon General, Joe Thompson, M.D. lead a panel discussion on the Implications of Health Care Reform in Arkansas at the 117th Annual Scientific Session of the Arkansas Medical, Dental and Pharmaceutical Association (AMDPA). The panel discussion was held at the Peabody Hotel in Little Rock. The Arkansas Minority Health Commission (AMHC) sponsored event featured AMHC Medical Director, Creshelle Nash, M.D. and Professor and Chair, Glen Mays, Ph.D., M.P.H., of the Department of Health Policy and Management at the University of Arkansas for Medical Sciences.

Dr. Thompson described “Healthcare’s Iron Triangle” that includes quality, cost and access and how obtaining all three is not easy to balance. He also informed the audience that the new bill will improve access and provider availability and there will be more transparency of both the cost of insurance and the cost of providing health care.

Dr. Mays addressed how the new law will effect public health and wellness. “We need a holistic approach to health care reform that includes workforce diversity and more investments in prevention and wellness,” said Dr. Mays. He said as a country, the U.S. falls behind other industrialized countries in reducing preventable mortality and as a state Arkansas is in the bottom four. He added that at the micro level, Arkansas has 10-year life expectancy difference among it’s Northwest Arkansas counties and Southeast Arkansas counties. Dr. Mays revealed the new law will create opportunities to reduce the country’s preventable mortality such as a National Public Health and Prevention Council that will oversee issues of public health and prevention, improvement of community health centers and new programs in rural health. Dr. Mays said, “By improving our prevention and wellness programs we will reduce the amount of people entering the ‘illness’ care system.”

AMHC Medical Director, Dr. Creshelle Nash acknowledged there are many drivers that effect disparities—healthcare is only one element. She validated the importance of the Iron Triangle but stated, alone, the “Triangle” will not reduce racial and ethnic disparities in the healthcare system. “If you have a system that has disparities you do not have a system that has quality,” she said. Nash also pointed out that everyone must come to the table even the transportation system. “If a patient can’t come back for follow-up that effects the quality,” she said.
HEALTH REFORM UPDATE:
WHAT DO I NEED TO KNOW ABOUT HEALTH CARE REFORM?

by: Lindsey Johnson, UA Clinton School Candidate

OVERVIEW
Although it has been over a month since President Obama signed the Patient Protection and Affordable Care Act, there is still a lot of debate about the impact of the new laws. Although we may know what the laws are intended to do, like all policies, many of the effects and long-term consequences are difficult to predict. On April 23, the Actuary at the Department of Health and Human Services released a report that attempted to foresee the long-term impacts. They anticipate a number of benefits for Americans, but there are also reasons for concern.

Ultimately, the real effects will be determined by how they are applied at the state and local level. We need to ensure that the laws are successfully implemented and that our lawmakers continue to take steps to increase access to care and decrease costs.

Here are five things that you should know about the new health care laws:

1. THE NEW HEALTH CARE LAWS WILL EXPAND HEALTH INSURANCE COVERAGE. Nationwide, 34 million more people will obtain health insurance. Medicaid will be expanded to 133% of the federal poverty level. Individuals and families who do not receive insurance from their employers will be able to purchase insurance at reasonable prices from a state-based marketplace called an “exchange.” In Arkansas, over 155,000 currently uninsured minorities will be covered by 2014.

2. THE NEW HEALTH CARE LAWS WILL DECREASE HEALTH DISPARITIES. The health care laws include a number of provisions that explicitly address the inequities between racial and ethnic groups, including workforce diversity grants, funding for the National Institute of Minority Health, and investments in historically black colleges and universities.

3. EVEN WITH THE NEW LAWS, HEALTH CARE COSTS MAY CONTINUE TO RISE. The health care laws include some provisions that are intended to address funding problems, but Actuary’s report estimates that health costs will continue to rise by almost 1% over the next decade. Increases will affect families, state governments, and federal government. Additional laws may be needed to address inefficiencies in our health care system and promote preventive and public health services.

4. THE BENEFITS OF THE NEW HEALTH LAWS WILL NOT COME AUTOMATICALLY. It is easy to talk about advantages of the new laws, but no one will see these benefits without considerable support at the state and local level. These new laws can and should improve the health of our entire state, but the laws require significant and sometimes difficult changes for our hospitals, businesses, insurance companies, and state agencies. Our legislators and government employees must take steps to ensure that the provisions are enacted.

5. THE NEW HEALTH CARE LAWS ARE NOT GOING TO SOLVE ALL OF OUR HEALTH PROBLEMS. The new laws are focused primarily on the health insurance industry. Although access to medical professionals and services is important, many other factors affect our health—from the food we eat to the air we breathe to the neighborhoods where we live. Each of us should take responsibility for our communities and continue to encourage our legislators to develop policies that will benefit all of us.

FOR MORE INFORMATION: Check out our website for updates about our state and national health policies as well as links to the latest news and research. http://www.arminorityhealth.com/policies.html
AR HIV/AIDS MINORITY TASK FORCE ENDORSES SHARP REPORT RECOMMENDATIONS

The Arkansas HIV Community Advocates (AHCA) released the findings and recommendations of the Arkansas State Healthcare Access Research Project (SHARP) Report in a press conference in April at the State Capitol. The following are some recommendations endorsed by the Arkansas HIV/AIDS Minority Task Force and outlined in the Arkansas SHARP Report. Those include:

- Create a Consumer Office within the ADH, staffed by a person living with HIV/AIDS within the HIV/STD/Hepatitis C Section, as several other states have done; The Consumer Office manager could be the liaison between the Section and Arkansas consumers;
- Offer voluntary, opt-out HIV screenings be a part of routine medical care for everyone ages 13-64, as recommended by the Centers for Disease Control in 2006 to increase early HIV diagnosis;
- Work with state education leaders to develop a more effective health education curriculum that specifically includes HIV/AIDS prevention information;
- Increase Medicaid access for people living with HIV/AIDS by creating a presumptive eligibility category and using waivers to cover pre-disabled HIV-positive individuals, as in Massachusetts and Maine.

The Arkansas SHARP Report is an analysis of the successes, challenges and opportunities for improving healthcare access that is prepared by the Health Law and Policy Clinic of Harvard Law School in collaboration with state community partners. It is the hope and intention of the ACHA that the report will become the framework for future efforts to expand healthcare access to HIV consumers in the state.

Rick Collins, chair of the Arkansas HIV/AIDS Minority Task Force and a founding member of the ACHA says, “Poverty is not specifically a healthcare access challenge in this report. Poverty simply underlies virtually all of the other challenges discussed, and is a major barrier to both HIV prevention and care.”

Following the press conference, ACHA presented the SHARP report findings to the Joint Public Health Committee.

ORGANIZATIONS RECEIVE SPONSORSHIPS COMMENORATING MINORITY HEALTH MONTH

AMHC is proud to announce that 12 organizations were awarded Minority Health Month sponsorships in April during a press conference at Arkansas Baptist College in conjunction with Arkansas Public Health Week and Minority Health Month. These community-based, nonprofit organizations had the opportunity apply for up to $1000 for events planned during the month of April that focused on health promotion and disease prevention in minority communities. Governor Mike Beebe, in a proclamation, declared April 2010 as Minority Health Month in Arkansas.

Grantees were the Arkansas Community Dispute Resolution Center; Arkansas River Education Service Cooperative; Asociacion de Mujeres de Arkansas/AR Association of Women of Arkansas; Beta Pi Omega Chapter of AKA dba The Ivy Foundation of Little Rock; Conway Interfaith Clinic; Freedom for Youth, Inc.; Greater First Baptist Outreach Ministry; Hearne Centre Health and Education, LLC; Patient First of Arkansas, Inc.; Phoenix Youth and Family Services, Inc.; UAMS Delta AHEC; Women’s Council on African American Affairs, Inc.

“The Minority Health Month sponsorship served as a conduit for Arkansas Minority Health Commission to collaborate with nonprofit organizations statewide,” said AMHC Project Manager, Patricia Minor, R.N. “These partnerships promoted health awareness and education to the local communities focusing on diabetes, physical fitness, medical professions, health wellness, mental health, domestic violence and sexual assault as well as an opportunity to receive free health screenings and services.”
The past few months, the Arkansas Minority Health Commission realized overwhelming success as host of the first Arkansas Minority Health Summit at Philander Smith College. The summit featured three former surgeons general—Drs. Antonia Novello, Joycelyn Elders, and Richard Carmona—and a roundtable discussion on reaching the Healthy People 2020 national goals and on health disparities in Arkansas. Our own Surgeon General Dr. Joe Thompson moderated this discussion and AMHC Medical Director, Dr. Creshelle Nash encapsulated the major discussion points in her closing remarks, including input from all three surgeons general and several Arkansas public officials and public health leaders. The energy, focus participation and goals generated at the Summit will carry over into the next two years with follow up meetings and a public update regarding the development and implementation of a coordinated, collaborative state health plan to meet national goals as well as address racial and ethnic health disparities.

In the meantime, the concentration for May and June centers on the Commission’s mission-driven vision of “Minority Arkansans equal access to health, health care, and preventive care.” “Minority” is defined in Act 912 of 1991 as “Black Americans, Hispanic Americans, Asian Americans and American Indians.” The 12-member commission—each appointed by either the Governor, Senate President Pro Tem, or Speaker of the House of Representatives—guides the work of the Commission staff and the ultimate achievement of this vision through a deliberative process based on the agreed upon need for all programs and projects to be evidence-based and measurable.

The Commissioners are dedicated, hard working and committed; and each brings a myriad of knowledge to this mission-driven state agency that strives to improve the lives of minority Arkansans. The identified activities the Commission endorses to best achieve our vision are Outreach, Research, Public Policy, Coordination/Collaboration, and Pilot or Demonstration Projects. Public policy to improve public health is an ongoing AMHC pursuit but in May/June and in conjunction with its partners with the Arkansas Minority Health Consortium, the Commission begins the compilation of policy recommendations to develop a legislative package for the upcoming session scheduled to begin in January 2011. The Minority Health Commission took an active advocacy role in the 2009 session of the Arkansas 87th General Assembly. Act 358 (Senator Jack Crumbly) confronts disparities in health and length of life among citizens of Arkansas; Act 1191 established a legislative Task Force on Sickle Cell Disease, which will make policy recommendations for the upcoming session; Act 1489 and Act 1490 (Senator Joyce Elliott) require specific demographic data collection and reporting of Arkansas’s health care workforce to three agencies, including the AMHC and provides that each health-related agency, board and commission might reflect the diversity of the state by requiring appointing authorities to consider appointment recommendations submitted by minority health-related professional associations. Act 574 (Senator Tracy Steele) clarified the duties of the AMHC to ensure the minority citizens of Arkansas as well as state agencies and community based organizations could better utilize the services being provided to ensure equal access to health and healthcare for all Arkansans.

Health policy is an integral component of public health that impacts the lives of Arkansans faster than any scientific-based intervention. If you have policy recommendations that might benefit the health or health care of “all” Arkansans, please contact the Arkansas Minority Health Commission—we solicit your input and urge you to join in our efforts to decrease health disparities which impacts us all.

Willa Black Sanders, M.P.A. has served as Secretary to the Arkansas Minority Health Commission since 2008. She is Assistant Dean for Governmental Relations at the University of Arkansas for Medical Sciences and a resident of Maumelle.

Arkansas Minority Health Commission

www.amhc.com
SUMMER YOUTH PROGRAM ADDRESSES MIND, BODY AND SOUL

AMHC sponsored the Healing Place Ministries Summer Youth Program in Pine Bluff, Ark. Healing Place Ministries, overseen by Reverend William and Edna Morgan, is a retreat center that provides education to the community through workshops that address wholeness of body, mind and spirit. The summer youth program focuses on physical fitness, nutrition, conflict resolution, self-esteem, drug and alcohol awareness and prevention. This summer more than 40 children each week, ages 5 to 12, will engage in workshops and physical activity such as basketball, baseball, jumping rope, hula hooping and kickball.