1st Quarter & 2nd Quarter Combined Update
July - December 2009

Submitted To:
The Honorable Governor Mike Beebe
Senate President Pro Tem
Speaker of the House
Arkansas General Assembly

Submitted By:
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The goal of the Arkansas Minority Health Commission is to be a catalyst in bridging the gap in the health status of the minority population and that of the majority population in Arkansas. To achieve this goal, the commission focuses on addressing existing disparities in minority communities, educating these communities on healthier lifestyles, promoting awareness of services and accessibility within our current health care system, and making recommendations to relevant agencies, the Governor and to the state legislature.
Dear Governor Mike Beebe and Members of the Arkansas General Assembly,

It is with great excitement that I present to you this update of the broad yet focused work occurring at the Arkansas Minority Health Commission (AMHC) during the 1st and 2nd Quarters of FY2010, which encompasses July through December 2009. I am pleased to inform you that such reports can be anticipated on a quarterly basis to keep you well-informed on the Initiated Act I Minority Health Initiative executed by the AMHC. We are energized toward a commitment of collaborative efforts that assist in making a positive impact on state-wide community awareness and education; research aimed at making evidence-informed recommendations to decision makers; pilot projects that assist in guiding those recommendations, and public health policy advocacy. Our overall goal is to see significant reductions in minority health disparities throughout the state in the foreseeable future. Through an intensive strategic planning process, AMHC’s focus is more refined than ever before!

In the past six months, the AMHC has been aggressively engaged in;

- Two multi-county community health fairs providing a wide range of health related services and resources
- Numerous local health fairs and educational events to promote awareness and increase understanding
- Screening of hundreds of minority citizens throughout the state
- Public policy advocacy
- Awareness campaigns utilizing different approaches to address diseases that disproportionately impact minority Arkansans
- Focused intervention strategies through piloted projects
- Scholarly publications and studies spearheaded by the AMHC Medical Team that includes the Arkansas Racial & Ethnic Health Disparity Study II, a timely survey which contains the largest voice from the Hispanic community in Arkansas and,
- Model collaborations and partnerships that maximizes the effectiveness of services and resources

The second half of FY2010 is poised to be bright as we shine the light on living healthier lifestyles. We hope this update will inform you as well as move you to join us as we seek to better the health of minority citizens; thereby advancing the state’s overall goal of improving the health of all Arkansans.

Idonia L. Trotter, J.D., M.P.S.
Executive Director
**Mission Statement**

The mission of the Arkansas Minority Health Commission is to ensure all minority Arkansans access to health care that is equal to the care provided to other citizens of the state and to seek ways to provide education, address issues and prevent diseases and conditions that are prevalent among minority populations.

The AMHC will achieve this mission through:
- Outreach
- Research
- Public Policy
- Coordination/Collaboration
- Pilot/Demonstration Projects

**Vision Statement**

Minority Arkansans have equal access to health, health care and preventive care.

**Goal**

The goal of the Arkansas Minority Health Commission is to be a catalyst in bridging the gap in the health status of the minority population and that of the majority population in Arkansas. To achieve this goal, the commission focuses on addressing existing disparities in minority communities, educating these communities on healthier lifestyles, promoting awareness of services and accessibility within our current health care system, and making recommendations to relevant agencies, the Governor and to the state legislature.

**STRATEGIC PLAN OBJECTIVES FOR 2014**

The AMHC, in collaboration with partners throughout the state of Arkansas, will, by the year 2014:

- Increase the percentage of minority Arkansans that obtain recommended screening for diseases that disproportionately impact minorities;
- Increase education and awareness of minority Arkansans regarding HIV/AIDS and Sickle Cell prevention and/or treatment;
- Establish a system of Supported Navigation to help minority citizens identify and gain access to appropriate health and health care resources in their communities;
- Establish a collaborative network of stakeholders to address workforce diversity issues by increasing the percentage of minority health professionals practicing in the state;
- Establish a comprehensive system of coordination and collaboration with other agencies and organizations addressing the health of minority populations through data collection and reporting; and
- Build a comprehensive constituency network of individuals, community-based organizations, and communities committed to the mission and goals of the Arkansas Minority Health Commission.
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Established through the enactment of Act 912 of 1991, the Arkansas Minority Health Commission (AMHC) is charged to:

- Study issues relating to the delivery and access of health services;
- Identify gaps in health delivery systems;
- Make recommendations to relevant agencies and the General Assembly for improving health delivery; and
- Study and make recommendations as to whether services are adequate and available.

In 2001, the Arkansas General Assembly passed Initiated Act 1, commonly known as the Tobacco Settlement Proceeds Act. The Minority Health Initiative, administered by the AMHC, is one of four Targeted State Needs programs identified. Initiated Act 1 mandates that the AMHC establish and administer the Arkansas Minority Health Initiative for screening, monitoring, and treating hypertension, strokes and other disorders disproportionately critical to minority groups in Arkansas. The program is established to:

1. Increase awareness of hypertension, strokes, and other disorders disproportionately critical to minorities by utilizing different approaches that include but are not limited to the following; advertisements, distribution of educational materials and providing medications for high-risk minority populations;

2. Provide screening or access to screening for hypertension, strokes and other disorders disproportionately critical to minorities but will also provide this service to any citizen within the state regardless of racial/ethnic group;

3. Develop intervention strategies to decrease hypertension, strokes and other disorders noted above, as well as associated complications, including: educational programs, modification of risk factors by smoking cessation programs, weight loss, promoting healthy lifestyles, and treatment of hypertension with cost-effective, well-tolerated medications, as well as case management for patients in these programs; and

4. Develop and maintain a database that will include; biographical data, screening data, costs, and outcomes.
PURPOSE

**Act 574 of 2009** modified, clarified and expanded the AMHC’s duties with regards to disparities in health and health care to:

1. Gather and analyze information regarding disparities in health and health care access
2. Perform statewide educational programming regarding disparities in health/health care and health care equity
3. Make specific recommendations relating to public policy issues
4. Promote public awareness and public education encouraging Arkansans to live healthy lifestyles
5. Develop, implement, maintain and disseminate a comprehensive survey and
6. Publish evidence-based data, define state goals and objectives and develop pilot projects for decreasing disparities

**Act 358 of 2009** specifies that the AMHC;

1. Develop, implement, maintain, and disseminate a comprehensive survey on racial and ethnic minority disparities in health and health care
2. Repeat the study every five years; including disparities in geographic location and economic conditions
3. Publish evidence-based data, define state goals and objectives and develop pilot projects for decreasing disparities.
 Based on 2008 RAND (state external evaluator) recommendations, the Commission voted to follow RAND guidance and concentrate its key health foci for FY2009-FY2014 on two critical health disparities; HIV/AIDS and sickle cell outreach initiatives. The Commission voted to adopt two additional areas of focus: health care workforce diversity and the development of a health navigation system that will include an integrated resource center with searchable databases of health care resources generally and specifically pertaining to minority health and access to health care. During the first half of FY2010, we are pleased to report that all key foci are well under way.

**HIV/AIDS**

In 2007-2008, the AMHC, through a strategic planning process, performed an analysis of health problems that disproportionately affect minorities in the state. In that process, it was identified that while there were increased incidence, prevalence, disparity and mortality from HIV/AIDS in minority communities, there was not clear investment in primary prevention reaching grassroots minority communities in Arkansas. Therefore, AMHC chose HIV/AIDS as a key focus and developed multiple activities to address HIV/AIDS in Arkansas. As a result, in 2008, the Arkansas HIV/AIDS Prevention Coalition, including faith-based, community-based and HIV/AIDS service organizations, was formed by AMHC to foster primary prevention activities in the state of Arkansas. The group organized activities in conjunction with World AIDS Day that included a book signing with renowned author Marvelyn Brown, a youth rally, Compassion Sunday and an HIV/AIDS vigil at the Arkansas State Capitol. In 2009, this coalition offered a capacity building workshop that covered the core concepts of HIV prevention such as HIV 101, program planning, community needs assessment and evaluation. The workshop was offered to community-based organizations, AIDS service organizations, faith-based institutions, health educators, prevention program staff, health department staff and other grassroots organizations involved in HIV program planning across the state. In collaboration with the Arkansas Department of Health, the ADH/AMHC HIV “Know Your Status” testing and awareness campaign was developed in early 2009, meant to increase awareness of the continued epidemic of HIV/AIDS in minority communities and to encourage screening.

In early 2009, the AMHC developed a competitive community grant pilot project to address high-risk minority communities and build capacity among community-based organizations that could better reach the targeted populations. The Commission received tremendous response with innovative proposals to reach youth, the homeless, African-American and Hispanic women and other high-risk populations. Seven organizations are currently administering HIV/AIDS education, awareness, and screenings as a part of the AMHC’s HIV/AIDS Outreach Initiative in 22 counties. The second half of FY2010 is expected to expand the commission’s HIV/AIDS focus as a part of a model collaborative education/awareness campaign with the Arkansas Department of Health HIV/STD/Hepatitis C Unit.
KEY FOCI
FY2009-FY2014

SICKLE CELL DISEASE
During this reporting period, the AMHC began its initial research phase of the development of a wide reaching sickle cell outreach initiative. While best practice research is underway, AMHC has partnered with the Sickle Cell Support Services, Inc. of Pulaski County and the Mutual Sickle Cell Support Group of Jefferson County in their efforts to enhance the well-being of sickle cell consumers and their families through outreach, education, increased screenings and awareness campaigns. In addition, Executive Director Trotter has been appointed to the Arkansas Legislative Taskforce on Sickle Cell Disease.

WORKFORCE DIVERSITY
In September 2004, the Sullivan Commission on Diversity in the Healthcare Workforce released “Missing Persons: Minorities in the Health Professions,” (http://www.jointcenter.org/healthpolicy/docs/SullivanExecutiveSummary.pdf) funded by the Kellogg Foundation. The report outlined the commissions’ findings and recommendations regarding the diversity of the health care workforce in the United States. The report states that “Basic quality care is beyond the reach of far too many Americans. As the population has become increasingly diverse, glaring disparities in the quality of care, especially for racial and ethnic minorities, have led to thousands of premature deaths each year and incalculable hours of lost productivity, pain and suffering.” Even more compelling, the report highlights “Support for a direct link between poorer health outcomes for minorities and the shortage of minority health care providers,” came from the Institute of Medicine’s landmark study ‘Unequal Treatment.’ (http://www.nap.edu/openbook.php?isbn=030908265X) The Institute of Medicine’s study documented the lower quality of health care and higher rates of illness, disability and premature deaths among minority populations.” Based on this national data, as well as state estimates (that do not exist in a comprehensive manner at this time), the AMHC adopted health care workforce diversity as an area of focus and intervention strategy toward the long-term goal of decreasing critical disease states among minority Arkansans. During this reporting period, the AMHC engaged this strategy through the following:

1. PUBLIC POLICY: Working with legislative and state agency leaders to implement legislation that the AMHC helped research and draft during the 2009 legislative session. (See Act 1489 and Act 1490 on page 19)

2. STUDENT PIPELINE SUPPORT: Providing sponsorship support for pipeline enrichment programs. AMHC co-sponsored the Arkansas Medical Dental Pharmaceutical Association Scientific session, an annual conference which includes a student component called the Discovery Summer Science Program.

3. SCHOLARSHIP SUPPORT: Contributing to the establishment of endowed scholarships to benefit underrepresented minority students including the Miller Scholarship at UAMS ($50,000).
KEY FOCI
FY2009-FY2014

AMHC NAVIGATION SYSTEM
An integrated, online resource center with searchable databases of health care services in Arkansas, including information and services especially pertaining to minority health and health care. The Navigation System will provide the public with free and easy access to all relevant sources on minority health care in Arkansas through one convenient, user-friendly Web site. Public Access to Resources for Minority Health & Healthcare is a key component of AMHC’s Navigation System. It will contain databases of health care providers, such as physicians, hospitals, free and low-cost clinics, in counties across Arkansas, as well as links to other valuable health information. Considering the constituency of the AMHC, this information will also be reduced to a paper resource guide for greater access in rural communities. *(Activities pursuant to Initiated Act I, (1)(2)(3) & (4); Act 574 of 2009, (4) (5); Act 378,(3); and the spirit and intent of Act 912 of 1991)*

AMHC Presentations/Workshops

The AMHC medical team, executive director and senior project managers have participated in national conferences and educational activities to promote the Minority Health Initiative’s mission, goals and key foci during the first half of FY2010.

<table>
<thead>
<tr>
<th>WHERE</th>
<th>DATE</th>
<th>PRESENTER</th>
<th>EVENT</th>
<th>TOPIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jonesboro</td>
<td>Aug. 7</td>
<td>Nash/Trotter</td>
<td>Lead AR Class 14</td>
<td>“Health Issues &amp; Disparities in Rural Arkansas”</td>
</tr>
<tr>
<td>Los Angeles, CA</td>
<td>Aug. 14-16</td>
<td>Minor-BAI Fellow</td>
<td>Black AIDS Institute (BIA) Supplemental Training &amp; Development Workshop</td>
<td>HIV Capacity Building</td>
</tr>
<tr>
<td>Little Rock, AR</td>
<td>Sept. 25</td>
<td>Nash</td>
<td>Little Rock Central High National Historic Site 52nd Anniversary Symposium</td>
<td>Speaking the Truth on Social Issues &amp; Politics in the 21st Century</td>
</tr>
<tr>
<td>Little Rock, AR</td>
<td>Sept. 26</td>
<td>Trotter</td>
<td>Moody Chapel Women’s Conference</td>
<td>“Health Disparities and Women’s Health”</td>
</tr>
<tr>
<td>Orlando, FL</td>
<td>Sept. 30 - Oct. 2</td>
<td>Woods</td>
<td>37th Annual Sickle Cell Disease Association of America Conference &amp; Workshops</td>
<td>Sickle Cell Capacity Building</td>
</tr>
<tr>
<td>San Diego, CA</td>
<td>Oct. 29 - 31</td>
<td>Minor-BAI Fellow Co-Presenter</td>
<td>U.S. Conference on AIDS</td>
<td>Challenges and Success in Implementing HIV/AIDS Mobilization Programs in the South: Experiences in three Southern States: Georgia, Louisiana and Arkansas</td>
</tr>
<tr>
<td>Hot Springs, AR</td>
<td>Nov. 16-18</td>
<td>Nash/Trotter</td>
<td>Arkansas Evidence-Informed Health Policy Workshop</td>
<td>Evidence - Informed Research in Policy Making Processes</td>
</tr>
</tbody>
</table>
AMHC hosted its FY2010 first quarterly Community Health Fair on July 30, 2009 from 10 a.m.—4 p.m. at the Cultural Awareness Center in De Queen, Arkansas. The health fair was very successful in creating greater awareness in the Hispanic community regarding living healthier lifestyles, providing access to health care services and resources, and educating the public about the need to regularly get tested and screened. Although only 245 participants are reported for RAND purposes (based on those who actually signed in), there were approximately 900 participants in attendance. Twenty-one health care related collaborative vendors greeted the crowd with a myriad of information. The attendees were more likely to receive blood pressure, cholesterol, glucose screenings than other screenings. Free health screenings for HIV and immunization were also available. (Activities pursuant to Initiated Act I, (1)(2)(3)&(4); Act 574 of 2009, (1)(2) & (4); and the intent of Act 912 of 1991)

<table>
<thead>
<tr>
<th>Blood Pressure</th>
<th>Cholesterol</th>
<th>Glucose</th>
<th>HIV</th>
<th>Immunizations</th>
<th>Total Sign-In</th>
<th>Estimated Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>185</td>
<td>180</td>
<td>180</td>
<td>25</td>
<td>31</td>
<td>245</td>
<td>900</td>
</tr>
</tbody>
</table>

The Arkansas General Assembly’s Subcommittee on Minority Health held a Legislative Public Forum in De Queen on July 30, 2009 at the Cultural Awareness Center. In attendance were area state representatives and senators, city council members, mayors and other elected officials from a five county area. The AMHC distributed evaluation forms and assisted the subcommittee in organizing the public forum through marketing efforts that included working with local citizens to ensure significant community attendance. A total of 98 people attended and had an opportunity to voice concerns regarding health care services, resources and challenges. Eighty-three percent stated that they learned more about the health of people in their county while 93 percent reported learning more about legislation that impact the health of their community.
Attendees at the De Queen Community Health Fair and Legislative Public Forum were asked to complete evaluations of the events. Attendees also provided demographic information. All evaluation forms were available in English and Spanish. Attendees were mostly married, Hispanic and female. The majority of event attendees were 25 – 44 years old and reported completing less than a high school education. Two-thirds of the attendees reported a household income of less than $20,000 annually.

The attendees reported plans to make changes in their health routine based on information presented and visit a doctor to follow-up on any abnormal screenings. There were also reported increases in knowledge about the health of people, the types of services available and legislation that impacts public health in the community.

The most effective methods of informing the predominantly Hispanic attendees about the events were by radio and word of mouth. The church also played a major role in disseminating information about the events as this location was the most reported to have posters displayed. (To review the Complete Sevier County Evaluation Report, go to www.amminorityhealth.com).

### MARITAL STATUS

<table>
<thead>
<tr>
<th>Status</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>26</td>
</tr>
<tr>
<td>Married</td>
<td>62</td>
</tr>
<tr>
<td>Divorced</td>
<td>5</td>
</tr>
<tr>
<td>Separated</td>
<td>5</td>
</tr>
<tr>
<td>Widowed</td>
<td>2</td>
</tr>
</tbody>
</table>

### RACE

<table>
<thead>
<tr>
<th>Race</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>White, Non Hispanic</td>
<td>16</td>
</tr>
<tr>
<td>African American</td>
<td>2</td>
</tr>
<tr>
<td>Hispanic</td>
<td>80</td>
</tr>
<tr>
<td>Native American</td>
<td>2</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>0</td>
</tr>
</tbody>
</table>

### GENDER

<table>
<thead>
<tr>
<th>Gender</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>33</td>
</tr>
<tr>
<td>Female</td>
<td>67</td>
</tr>
</tbody>
</table>

### HOUSEHOLD INCOME

<table>
<thead>
<tr>
<th>Income</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than $10,000</td>
<td>51</td>
</tr>
<tr>
<td>$10,000 - 19,999</td>
<td>26</td>
</tr>
<tr>
<td>$20,000 - 29,999</td>
<td>8</td>
</tr>
<tr>
<td>$30,000 - 39,999</td>
<td>7</td>
</tr>
<tr>
<td>$40,000 - 49,999</td>
<td>4</td>
</tr>
<tr>
<td>$50,000 - 59,999</td>
<td>1</td>
</tr>
<tr>
<td>$60,000 - 69,999</td>
<td>2</td>
</tr>
<tr>
<td>$70,000 – 79,999</td>
<td>0</td>
</tr>
<tr>
<td>$80,000 – 89,999</td>
<td>0</td>
</tr>
<tr>
<td>$90,000 – 99,000</td>
<td>0</td>
</tr>
<tr>
<td>Over $100,000</td>
<td>1</td>
</tr>
</tbody>
</table>

### EDUCATION LEVEL

<table>
<thead>
<tr>
<th>Level</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than high school</td>
<td>66</td>
</tr>
<tr>
<td>High School/GED</td>
<td>12</td>
</tr>
<tr>
<td>Some College</td>
<td>6</td>
</tr>
<tr>
<td>2-year college degree</td>
<td>7</td>
</tr>
<tr>
<td>4-year college degree</td>
<td>5</td>
</tr>
<tr>
<td>Graduate or professional degree</td>
<td>4</td>
</tr>
</tbody>
</table>

### AGE

<table>
<thead>
<tr>
<th>Age</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 20</td>
<td>12</td>
</tr>
<tr>
<td>20 – 24</td>
<td>6</td>
</tr>
<tr>
<td>25 – 34</td>
<td>24</td>
</tr>
<tr>
<td>35 – 44</td>
<td>31</td>
</tr>
<tr>
<td>45 – 54</td>
<td>15</td>
</tr>
<tr>
<td>55 and over</td>
<td>12</td>
</tr>
</tbody>
</table>
AMHC hosted its FY2010 second quarterly Community Health Fair on October 24, 2009 from 10 a.m. – 3 p.m. at the Fordyce Civic Center in Fordyce, Arkansas. Heightened awareness regarding living healthier lifestyles, access to health care services and resources, and educating the public about the need to get tested and screened awaited the predominantly African American attendees. Approximately 200 adults attended. There were 19 health related collaborative vendors present. The attendees were more likely to receive blood pressure, cholesterol and glucose screenings, although screening for HIV/AIDS and sickle cell were also available. *(Activities pursuant to Initiated Act I, (1)(2)(3)&(4); Act 574 of 2009, (1)(2) & (4); and the intent of Act 912 of 1991)*

<table>
<thead>
<tr>
<th>Blood Pressure</th>
<th>Cholesterol</th>
<th>Glucose</th>
<th>HIV</th>
<th>Sickle Cell</th>
<th>Total Sign-In</th>
<th>Estimated Attendance</th>
</tr>
</thead>
<tbody>
<tr>
<td>52</td>
<td>57</td>
<td>57</td>
<td>13</td>
<td>32</td>
<td>167</td>
<td>200</td>
</tr>
</tbody>
</table>

The Arkansas General Assembly’s Subcommittee on Minority Health held a Legislative Public Forum in Fordyce on the evening of October 23 at the Fordyce Civic Center. In attendance were area state representatives and senators, county judges, mayors and other elected officials from a five county area. The AMHC distributed evaluation forms and assisted the subcommittee in organizing the public forum through marketing efforts. A total of 59 people attended and had an opportunity to voice concerns regarding health care services, resources and challenges in Dallas County and surrounding counties. Eighty-four percent of attendees reported understanding all, while 15 percent reported understanding some of the information presented at the legislative meeting. Ninety-five percent of respondents reported that they were able to discuss important health concerns.
Attendees at the Community Health Fair and Legislative Public Forum were asked to complete evaluations of the events, which included demographic information. The Health Fair evaluation was completed by 65 attendees, while 165 attendees provided demographic information. The Legislative Public Forum evaluation was completed by 50 attendees.

The event attendees were mostly married (51%), African American (64%) and female (75%). The majority were 55 years old and over (44%) and reported earning a high school diploma or equivalent (49%). More than half of the attendees reported a household income of less than $19,999 annually (56%).

The attendees that reported not having access to medical care when needed indicated that this was due to the cost of medical services. The groups that reported the least access to health insurance and prescription coverage were male and Hispanic. They also were likely to report $10,000 – $19,999 in household income. (To review the complete Dallas County Evaluation Report, go to www.arminorityhealth.com).
LOCAL HEALTH FAIRS & EDUCATIONAL EVENTS
JULY—DECEMBER 2009

From July to December 2009, members of the AMHC leadership, board and staff participated in more than 48 educational awareness events and local organizational health fairs. Through these grassroots community events, an estimated 8,399* predominantly minority Arkansans have been exposed to the message of healthier lifestyles promotion, minority health disparities, health equity and have obtained an increased awareness of hypertension, stroke and other disorders disproportionately critical to minorities.

As of December 18, 2009, of the 48 educational awareness events and local organizational health fairs, the following represents the percentage of event outreach to different minority populations in Arkansas during the first half of FY2010.

<table>
<thead>
<tr>
<th>Minority</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>79.6%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>18.5%</td>
</tr>
<tr>
<td>Asian</td>
<td>1.85%</td>
</tr>
<tr>
<td>Marshallese</td>
<td>.05%</td>
</tr>
</tbody>
</table>

*number derived from sign-in sheets, attendee estimations by event coordinators and AMHC, and/or media reports

1st & 2nd QUARTER SCREENINGS

Early screenings can save lives. AMHC is dedicated to creating greater awareness of personal health knowledge to help minority populations throughout the state live healthier and longer lives through early detection and preventive screenings. Through its outreach initiatives, health fairs and collaborative partnerships, the following screenings are reported for the 1st and 2nd Quarter of FY2010.

<table>
<thead>
<tr>
<th>Screening</th>
<th>African American</th>
<th>Hispanic</th>
<th>Asian</th>
<th>Marshallese</th>
<th>Total Screensings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure</td>
<td>564</td>
<td>345</td>
<td>369</td>
<td>679</td>
<td>2180</td>
</tr>
<tr>
<td>Cholesterol</td>
<td>104</td>
<td>86</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Glucose</td>
<td>104</td>
<td>86</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV</td>
<td>104</td>
<td>86</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sickle Cell</td>
<td>104</td>
<td>86</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Activity pursuant to Initiated Act I, (1)(2)&(4) ; Act 574 of 2009, (1) &(4); and the intent and spirit of Act 912 of 1991)
Alliance on Community Health
The Southern Arkansas AIDS Project provides gender relevant and culturally sensitive social skills training to reduce high-risk behavior by heterosexual women and a community mobilization program to reduce unintended pregnancy and HIV. (Union, Miller, Bradley, Columbia & Ouachita)

Arkansas Human Development Corporation educates the Hispanic population in four targeted counties to increase HIV/AIDS awareness and screening. (Benton, Garland, Pulaski, Sevier)

Arkansas Medical, Dental and Pharmaceutical Association assists minority students with medical school expenses and mentors students to assist in successful matriculation. Academic progress reports of the scholarship recipients provided to AMHC. (Statewide)

Arkansas Minority Health Commission Navigation System
The system will be an integrated, online resource center with searchable databases of health care services in Arkansas, including information and services especially pertaining to minority health and health care. The Navigation System will provide the public and health care professionals with free and easy access to all relevant sources on minority healthcare in Arkansas through one convenient, user-friendly Web site. It will contain databases of health care providers, such as physicians, hospitals, free and low-cost clinics in counties across Arkansas, as well as links to other valuable health information, such as the Arkansas Department of Health’s Web site healthyarkansas.com and the Department of Human Service’s Web site in Spanish/Espanol. An interactive map of Arkansas will be used to locate services according to region, county, and city. (Statewide)

Arkansas Racial and Ethnic Health Disparity Study II A statewide racial attitude survey focusing on health and health care disparities. This project continues AMHC’s efforts to study gaps in services and increase awareness about health disparities and diseases that affect minority Arkansans. The study is a continuation of the 2004 Arkansas Racial and Ethnic Health Disparity Study and work with the UALR Survey Center on the Pulaski County Racial attitudes survey focusing on Health and Health Care in Pulaski County. The survey is a statewide survey that examines multiple health and health care issues in the community and provides an oversampling of African-Americans and Hispanics in the state. Some areas examined include health beliefs, health literacy, access to health care, quality health care, cultural competency, trust and perceptions of treatment by race and medical mistakes. It is a 50-question survey that was completed in July 2009. Results of the study were released on January 19, 2010. (Statewide)

Black Community Developers Play Safe The program conveys HIV prevention education through visual and performing arts, written word, group presentations and work shops for youth and link to job readiness and life skills. (Pulaski)

Brothas and Sistas, Inc. The program provides prevention education and testing to LGBT population in the community club setting. The program utilizes internet networks as a communication portal for online training, counseling and to gather much needed demographics and health information. (Pulaski, Jefferson, Garland, Crittenden & Saline)

Future Builders, Inc.
It’s Your Choice Program is designed to reduce risky behaviors in the homeless population by providing education and
INTERVENTION STRATEGIES/PILOT PROJECTS

intervention sessions along with screenings in church and community day centers for the homeless. (Pulaski)

Jefferson Comprehensive Care Systems, Inc. The SISTA (Sisters Informing Sisters About Topics on AIDs) Project provides social skills training for African-American women to decrease high risk sexual behavior on the campuses of historically or predominantly black universities and in 10 counties: UAPB, Philander Smith College, Arkansas Baptist College. (Arkansas, Ashley, Chicot, Desha, Drew, Pulaski, Jefferson, Lonoke, Lincoln & Prairie)

Jones Center for Families, Inc., To design an acculturation tool for Marshallese (Pacific Islanders) living in or that will be coming to live in Arkansas (mostly NW Arkansas) using an acculturation handbook based on Hawaii model. The goal is to provide Marshallese knowledge of and access to quality health care resources and services. “Living in Arkansas: What You Need to Know as a Marshallese” was unveiled by the AMHC and the Gaps in Services to Marshallese Taskforce on November 20, 2009 at the Jones Center. (Benton & Washington)

Marianna Examination Survey on Hypertension (MESH) MESH is a population-based representative household examination survey of blood pressure and cardiovascular disease risk factors in adults in Marianna, AR. It originated as an effort to assess the rate of hypertension of those at risk for cardiovascular disease, diabetes and stroke focusing on diagnosed, as well as, undiagnosed cases. Study results from this pilot project are anticipated March 2010. (Lee)

Sickle Cell Support Services Provides sickle cell disease education through community education workshops. Provides patient education to hospitalized patients which include 150 kits for patients. Host a sickle cell camp for 30 kids and five camp counselors. (Pulaski)

Southern Ain’t Fried Sundays Southern Ain’t Fried Sundays (SAFS) is a project uniquely designed to educate African-American churches and organizations about healthier alternatives to preparing and cooking southern-style foods. It directly addresses the issue of the high percentage of African-Americans who are overweight and obese. It is also a creative mechanism for partnering with churches in an effort to educate their members about the signs and symptoms of stroke, diabetes and heart attacks. SAFS is now being revamped to be offered year round. The “New and Expanded SAFS” also includes individual memberships and a Hispanic outreach component to start in FY2011. There are a total of 43 church
organizations that have participated in the SAFS program and 29 have requested more information on the American Heart Association’s Search Your Heart (SYH) program. The Search Your Heart program is offered as an optional component to the AMHC SAFS program. The Search Your Heart collaborative program offers a 9-week curriculum that focuses on physical activity, nutrition, and health education. An evaluation was completed by the “Southern Ain’t Fried Sundays” participants. Based on the evaluation, 69 percent of the participants agree that the program has influenced the way they cook. (statewide)

**STARHealth - Arkansas Department of Health** The primary purpose of STARHealth is to pilot a community health workers’ initiative in three Arkansas Delta counties in an effort to improve community health outcomes in these counties with large African-American populations. This innovative project engenders collaboration from AMHC, ADH and several other health support agencies and organizations and the full engagement of residents of the targeted counties. (Desha, Chicot & Lincoln)

**Tri-County Rural Health Network** This program provides education and referral services for the citizens of Lee, Monroe, Phillips, and St. Francis Counties in which will increase awareness around living with HIV/AIDS, providing linkage to available treatment, and prevention programs. Each county will play host to a community summit for further education and awareness.

**UAMS Center for Diversity Affairs** Provide academic enrichment for students ages 6 to 12. Help increase the pool of minority students entering the professions that promote health quality. Promote careers in health sciences to elementary-age children in Arkansas.

**UAMS Delta AHEC** Develop plan for a mobile “1-stop-shop” for resources that can move to different community locations. Examine and address health disparities and utilization of services in a seven county service area of the Delta AHEC. (Chicot, Crittenden, Desha, Lee, Monroe, Phillips & St. Francis)

**UAMS Arkansas Aging Institute** The Arkansas Aging Institute Delta Center on Aging will enroll 40 Delta Center on Aging patients in the “Healthy Lifestyles Challenge” 12-week program. The program focuses on the elderly population under physician supervision. The program is individualized for each participant and allows monitoring of health benefits and focusing on developing a healthy lifestyle. (Chicot, Crittenden, Desha, Lee, Monroe, Phillips & St. Francis)

**UAMS Regional Programs Medical Interpreter Training Program** UAMS Regional Program provides their Medical Interpreter Training Program (MITP) in health care facilities that are serving the fast growing Spanish speaking populations in Calhoun, Union, Bradley, Ouachita, Hot Springs, Lafayette, Hempstead, and Desha counties in Arkansas.

**Womens’ Council on African-American Affairs** This program provides educational sessions for youth focused on health and wellness. Sessions include Health Education, Violence Prevention and Conflict Resolution, Substance Abuse Prevention, HIV/AIDS Education Awareness and Career Opportunities. (Pulaski)
PUBLIC POLICY ADVOCACY

HEALTH CARE REFORM
While the national debate about health care reform was in full swing during this reporting period, the AMHC developed and released two policy statements and met with members of our congressional delegation in August and December to ensure that Minority Health Initiative interests were known and considered. AMHC’s December health policy statement included guiding principles for health reform and facts in Arkansas;

AMHC Guiding Healthcare Principles
Principle 1: Health care legislation should increase access to health care coverage for communities of color.
Principle 2: Health care legislation should include provisions to focus on racial and ethnic health disparities.
Principle 3: Health care should invest in prevention and wellness.
Principle 4: Health care coverage should not be denied based on a pre-existing medical condition.
Principle 5: Health care legislation should include provisions to increase public health workforce diversity.
Principle 6: Health care legislation should reduce cost for poor people.
Principle 7: Health policy decisions should be assessed with respect to their effect on minorities in underserved populations.

The Facts In Arkansas*:
Many Arkansans lack health insurance:
• 26 Percent of Black Arkansans
• 33 Percent of Hispanic Arkansans
• 13 Percent of White Arkansans

Most people who are uninsured are working:
• 79 percent of employed Black Arkansans
• 96 percent of employed Hispanic Arkansans
• 86 percent of employed White Arkansans

Many adults 19 - 44 in Arkansas lack health insurance:
• 62 percent of Black Arkansans
• 80 percent of Hispanic Arkansans
• 61 percent of White Arkansans

*Arkansas Center for Health Improvement Multi-State Integrated Database, Current Population Survey 2007

ARKANSAS RACIAL & ETHNIC HEALTH DISPARITIES STUDY II
This project continues AMHC’s effort to study issues relating to the delivery and access of health services and to identify gaps in services. Release of the study to the Governor and Arkansas General Assembly, which makes recommendations for improving the health of minority Arkansans and health care delivery in Arkansas, occurred January 19, 2010. To access the report, go to www.arminorityhealth.com.

ARKANSAS MINORITY HEALTH SUMMIT 2010
The AMHC, in collaboration with the UAMS Fay W. Boozman College of Public Health, is on tap to convene the “Arkansas Minority Health Summit 2010” April 15 - 17, 2010. Specifically, the summit will address the health status of minority Arkansans through presentations, discussions and workshops dealing with subject matters ranging from the social determinants of health to the
healthcare workforce pipeline. A significant goal of the summit is to develop common solutions, strategies, and best practices that can inform, shape, and operationalize public health policies in Arkansas. Confirmed speakers include three former U.S. Surgeon Generals; Dr. David Satcher, Dr. Joycelyn Elders and Dr. Richard Carmona.

ARKANSAS COALITION for OBESITY PREVENTION (ArCOP)
Arkansas BMI data has shown that minority children, specifically Hispanic and African-American children, are most at risk for overweight and obesity that can ultimately affect adult health status. The AMHC is a part of the Arkansas Coalition for Obesity Prevention to represent needs specific to minority children and to address racial and ethnic health disparities as it relates to obesity in Arkansas. ArCOP is the recipient of a grant from National Initiative for Children’s Healthcare Quality (NICHQ) titled “Mobilizing Healthcare Professionals as Community Leaders in the Fight Against Childhood Obesity.” The project team includes representatives from the state school nurses, rural hospital program, telemedicine, NAPHE, Arkansas Dietetics Association, Arkansas Chapter of the American Academy of Pediatrics, Arkansas Department of Education and the AMHC. The AMHC, specifically Dr. Nash, is a part of the project team to facilitate the inclusion of minority health care providers and to train health care providers in advocacy related to childhood obesity.

ARKANSAS HIV/AIDS MINORITY TASKFORCE
AMHC has hosted four HIV/AIDS Minority Taskforce meetings in this reporting period. Executive Director Trotter represents the AMHC at taskforce meetings. Currently, in anticipation of the release of its second annual report to the Governor and Arkansas General Assembly, the taskforce has partnered with Harvard Law School’s Wilmer-Hale Legal Services Center in assessing the current state of HIV/AIDS in Arkansas through the Harvard SHARP (State Healthcare Access Research Project) program. SHARP is conducted in conjunction with in-state community partners that examines states’ capacity to meet the healthcare needs of people living with HIV/AIDS. The HIV/AIDS Minority Taskforce second annual report is anticipated for release in early 2010.

ACUTE STROKE CARE TASKFORCE
The Acute Stroke Care Taskforce is charged with coordinating statewide efforts to combat the debilitating effects of strokes on Arkansans and to improve health care for stroke victims. This reporting period, the taskforce has completed a survey of hospitals with respect to stroke care in Arkansas and is developing a strategic plan of activities for 2010. AMHC’s Medical Director, Dr. Creshelle Nash, was elected to Chair the Policy & Standards Subcommittee of the Taskforce.

SOUTHERN REACH & GULF COAST HIV/AIDS RELIEF FUND / NATIONAL AIDS FUND
AMHC applied to the National AIDS Fund during this reporting period in the amount of $75,000 and anticipate a decision on the award late January 2010. With an eye towards increasing HIV/AIDS advocacy in Arkansas (and to seek external funding beyond tobacco settlement dollars), this application, if approved, will allow AMHC to build the advocacy capacity of current grantees and other health service organizations.
The Arkansas Minority Health Consortium is a collaboration of approximately 30 entities united to increase awareness of minority health issues and to advocate for resources. The primary goal of the consortium is to make an impact on health policy by researching and developing legislative initiatives to address health policy concerns that will benefit all Arkansans. During this reporting period, the AMHC continued to work collaboratively with appropriate entities to ensure continuation and/or implementation of legislative policy support initiatives of 2009.

Consortium Legislative Policy Support Initiatives 2009:

**Act 180** – Expansion of ARKids (SCHP) – reduces the number of uninsured children

**Act 308** – Primary Seat Belt Law Act - improves the safety of motorists on highways and roads in Arkansas making the mandatory seat belt law a primary law

**Act 352** – Substance Abuse and Prevention Treatment Legislation – concerning the offense of knowingly giving, procuring or furnishing alcohol to a minor

**Act 358** – AMHC Delta Survey – mandates a survey of health issues in the Delta every five years

**Act 393** – Trauma System Legislation – establishes a comprehensive trauma system for the state

**Act 574** – AMHC Structure – modifies, clarifies and expands the AMHC’s structure, duties

**Act 709** – Health Care Student Summer Program – creates the Health Care Student Summer Enrichment Program for underrepresented student

**Act 722** – Legislative Taskforce on Reducing Poverty

**SB 957** – Violence Prevention and Awareness – creates a taskforce to study the long-term impact of black-on-black crime

**Act 976** – Substance Abuse and Prevention Treatment – establishes criminal liability for social host who knowingly serves visibly intoxicated persons and allows minors to consume alcohol on his/her property

**Act 1191** – Sickle Cell Taskforce – creates the Legislative Taskforce on Sickle Cell Disease

**Act 1374** – Colorectal Cancer Legislation – takes the colon cancer pilot project statewide

**HB 1389** – Eye Exams for Children Entering School – provides for comprehensive eye exams for children entering schools for the first time

**Act 1489** – Minority Recruitment and Retention – requires state agencies, boards and commissions that license health professionals to procure and report demographic data to AMHC, ADH & ACHI

**Act 1490** - Minority Participation on Health Commissions and Boards - ensures that each state health related board and commission reflects the diversity of the state
AMHC SCHOLARLY PUBLICATIONS & STUDIES
JULY - DECEMBER 2009

AMHC Medical Director, Dr. Creshelle Nash was published in the Journal of the American Academy of Pediatrics and Arkansas Foundation for Medical Care Journal during this reporting period. In addition, Dr. Nash completed the five year update to the Arkansas Racial & Ethnic Health Disparity Study II in collaboration with Arkansas Children’s Hospital, and the UALR Survey Research Center. This 2009 study focuses on trends and behaviors in the Hispanic community of Arkansas. To obtain a copy of these articles, go to www.amminorityhealth.com
AWARENESS CAMPAIGNS

Four major awareness campaigns occurred during the reporting period; Sickle Cell Awareness Month, Fight the Flu/H1N1, Get Outside, Have Fun and Get Healthy! campaign and World AIDS Day 2009.

September 2009 provided an opportunity for the AMHC to highlight Sickle Cell Awareness Month in collaboration with the Pulaski County-based Sickle Cell Support Services Group and Arkansas Sickle Cell Consortium. Radio advertisements educating predominantly African American audiences ran for two weeks during the second and third weeks of September with the help of Corliss Williamson, former Razorback and NBA player.

In September and December, the AMHC (in collaboration with the Arkansas Department of Health) ensured that predominantly Hispanic and African-American communities across the state were educated about the need to “Fight the Flu/H1N1.” Executive Director, Idonia Trotter and Dr. Creshelle Nash provided listeners with the three ‘C’s (cover, clean hands, contain) and helped minorities understand the signs that indicate the need to see a doctor. Awareness spots ran on Hispanic and African American radio stations two weeks in both months.

The Arkansas Minority Health Commission and the Arkansas Game & Fish Commission (AG&FC) partnered with Arkansas Baptist College and Power 92 during the Delta Classic 4 Literacy game between Grambling University and UAPB on November 7. The “Get Outside, Have Fun and Get Healthy” Campaign included a seven minute video that encouraged the attendees to get off the couch, get out to one of the state parks and have fun with their children, while at the same time, getting healthy! Recipes from AMHC’s “Southern Ain’t Fried Sundays” cookbook was shared at the joint AMHC/AG&FC booth at the event along with educational and awareness information regarding hypertension, stroke, diabetes, and good nutrition.

(Activities pursuant to Initiated Act I, (1): Increase Awareness; Act 574 of 2009, (4) Promote public awareness and public education; and the spirit and intent of Act 912 of 1991)
WORLD AIDS DAY 2009
Celebrated Statewide

Balloon Release at Philander Smith College in Little Rock

The AMHC's Arkansas HIV/AIDS Prevention Coalition has continued to expand its activities as well as increase collaboration to engage other organizations across the state around World AIDS Day. The HIV/AIDS Prevention Coalition and the Arkansas Department of Health partnered on a myriad of events across the state. As a result of this expansion, World AIDS Day 2009 (December 1) offered increased participation including 25 churches that collaborated with Compassion Sunday activities on November 29, six non-profit organizations that held balloon releases representing those Arkansans who have lost their lives to AIDS and three educational symposiums (ASU-Jonesboro, Philander Smith College-LR, L.V. Floyd Community Outreach Center-Blytheville) to explore the issue and encourage increased awareness/screening among college students and the general public. Youth were engaged with a “Speak Up! Take Charge! HIV Prevention is Your Choice” essay/poster contest.

Dr. Paul Halverson, Director of the Arkansas Department of Health, HIV/AIDS Prevention Advocate & Actress Sheryl Lee Ralph and Dr. Idonia L. Trotter, Executive Director of the Arkansas Minority Health Commission after the One Woman Show entitled “Sometimes I Cry” performed by Ralph at the Wildwood Park for the Performing Arts in Little Rock

(Activities pursuant to Initiated Act I, (1), (2) & (3); Act 574 of 2009, (2) &(4); and the spirit & intent of Act 912 of 1991)
COLLABORATIVE PARTNERSHIPS
July—December 2009

Colleges & Universities
Arkansas State University, Jonesboro
Philander Smith College, Little Rock
Arkansas Baptist College, Little Rock
UA Div. of Agriculture Cooperative Extension Services
- Pulaski County
- Dallas County
- UAMS Center for Diversity Affairs
- UAMS College of Nursing
- UAMS College of Public Health
- AR Center for Health Disparities ‘Healthy Ways Weight Control Project (Pulaski, Jefferson Counties)
- UAMS Delta AHEC
- UAMS Living Well with Sickle Cell
- UAMS “Spit for the Cure”
- UAMS Texarkana Regional Center on Aging
- UAMS Winthrop P. Rockefeller Cancer Institute
- University of Arkansas at Pine Bluff
- University of Arkansas at Little Rock
- University of Arkansas for Medical Sciences

Government Agencies/Commissions
Arkansas Center for Health Improvement
Arkansas Department of Health
- ADH HIV/STD/Hepatitis C Unit
- ADH Tobacco Prevention & Cessation Program
- ADH Center for Health Statistics—BRFSS
- ADH “Fight the Flu in Arkansas” Campaign
- ADH Heart Disease and Stroke Work Group
- ADH Sevier County Health Unit
- ADH Dallas County Health Unit
Arkansas Department of Human Services
- Dallas County
- Sevier County
Arkansas Forestry Commission
Arkansas Game & Fish Commission
Arkansas Lt. Governor Bill Halter (free clinic project)
Arkansas State Revenue Office—De Queen
City of De Queen Mayor’s Office
City of Fordyce Mayor’s Office
U.S. Department of Commerce—US Census Bureau

Minority Health Representation on Monthly Taskforces, Coalitions and Committees
American Heart Association Minority Action Committee
Arkansas Cancer Coalition
Arkansas Heart Disease & Stroke Prevention Task Force
Arkansas HIV/AIDS Prevention Coalition
Arkansas HIV/AIDS Minority Taskforce
Arkansas Coalition for Obesity Prevention
Diabetes Advisory Council
Legislative Taskforce on Sickle Cell Disease
Tobacco Prevention & Cessation Advisory Committee

AMHC Pilot with Partners Community Projects
- The Jones Center for Families Gaps in Services to Marshallese Project
- UAMS Delta AHEC Navigation Project
- UAMS Arkansas Aging Initiative Delta Center on Aging, “Healthy Lifestyles Challenge Project”
- Arkansas Department of Health, STAR Health Community Health Workers Project
HIV Outreach Initiatives
AMHC/ADH Joint HIV Prevention Project representing 12 grantees serving 41 Arkansas counties

model joint HIV/AIDS prevention efforts are underway throughout the state under the new leadership at the AMHC and the ADH HIV/STD/Hepatitis C Unit. Pictured are Trotter and Kevin Dedner, ADH HIV/STD/Hepatitis C Unit Director at a workshop for potential HIV/AIDS prevention grantees in September 2009.

Community Organizations (not mentioned elsewhere)

Alliance on Community Health (Union, Columbia, Ouachita, Miller, Bradley)
Arkansas Human Development Corporation (Faulkner, Garland, Pulaski)
Black AIDS Institute (Pulaski, Crittenden, Jefferson, Mississippi)
Black Community Developers (Pulaski)
Brothas & Sistas, Inc. (Pulaski)
Centers for Youth & Families (Chicot, Desha, Jefferson, Lincoln, Searcy, Van Buren)
Chicot Memorial Hospital (Arkansas, Ashley, Chicot, Desha, Lincoln, Union, Cleveland, Drew, Bradley)
Future Builders, Inc. (Pulaski)
Jubilee Christian Center (Jefferson)
Planned Parenthood of Arkansas and East Oklahoma (Pulaski)
St. Francis House NWA, DBA Community Clinics (Benton, Washington)
White River Rural Health (Baxter, Clay, Cleburne, Craighead, Cross, Fulton, Greene, Independence, Izard, Jackson, Lawrence, Lonoke, Marion, Mississippi, Monroe, Prairie, Poinsett, Randolph, Searcy, Sharp, Stone, Van Buren, White)
COLLABORATIVE PARTNERSHIPS
July—December 2009

Marshallese Consulate Office, Springdale
NAACP (Health Equity Presentations)
    National Association of Free Clinics (in conjunction with the Arkansas Free Medical Clinic)
Odyssey Health, Inc.
PARK, Inc.
Part of the Solution, Inc.
SW Arkansas Counseling and Mental Health Center
South Arkansas Substance Abuse Center
St. Mark Baptist Church
Tobacco Awareness Program of Union, Ouachita, Columbia and Dallas County
Village Project Tobacco Free Education/Awareness
Women’s Health Project, African
    Women’s Council on African American Affairs, Inc.

Churches
Forty-three African American Churches in Delta communities and Central Arkansas had member groups assigned to the “Southern Ain’t Fried Sundays” program

Fourteen predominantly Hispanic Churches participated with dissemination of flyers/information for Sevier and surrounding counties health fair and public forum held July 30, 2009

Twenty African-American/Hispanic churches participated in dissemination of flyers/information for Dallas County health fair and public forum held October 23, 2009

African American and Hispanic churches throughout the state were provided flyers/information regarding the Arkansas Free Medical Clinic Project held on November 21, 2009

Twenty-five Churches in Delta communities and Central Arkansas collaborated with AMHC on World AIDS Day “Compassion Sunday” events on November 29, 2009

Sickle Cell Outreach Initiatives
Mutual Sickle Cell Support Group, Jefferson Arkansas Sickle Cell Consortium, Statewide Sickle Cell Support Services, Pulaski

Media Awareness/Education to Minority Communities
STAND News—African American, Central AR
KIPR—Power 92—African-American, Statewide
KOKY - African-American, Little Rock
KCLT/KAKJ - African-American, Helena/ West Helena
Asian American Reporter—Asian Print
KAKJ—African-American, Forrest City, Marianna, West Helena
KMLK - African-American, El Dorado
KZRB - African-American, Texarkana
KDQN-Hispanic, De Queen
KITA—Hispanic, Little Rock
Enlace Latino—Hispanic Print
Hola! Arkansas—Hispanic Print

AMHC appreciates the many volunteers across the state who have given countless hours in partnering with us on health fairs, public forums, screenings, piloted projects, awareness events and public policy advocacy during the first half of FY2010!
The Commissioners consists of 12 members; six appointed by the Governor, with each of the four Congressional Districts represented; three appointed by the Speaker of the House of Representatives; and three appointed by the President Pro Tempore of the Senate. (Pursuant to Act 574 of 2009)

Seated: Willa Black-Sanders, Christine Patterson, Vivian Flowers
Standing: Dr. Carolyn Mosley, Raul Blasini, Dr. O.T. Gordon, Vanessa Davis, Dr. Linda McGhee
Commissioners Not Pictured: Marta Davis, Sandra Mitchell, Luis Calderon, Larnell Davis

Vivian Flowers, MPS, AMHC Chair
Director, UAMS Office of Diversity & Recruitment

Christine Patterson, MSW, LCSW, AMHC Vice-Chair
Director, Office of Minority Health & Health Disparities, Arkansas Department of Health

Willa Black-Sanders, MPH, AMHC Secretary
Assistant Dean, UAMS College of Public Health

Dr. Carolyn Mosley, Ph.D., RN, CS, FAAN
Dean, College of Health Sciences
University of Arkansas—Fort Smith

Larnell Davis Executive Director, Jefferson Comprehensive Care Systems, Inc.

Dr. O.T. Gordon, MD
Partner, Gastroenterology Associates

Raul Blasini, Retired Army
Arkansas Prostate Cancer Foundation, Board Member

Vanessa Davis, Assistant Director of Cultural Diversity and Minority Affairs, Division of Behavioral Health

Dr. Linda McGhee, MD
Associate Professor, Department of Family & Preventive Medicine, AHEC NW UAMS

Marta Davis
Luis Calderon
Sandra Mitchell
Seated: Patricia Minor (RN, Outreach Initiatives Manager), Dr. Trotter and Dr. Nash

Standing: Siobhan Traylor (Receptionist), Cory Adams (Financial Analyst), Rachael Hopes (Asst. to the Director), Cassandra Woods (Senior Project Analyst), Hanan Givens (IT, Webmaster, Pilot with Partners Project Manager). Also pictured, Jonathan Dunkley (UA Clinton School of Public Service Capstone Fellow)

Not Pictured: Clarissa Coleman, Silvia Fernandez, and Regina Wilkerson (UA Clinton School of Public Service Capstone Fellow).
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GOAL

The goal of the Arkansas Minority Health Commission is to be a catalyst in bridging the gap in the health status of the minority population and that of the majority population in Arkansas. To achieve this goal, the commission focuses on addressing existing disparities in minority communities, educating these communities on healthier lifestyles, promoting awareness of services and accessibility within our current health care system, and making recommendations to relevant agencies, the Governor and to the state legislature.
YOUR HEALTH. OUR PRIORITY.

Putting Your Tobacco Dollars to Work!

Submitted To:
The Honorable Governor Mike Beebe
Senate President Pro Tem
Speaker of the House
Arkansas General Assembly

Submitted By:
Idonia L. Trotter, J.D., M.P.S.
Executive Director/Arkansas Minority Health Commission

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Arkansas Minority Health Commission
1st Quarter & 2nd Quarter Combined Update
July - December 2009