Fifth Annual National Conference on Health Disparities
Reducing Health Disparities through Sustaining and Strengthening Healthy Communities

November 30 - December 3, 2011
Charleston, SC 29403

SUMMARY REPORT
Friends,

It was my great pleasure to join in welcoming you to the fifth annual conference on Health Disparities: Reducing Health Disparities through Sustaining and Strengthening Healthy Communities. It was a honor and privilege for the Medical University to co-sponsor the first four conferences. We were excited to partner with Morehouse School of Medicine, Clemson University, South Carolina State University, Voorhees College, Benedict College, Allen University, Claflin University, University of South Carolina, South Carolina Department of Health and Environmental Control, and the Congressional Black Caucus Foundation on the current conference.

In spite of our best efforts disparities persist and exact a toll on the quality of life and economic resources. This conference continued to address the question: How do we augment our nation’s current “sick-care” medical model with a comprehensive “well-care” approach that sustains and strengthens communities by progress in preventing illness and reducing health disparities.

We were pleased that you chose to join us at this year’s conference and looked forward to the three rewarding days of participation. Thank you for coming and for sharing your expertise and excitement with us.

Sincerely,

Raymond S. Greenberg, MD, PhD
President, Medical University of South Carolina

"An equal opportunity employer, promoting workplace diversity."
Fifth Annual National Conference on Health Disparities
Held November 30 - December 3, 2011
Charleston, SC

Reducing Health Disparities through Sustaining and Strengthening Healthy Communities

The Fifth Annual National Conference on Health Disparities took place in Charleston, SC. Its mission: to focus on policies and programs that address prevention, social determinants and personal responsibility to reduce health disparities.

Just as in the previous four conferences, this conference addressed the question: How do we augment our nation’s current “sick-care” medical model with a comprehensive “well-care” approach that sustains and strengthens communities by fostering genuine progress in reducing health disparities?

From 2007 through 2010 national conferences in Charleston, SC; St. Croix, U.S. Virgin Islands; Atlanta, GA; and Philadelphia, PA brought together diverse partners and attendees to share their knowledge of health disparities. These programs uncovered a larger story: that social determinants, such as poverty, low education levels, public safety, environmental quality and inadequate housing are major contributing factors to health disparities. So, too is personal responsibility—each person’s willingness and ability to make informed decisions about lifestyle choices to reduce the likelihood of disease development.

These findings suggest the potential benefits of dedicating more of our nation’s healthcare resources to programs that emphasize education, prevention and personal responsibility.

Participants in the conference discussed ways to incorporate these understandings into policies and programs that target health disparities. These may include education and prevention programs, community outreach efforts, improved access to care, environmental quality and public safety initiatives, and policies that recognize and address the impact of social determinants and personal responsibility on human health.

All presenters were consistent in their conclusions that until our nation addresses the social determinants of health care—poverty, access to fresh fruits and vegetables, crime, access to playgrounds, parks and places to exercise, and racism—all efforts to improve health in this country will just address the symptoms.
Day One, November 30, 2011
Student Roundtable and Poster Sessions

The Fifth National Conference on Health Disparities opened with student sessions to engage the next generation of health professionals in finding solutions to health disparities. Students from Benedict College, South Carolina State University, Claflin University, Temple University, the University of Oklahoma, the Medical University of South Carolina, California State University, Long Beach, and Cheyney University presented the results of their research and experiments in health care. The students also participated in roundtable discussions on health care. Ms. Cassandra Ricks Allen, (below) completed an informative and student-centered day with a workshop entitled, “National Library of Medicine: Empowering Communities with Health Information.” Ms. Ricks Allen, the Outreach Librarian for the National Library of Medicine, provided students a hands-on session on how they could navigate and access the Library’s web based resources for their research as well as a source for learning about health care issues.

MUSC Students Address Access to Transportation as a Health Care Issue for Hispanics

Andrew Stufflebean and Kristen Elmore, two Medical University discussed their poster entitled, “Transportation Barriers Limit Access to Healthcare and Community Resources Among Hispanics.” Stufflebean observed that “all policy is health care policy” and described how the transportation system in Charleston limited the access of Hispanics to health care and related services because of language barriers. Kristen Elmore described how the students conducted a survey and attended a community meeting to help the city’s growing Hispanic population to resolve these issues. One of their solutions was very simple: they developed and published a guide to bus transportation and other services that was in Spanish and accessible to the city’s Hispanic community.
The Health Disparities Conference was a learning experience that many Public Health students should have. The first day was really important to me because I had gotten the chance to see other people work and it gave me an idea of how I should finish my senior paper. Everyone was so friendly and did not mind if you would like to see their work.

Lashanda McKnight, Benedict College

The conference was an enriching experience for me and it has broadened my knowledge and gave me more perspectives about health disparities in our country. Besides it is a great chance for me to meet interesting people and learn from their experiences.

Saber Alaoui, Cheyney University

The conference was a great place to network and meet others with similar interest. It was informative and it was great to witness the ardor that participants had for confronting the Public Health issue as a whole.

Lennan Kayla Maree, Cheyney University

Courtney Meidra Anderson of Claflin University presented her poster on “Effect of Cancer Chemotherapies on Human Telomerase Reverse Transcript (hTERT).” She and Leslie Wooten-Blanks studied the effect of chemotherapy on cancerous breast cells.

Student Comments about the Fifth Annual National Conference on Health Disparities

My reflection on the conference is that it was lovely. It meant a great deal to me even being chosen to attend. It was very insightful. The panelists on day four were phenomenal throughout the day. I personally networked with a couple of people that were there and I am still in contact with them today.

Keyshonda Bailey, Benedict College

The conference enabled me to network with Public Health professionals who are passionate about eliminating the barriers that minorities face as a society. It was a wonderful experience to be able to hear the panelists share their ideas and views on how to strengthen the minority community.

Mully Chea, Temple University

It gave me a better understanding of minority health disparities. It also made me more intrigued to pursue a career in minority health... Attending the Student Research Forum of the Fifth
Annual National Conference on Health Disparities was really an honor for me. It granted me the opportunity to share what I have learned as well as learn from other’s experiences concerning research on health disparities.

CoDanielle Greene, South Carolina State University

To Whom It May Concern: I would like to offer thanks and share a few thoughts on what attending the Fifth Annual National Conference on Health Disparities meant to me. As a Doctor of Nursing Practice student, I appreciated the opportunity to present a poster on “Disparities in Hypertension Prevalence among Obese Children and Adolescents” to an audience of my peers and mentors. The experience was supportive and non-threatening. Attending the conference was also a great opportunity to network with other professionals engaged in similar work.

Tiffany H. Williams, Medical University of South Carolina

The Fifth Annual National Conference on Health Disparities impacted my life both personally and professionally. As one of the leaders of the roundtable discussion and a minority, it encouraged me to step out of my comfort zone, represent my school and speak up on behalf of my community. The conference took everything my classmates and I had worked on, everything our instructor had taught us, and compiled it in a concise and comprehensive manner. It also provided me a better understanding of the issues with supplementary analytical analyses, ideas for expansion and additional forms of application of our community work. This conference further enhanced our understanding, leading us to new ideas, methods, and a greater motivation as we were able to see other students and professionals present issues impacting their communities.

Veronica Ramos, Medical University of South Carolina

The Fifth Annual National Conference on Health Disparities was a great experience for any rising scholar. As students, we must prepare ourselves for our future professions, inside and outside of the classroom. . . The roundtable discussion allowed me to meet with students participating in various research projects from different parts of the country. I was surrounded by intelligent, driven, creative future doctors, social workers, administrators and nurses. We were able to compare experiences and learn from one another.

Jennifer Paige, Medical University of South Carolina

When it was time to do the poster presentations, I was amazed at how knowledgeable some my peers were about their research. Some in the same situation as I only performed research for the duration of 10 weeks. However, the information provided appeared as a project that was worked on for several years.

Jonathan Brown, Claflin University
Day Two – December 1, 2011

The second day of the conference started with greetings from the various institutions that were cosponsoring the conference. The following people representing the various institutions who were partners and cosponsors of the conference brought greetings:

• Dr. Raymond S. Greenberg, President, Medical University of South Carolina
• Dr. John E. Maupin, President, Morehouse College School of Medicine
• Dr. Elsie L. Scott, President and CEO, Congressional Black Caucus Foundation, Inc.
• Dr. G. Dale Wesson, Vice President for Research, Economic Development and Public Service, South Carolina State University
• Dr. Milton Green, Allen University
• Dr. Janeen Witty, Vice President for Academic Affairs, Benedict College
• Dr. Henry Tisdale, President, Claflin University
• Dr. Lisa Waddeil, Deputy Commissioner for Health Services, South Carolina Department of Health and Environmental Control

Keynote Address:
Dr. Reed V. Tuckson

“When It Comes to Health, We Are All in This Together.”

After the greetings from the sponsors Dr. Reed V. Tuckson, Executive Vice President and Chief of Medical Affairs at the UnitedHealth Group, gave the opening keynote address. Focusing on the theme of “the social determinants of health,” Dr. Tuckson noted that “health is the place where all of the social forces converge to express themselves in the greatest clarity and the most importance.” He noted that Americans should not have any interest in “ghettoizing minority problems” because the problems are American problems and all Americans have a stake in solving them.

In a presentation that combined images and data and a combination of seriousness and humor, Dr. Tuckson’s conveyed to the audience that the current state of health care in the United States required them to be focused, committed and compassionate. Using the 1985 Malone-Heeble Report (The Report of the Secretary’s Task Force on Black and Minority Health) as a baseline for his analysis of the current state of health among African Americans, Dr. Tuckson showed how little progress had been made in improving the health disparities that continued to cause African Americans to die in greater numbers than whites due to heart disease and strokes, homicides and accidents, cancer, infant mortality, cirrhosis, and diabetes.

Dr. Tuckson was not just a bearer of bad news. He proposed solutions to the ongoing health care crisis in the country. In addition to calling for
community engagement in solving health care issues, he proposed that people change their own individual behavior (reduce smoking and drinking and exercise more), increase high school graduation rates, improve the environment in which people live, share health care successes across state lines, and bring in the private sector and use its leadership, access to capital and innovative ideas to solve the health care crisis. He also stated that community activists should be a part of resolving health care issues. Finally, Dr. Tuckson cited the “Partnership for A Healthier America” as an example of the right approach to address health disparities because it focused on a common problem, obesity, engaged the schools, taught parents how to cook for their children, and taught children how to cook for themselves. Dr. Tuckson noted that the most important reason for the success of the program was that it engaged the community as a whole, used modern marketing techniques that employed the right language for the problem, and allowed the Obama Administration to partner with a wide range of private and public organizations.

Secretary Kathleen Sebelius

Dr. King used to say that health inequality was the most shocking and inhumane form of injustice.”

Secretary of Health and Human Services Kathleen Sebelius also addressed the conference on the morning of the second day. In her remarks she noted that nothing is more fundamental to opportunity than good health. She observed that “at the most basic level, health is about freedom. It is freedom to go about our daily lives without the experience of pain, and it is freedom to live long enough to achieve our goals” in life. According to Secretary Sebelius, “good health does not guarantee you opportunity, but it is really hard to achieve opportunity unless you have good health.”

In her address Secretary Sebelius combined an assessment of the failures of the nation’s health care system with an analysis of what the Obama Administration and the provisions of the Affordable Care Act were doing to resolve them. Noting that the many of the health care disparities that Dr. Martin Luther King called out decades still existed, she documented the tremendous amount of money that such inequities cost the nation. She stated that health disparities cost the nation $300 billion a year in lost productivity, due to people’s absentee rates and not having a fully productive workforce. Thus, not having good health was not just an issue that affected only individual Americans who did not have access to healthcare providers, it was also a steep economic issue that was paid by every American.

Secretary Sebelius described how the Obama Administration had made health a priority across the entire federal government and not just a task for the Department of Health and Human Services. All of the various departments and agencies of the federal government—the EPA, DOE, DOT in partnership with the state governments—were developing a national prevention strategy that examined every policy to determine its impact on health. The Affordable Care Act was the centerpiece of the administration’s new approach to expand health care coverage, but its strategy also involved programs such as “Million Hearts” to prevent second heart attacks and strokes; the use of funds from the American Recovery Act to create more community health centers and to create a “Peace Corps for Health Care;” and the expansion of the
administration’s support for flu vaccinations and treatment for AIDS.

Secretary Sebelius concluded her presentation by noting that in spite of the misinformation being spread about the Affordable Care Act, it was “the most powerful law for reducing health disparities since Medicare and Medicaid was passed in 1965.” In fact, “it may be the most important law ever passed.”

Dr. John Ruffin, Luncheon Keynote

“We are challenged to get minorities involved in clinical trials.”

Dr. John Ruffin, Director of the National Institute of Minority Health and Health Disparities, delivered a luncheon keynote address that outlined the programs funded by the NIMHHD for research on health disparities. He discussed the research programs, the extramural and intramural programs, Centers of Excellence, and the loan repayment programs for health and science students who did research on health disparities among minorities, or who planned to practice in areas and communities whose residents suffered from health disparities disproportionately.

He cited several programs funded by the NIMHHD that had made a difference in addressing or increasing our understanding of how to address health disparities. One of the programs was a survey of cancer survivors conducted by the Center of Excellence at Charles Drew University of Medicine. Another study was completed by the University of Puerto Rico on pediatric asthma. The study showed the prevalence of asthma among youth who had been physically or sexually abused.

Dr. Ruffin also addressed the issue of convincing more minorities to participate in clinical trials. He stated that often health problems among minorities could not be solved because they would not participate in clinical trials. The reason for their failure to participate was trust. Minorities did not trust the system. Nevertheless, he cited one successful program that was addressing this issue: the EMPaCT program sponsored by the University of Alabama at Birmingham. UAB had developed the Enhancing Minority Participation in Clinical Trials program by forming partnerships with historically black colleges, Centers of Excellence, NIMH, and the National Cancer Institute. The University of Minnesota also received funds from NIMH to develop an EMPaCT program.

Dr. Ruffin concluded his presentation by discussing the NIMH’s BRIC (Building Research Infrastructure and Capacity in Minority Institutions) and other community-based programs.

Day Three – December 2, 2011

Ms. Vernellia Randall
Morning Keynote Address: “Anti-Discrimination Law as a Determinant of Health”

“If you want to help a group of people, you have to understand their history.”

Ms. Vernellia Randall, a professor of law at the University of Dayton, gave the morning keynote address on the impact of history and law on health disparities. She described how history had shaped
the health determinants for African Americans because they arrived sick from the slave trade, endured harsh conditions in slavery with limited access to health care, and then lived an additional 100 years in legal apartheid until 1964 and the passage of the Civil Rights Act. During that 100-year period they often did not have access to public or private hospitals, or any form of professional health care. In her analysis, for generations African Americans have always been sicker than whites and this legacy of sickness has left a gap in African-American health that cannot be closed in one generation. Thus, according to Professor Randall, despite their presence in the United States, the health of African Americans, based on indicators such as life expectancy, infant mortality, and low birth weight babies, is worse than that for some third world countries.

Professor Randall also analyzed how the American legal system continues to enforce health disparities. The legal system protects and enhances the social determinants of health because it cannot be used to prohibit the dumping of toxic waste, the displaying of billboards advertising alcohol and cigarettes, and the proliferation of liquor stores in African-American communities. Professor Randall defined “colorblind racism” as the kind that had a disparate impact on African Americans, but its practitioners did not recognize or even acknowledge its harmful effects because they were not racists. They failed to recognize that racism was institutional and systemic and a part of even the health care system.

Professor Randall proposed the rewriting of civil rights and discrimination laws to address institutional racism which would in turn address the social determinants of health disparities. These new laws would allow citizens as individuals as well as organizations to sue hospitals as well as other health care providers that practiced discrimination without having to prove discriminatory intent or to have standing.

Carolyn Sawyer and Thomas W. Dortch, Jr.

“We cannot expect others to do things for us that we can and must do ourselves.”

During the third day of the conference, Thomas W. Dortch, Jr., the former national chairman of 100 Black Men of America and an independent businessman, gave the luncheon keynote address. Mr. Dortch gave a very personal account of why the nation needs to address and solve the issue of health disparities. He told the story of his own battle with testicular and prostate cancer, diseases that only 7% of those who contract them survive. He was a survivor primarily because of his personal contact with United States Senator Sam Nunn for whom he worked as the Chief Administrator and who helped him to find the best doctors available. Eleven doctors provided him the best possible medical care and treatment to survive cancer. But he made the point that the average American, who was not working for a United States Senator and who did not have access to eleven doctors, would not receive the same care and would probably die from the disease as a result.

While Dortch was national chairman of 100 Black Men of America the organization grew from forty-three to 102 chapters and adopted new programs that included health care as a priority. Under his leadership the organization developed the “Four for the Future” plan to engage its members in education, economic development, mentoring, and health and wellness issues. The organization’s health initiatives addressed youth obesity, teenage
pregnancy, HIV/AIDS, and it created a prostate cancer coalition to encourage African-American men to undergo screening for the disease.

Mr. Dortch also informed the audience about his experiences as Chairman of the Board of Grady Memorial Hospital in Atlanta, the city’s oldest and largest public hospital. The hospital struggled financially because it primarily served a black, poor and indigent population who often could not pay for their health care. While many of Atlanta’s city leaders wanted to close the hospital and deprive the people who needed its services the most, Dortch fought to save it. With the help of members of Atlanta’s business community, Dortch saved the hospital and it continues to serve the underserved in the city. It now has one of the best trauma centers in the nation.

**Day Four - December 3, 2011**

Mr. Douglas A. Michels

“Let’s not leave out the private sector; let’s learn from them about fiscal discipline, innovation, and return on investment.”

Mr. Douglas A. Michels, President and CEO of OraSure Technologies, Inc., opened the fourth and final day of the conference with a keynote address on public-private partnerships. Mr. Michels discussed how public-private partnerships could be used to address health disparities and to find treatment and cures for disease such as HIV/AIDS and hepatitis C. He described several examples of public-private partnerships that had an impact on health disparities. In Philadelphia, for example, his company partnered with the city and the state to launch an initiative to provide HIV testing to those in the population who were medically underserved. The initiative was successful and it had an immediate impact on health disparities in the city. In Washington, D.C., where one of every fifty residents had HIV/AIDS, his company worked with the D.C. government on a project entitled, “Coming Together to Stop HIV in D.C.” It expanded testing for HIV throughout the city and was immensely successful.

Mr. Michels has also developed innovative techniques for HIV/AIDS testing without needles and blood and for testing citizens for Hepatitis C. He maintained these new techniques for testing for these two diseases under auspices of public-private partnerships would address health disparities, save lives, and promote public health in general.

He concluded that the promotion of more public-private partnerships in health care would achieve the following:
- Leverage access to modest amounts of federal dollars;
- Encourage innovation and cooperation among all stakeholders in government;
- Provide opportunities to address new issues without jeopardizing existing programs; and
- Leverage modest federal support to accomplish what has already been done in addressing HIV/AIDS.

Congressman Jim Clyburn

“The health care act created a two-for—it created jobs and improved health care.”
Congressman Jim Clyburn delivered the final keynote address of the conference. It was a very special presentation because he recounted the history of the passage of the Affordable Care Act. He discussed how the drive for affordable health care originated in the presidential campaign of 2008, with every candidate having a health care proposal. He also noted that the financial crisis of September 2008 resulted in Congress having to pass a $700 billion bailout for the banks that many felt would derail any consideration of passing health care legislation.

Nevertheless, once President Barack Obama was elected, Clyburn and other members of Congress pressed on and were not derailed in their efforts to pass legislation that provided all Americans affordable health care. Even though they were criticized for not pursuing jobs first instead of health care, Congressman Clyburn made the point that health care and jobs went hand-in-hand—the Affordable Care Act created many of the jobs that helped to reverse the loss of jobs that was occurring in other sectors of the economy. In a rousing and inspirational presentation Congressman Clyburn reiterated some of the ideas and principles that our nation has always observed: providing people opportunity, not punishing children just because of the circumstances of their birth, and make the benefit of health care available to all people regardless who they are, who they know, or their station in life.
Fifth Annual National Conference on Health Disparities
Reducing Health Disparities through Sustaining and Strengthening Healthy Communities

November 30 - December 3, 2011, Charleston, SC

Day One  November 30, 2011

2:00 pm

Opening Remarks and Overview of Student Forum:
Undergraduate and Graduate Student Forum – Program Coordinator: Dr. Janeen P. Witty, Vice President for Academic Affairs, Benedict College, Columbia, SC

Poster Presentation & Roundtable Discussions:
Dr. Marveilla E. Ford, Medical University of South Carolina

Featured Presentation:
Ms. Cassandra Ricks Allen, M.L.S., Outreach Librarian, National Library of Medicine
Location: Crystal A, Charleston Marriott Hotel

Closing Remarks:
Dr. Deborah C. Williamson, Medical University of South Carolina
Location: Crystal A, Charleston Marriott Hotel

7:00 pm

Opening Reception:
South Carolina Aquarium, 100 Aquarium Wharf, Charleston, SC

Welcome:

Host: Dr. David E. Rivers, Assistant Professor and Public Information and Community Outreach Director, Medical University of South Carolina, Charleston, SC
Dr. Raymond S. Greenberg, President, Medical University of South Carolina, Charleston, SC
Dr. John E. Maupin, President and CEO, Morehouse School of Medicine, Atlanta, GA
The Honorable Jimmy S. Gallant, Councilmember, District 5, City of Charleston, Charleston, SC
Dr. Marjorie Innocent, Senior Director of Research & Programs, Congressional Black Caucus Foundation, Inc., Washington, DC
The Honorable Donna C. Christensen, MD, Congressional Black Caucus Health Braintrust Chair, U.S. Congress, VI
Ms. Maria Pajil Battle, Senior Vice President of Public Affairs and Marketing, Keystone Mercy Health Plan, Philadelphia, PA
Dr. William Bailey, Franklin C. Fetter Family Health Center, Charleston, SC

Day Two December 1, 2011

Location: Crystal Ballroom, Charleston Marriott Hotel

8:45 am

Opening Remarks: Host Institutions

Ms. Carolyn Sawyer, Communications Strategist, Tom Sawyer Company, Mistress of Ceremonies

The Honorable Gary White, Mayor Protem, City of Charleston, SC
Dr. Raymond S. Greenberg, President, Medical University of South Carolina, Charleston, SC
Dr. John E. Maupin, President, Morehouse School of Medicine, Atlanta, GA
Dr. Elsie L. Scott, President and CEO, Congressional Black Caucus Foundation, Inc., Washington, DC
Dr. Dale Wesson, Vice President for Research, South Carolina State University, Orangeburg, SC
Dr. Milford Greene, Associate Vice President for Research, Allen University, Columbia, SC
Dr. Janeen Witty, Vice President for Academic Affairs, Benedict College, Columbia, SC
Dr. Henry Tisdale, President, Claflin University, Orangeburg, SC
Dr. Lisa Waddell, Deputy Commissioner for Health Services, South Carolina Department of Health and Environmental Control, Columbia, SC
9:15 am

**Keynote Address:**

Reed Tuckson, MD, FACP, Executive Vice-President and Chief of Medical Affairs at UnitedHealth Group

10:00 am

**Break**

10:30 am

**Introduction of Speaker:**

Dr. J. Nadine Gracia, Office of Minority Health, U.S. Department of Health and Human Services, Washington, DC

**Speaker:**

Secretary Kathleen Sebelius, Twenty-first Secretary, U.S. Department of Health and Human Services, Washington, DC

12:00 noon

**Luncheon Speaker:**

Dr. John Ruffin, Director, of the National Institute on Minority Health and Health Disparities (NIMHD)

1:30 pm

**Panel One:** *The impact of social determinants in reducing health disparities and sustaining healthy communities with a major focus on race, poverty, education, and environmental issues*

Moderator: Dr. David E. Rivers, Assistant Professor and
Public Information and Community Outreach Director,
Medical University of South Carolina, Charleston, SC
Panelist: The Honorable Donna Christensen, MD, Congressional Black Caucus Health Braintrust Chair, U.S. Congress, VI
Panelist: Mr. Steve Suits, Vice President, Southern Education Foundation, Inc., Atlanta, GA
Panelist: Dr. Gail C. Christopher, Vice President for Programs, Food, Health & Well-Being, W.K. Kellogg Foundation, Battle Creek, MI
Panelist: The Honorable Harold Mitchell, ReGenesis Project Spartanburg, SC

2:45 pm
Break
3:00 pm
Panel Two:  *Translational research with proven results in reducing health disparities*

Moderator: Dr. Valerie Montgomery Rice, Dean and Executive Vice President, Morehouse School of Medicine, Atlanta, GA
Panelist: Dr. Keith Norris, Professor of Medicine at Charles Drew University of Medicine and Science, Principal Investigator for Research Centers in Minority Institutions Translational Research Network, Associate Dean for Translational Science at the Geffen School of Medicine at UCLA, Los Angeles, CA
Panelist: Dr. Loretta Sweet Jemmott, van Ameringen Professor in Psychiatric Mental Health Nursing and Director for the for Health Disparities Research, University of Pennsylvania School of Nursing, Philadelphia, PA
Panelist: Dr. Georgia Dunston, Director, National Human Genome Center, Howard University, Washington, DC
Panelist: Dr. Russell Glasgow, Deputy Director, Division of Cancer Control and Population Sciences, National Cancer Institute, NIH, Bethesda, MD

Day Three  December 2, 2011

8:45 am

**Opening Remarks and Introduction:**

Ms. Carolyn Sawyer, Communications Strategist, Tom Sawyer Company

*Location: Crystal Ballroom, Charleston Marriott Hotel*

9:00 am

**Keynote Address:**

Vernellia Randall, MSN, JD, Professor, University of Dayton School of Law, Dayton, OH

10:15 am

**Panel Three:** *Public health as a priority in reducing health disparities with a major focus on program and workforce development*

Moderator: Dr. Marta J. Gold, Dean, Drexel University, School of Public Health, Philadelphia, PA

Panelist: Dr. Georges C. Benjamin, Executive Director, American Public Health Association, Washington, DC

Panelist: Dr. Saundra H. Glover, Director, Associate Dean for Health Disparities and Social Justice; Associate Professor, Health Services Policy and Management, Institute for Partnerships to Eliminate Health Disparities, University of South Carolina, Columbia, SC
Panelist: Dr. Marjorie Innocent, Senior Director of Research & Programs, Congressional Black Caucus Foundation, Inc., Washington, DC

Panelist: Dr. Debra Joy Perez, Interim Assistant Vice President, Research and Evaluation, Robert Wood Johnson Foundation, Princeton, NJ

11:30 am
Break:

11:45 am
Panel Four: Prevention and personal responsibility as a major theme in reducing health disparities and sustaining healthy communities

Moderator: Dr. Lisa F. Waddell, Deputy Commissioner for Health Services, SC Department of Health & Environmental Control, Columbia, SC

Panelist: Mr. Donald Arnette, Regional Administrator, Southeast Region Food and Nutrition Service, U.S. Department of Agriculture, Alexandria, VA

Panelist: Dr. Jeffrey Levi, Executive Director, Trust for America’s Health, Washington, DC

Panelist: Dr. Bambi W. Gaddist, Co-Founder and Executive Director, SC HIV/AIDS Council, Columbia, SC

Panelist: Ms. Maria Pajji Battle, Senior Vice President of Marketing and Public Affairs, Keystone Mercy Health Plan, Philadelphia, PA

Panelist: Ms. La Varne Burton, CEO, American Kidney Fund, Rockville, MD

1:00 pm
Luncheon Speaker:

Thomas W. Dortch, Jr., Chairman and Chief Executive Officer of TWD, Inc.
1:45 pm

**Panel Five:**  *Successful community-based programs for sustaining and strengthening healthy communities*

*Moderator:* Dr. Sabra C. Slaughter, Chief of Staff, Office of the President, Medical University of South Carolina, Charleston, SC

*Panelists:* Drs. Windsor W. Sherrill and Rachel B. Mayo, Professors, Public Health Sciences, Facility Associates, Center for Health Care Disparities, Clemson University, Clemson, SC

Dr. Britt Rios-Ellis, Professor and Director, National Council of La Raza, The Center for Latino Community, California State University Long Beach Foundation, Long Beach, CA

Dr. Thomas Ellison, Medical Services Director, Principal Investigator, PROJECT H.E.L.P. USA/MRC Bruno-Smithfield Community Health Center, Birmingham, AL

Dr. LaVerne E. Ragster, Professor of Marine Biology, Eastern Center, University of the Virgin Islands, St. Thomas, USVI

3:00 pm

**Break**

3:30 pm

**Panel Six:**  *The importance of the private sector in reducing health disparities*

*Moderator:* Dr. Calvin B. Johnson, Former Pennsylvania Secretary of Health, Philadelphia, PA

*Panelist:* Dr. Andrea Gelzer, Senior VP, Corporate Chief Medical Officer, AmeriHealth Mercy Family of Companies, Philadelphia, PA
Panelist: Mr. Thomas H. Graham, President, Pepco, Washington, DC
Panelist: Paul E. McRae, Executive Director, AT&T Business Solutions, Emerging Healthcare Technologies, Atlanta, GA
Panelist: Ms. Tina Brown Stevenson, Chief Data and Analytics Officer, Ingenix, OptumInsight, Waltham, MA

7:00 pm to 10:00 pm

Reception: “The Taste Of Gullah”
Gullah Cuisine, 1717 Hwy. 17 N., Mt. Pleasant, SC

Day Four  December 3, 2011

8:45 am

Opening Remarks:
Mr. Douglas A. Michels, President and CEO, OreSure Technologies, Inc., Bethlehem, PA

Location: Crystal Ballroom, Charleston Marriott Hotel

9:00 am

Panel Seven: A roundtable discussion with state and local leaders on reducing health disparities

Moderator: Mr. Jason Leon, Program Manager for Alumni Affairs and Social Media, National Urban Fellows, New York, NY
Panelist: The Honorable Patrick S. Sprauve, Senator, Chair of the Health Committee, Twenty-eighth Legislature, USVI
Panelist: The Honorable David J. Mack, III, South Carolina House of Representatives, One Hundred Ninth District, Charleston, SC
Panelist: The Honorable Jack Jackson, Jr., Senator, Arizona State Legislature, Second District, Phoenix, AZ
10:30 am

**Introduction of Speaker:**

**Keynote Address:**

*The Honorable James E. Clyburn, Assistant Democratic Leader, U.S. Congress, Sixth District, South Carolina*

11:15 am

**Panel Eight:** *A roundtable discussion with Congressional leaders on health care and the reduction of health disparities*

**Moderator:** The Honorable Donna Christensen, MD, Congressional Black Caucus Health Braintrust Chair, U.S. Congress, VI

**Panelist:** The Honorable Barbara Lee, Health Care Task Force Chair of the Congressional Asian Pacific American Caucus, U.S. Congress, Ninth District, CA

**Panelist:** The Honorable James E. Clyburn, Assistant Democratic Leader, U.S. Congress, Sixth District, South Carolina

**Panelist:** The Honorable Donald Payne, Chairman of the Congressional Black Caucus Foundation, Inc., Ranking Member on the Subcommittee on Africa, Global Health and Human Rights, U.S. Congress, Tenth District, NJ

12:30 pm

**Closing Remarks:**

*Dr. David E. Rivers, Assistant Professor and Public Information and Community Outreach Director, Medical University of South Carolina Charleston, SC*
in conjunction with:
The Congressional Black Caucus Health Braintrust
and TriCaucus Health Task Force Chairs

DOD-MUSC

American Kidney Fund®

National Library of Medicine

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Sixth Annual National Conference on Health Disparities

Reducing Health Disparities through Sustaining and Strengthening Healthy Communities

Conference Dates
November 28 - December 1, 2012

2012 Conference Registration Fee - $150.00

To register for Conference and Hotel:
www.buildinghealthycommunities2012.com

Location
The Peabody Little Rock
Three Statehouse Plaza
Little Rock, AR  72201
501.906.4000

Room Rates
$129.00 *Single/Double
$139.00 *Triple
$149.00 *Quad
* If reserved before October 29, 2012

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Special Thanks.

The program sponsors and supporters express personal thanks to the planning committee, speakers, panelists, consultants and volunteers for making the Conference a success. Special acknowledgement goes to Dr. W. Marvin Dulaney and Mr. George Miller for their efforts in the preparation of this report.

We thank all who attended for your participation and your continuing efforts to reduce health disparities.
This DVD, a collection of interviews of participants in the 5th Annual National Conference on Health Disparities held in Charleston, SC November 30 to December 3, 2011, was produced by South Carolina Educational Television (SCETV). The Conference sponsors thank SCETV for its support and sharing this information.
Rural residents can’t always come to us, so we’re taking health care to them.

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