

SUMMARY REPORT

Eighth Annual National Conference on Health Disparities

November 5-8, 2014

The Westin Long Beach | 333 East Ocean Boulevard | Long Beach, CA





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FOREWORD AND ACKNOWLEDGMENTS

Dr. David Rivers
Director, Public Information and Community Outreach
Associate Professor, Library Science and Informatics
Medical University of South Carolina

The Eighth Annual National Conference on Health Disparities (NCHD) was held November 5-8, 2014, in Long Beach, CA. Like its seven predecessors, the 2014 conference focused on policies and programs to reduce health disparities, with one panel addressing a new, related topic: the impact of health issues, including disparities, on our nation's military personnel and preparedness. Throughout the conference, presenters emphasized the role of social determinants, personal responsibility and prevention in initiatives that reduce disparities.

As one would imagine, no such conference is possible without major commitments of sponsorship, resources and support. Recognizing the currency and importance of the topic, numerous governmental agencies, corporate and civic entities and academic institutions delivered direct or in-kind support to the Eighth NCHD. (See pages 26-28). Conference participants also appreciated the tremendous support and hospitality of our hosts, including the California State University Long Beach and the City of Long Beach.

Throughout the past eight years, U.S. Congressman James E. Clyburn and many of his congressional colleagues have supported the effort in both voice and deed. Congressman Clyburn is a long-time proponent of a vision of community health that recognizes the unique relationship between human health, environmental quality, environmental justice and economic development. This vision is integral to all programs delivered by the Medical University of South Carolina's Public Information and Community Outreach group (PICO).

From 2007 through 2014, national conferences in Charleston, SC; the U.S. Virgin Islands; Atlanta, GA; Philadelphia, PA; Little Rock, AR, and Long Beach, CA, have brought together diverse partners, presenters and attendees to share their knowledge of health disparities. These programs have uncovered a much larger story: that social determinants, such as race, poverty, low educational attainment, public safety, environmental quality and inadequate housing, are major contributors to health disparities. These findings suggest the potential benefits of rededicating a portion of America's healthcare resources to programs that emphasize education, prevention and personal responsibility – each person's willingness and capacity to make informed decisions that reduce the likelihood of disease development.

The NCHD collaboration of public and private initiatives creates a unique dynamic that sharpens the focus on the social implications of health disparities. In its eighth year, the conference grew once again in diversity of participants in terms of age, race, gender, professional affiliation and geographic origin. We hosted 360



Dr. David Rivers

continued

FOREWORD AND ACKNOWLEDGMENTS *continued*

people, in addition to 110 students from various colleges and universities across the country.

With the enactment and implementation of the Affordable Care Act, millions of previously uninsured Americans now have healthcare coverage. These are exciting times in our nation as we see new opportunities for a gradual shift from a traditional “sick-care” model of health care to a more forward-thinking “well-care” model.

As we begin planning the Ninth Conference on Health Disparities it is our intent to focus on the relationship between environmental justice and its impact on public health. Therefore, the Ninth Conference on Health Disparities will be held in partnership with the National Environmental Justice Conference & Training Program, A National Dialogue for Building Healthy Communities. The conference will take place on March 9-12, 2016 in Washington, DC at the Marriott Marquis.

We thank you for your past participation and look forward to engaging you in this ongoing process.



Dr. Dwayne Proctor, Dr. David Rivers and Mr. Castulo de la Rocha



Eighth Annual National Conference on Health Disparities **Long Beach, CA** **Summary Report**

DAY ONE: WEDNESDAY, NOVEMBER 5, 2014

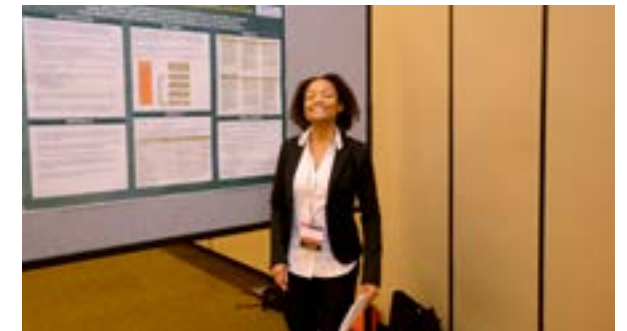
The Eighth Annual National Conference on Health Disparities opened with one of its traditional components: the Student Research Forum. Over 60 students from colleges and universities across the United States participated in the annual Student Research Forum. The students presented posters that highlighted their research and two of them, Ms. Gabriela Guzman of California State University, Monterey Bay, and Ms. Jessica Brown of Georgia State University, made oral presentations describing their research on the issue of health disparities.

One of the special highlights of the Student Research Forum was a keynote address by Dr. Britt Rios-Ellis. Dr. Rios-Ellis, who recently moved to California State University, Monterey Bay to serve as the Founding Dean of the College of Health Sciences and Human Services, presented a keynote address on “Challenges to Participation of Underrepresented Populations in Academia.”

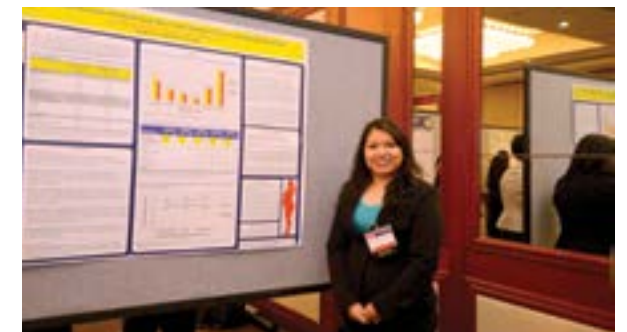
As the chart on page 4 indicates, six students—three undergraduate and three graduate students—won awards for their outstanding poster presentations at the Eighth Annual National Conference on Health Disparities.



Dr. Marvella Ford, Chair, Student Research Forum



Ms. Tanya Troy, Wayne State University, 1st Place, Graduate Student Poster Presentation



Ms. Nanci Alanis Alcantara, University of Illinois at Chicago, 1st Place, Undergraduate Student Poster



Ms. Jasmine Travers, Columbia University School of Nursing, 2nd Place, Graduate Student Poster Presentation



Undergraduate Student Poster Presentation Winners

1st Place
Ms. Nanci Alanis Alcantara
University of Illinois-Chicago
Mentor: Dr. Kristine Molina
How do different stressors relate to body mass index among U.S. and immigrant- born Latinas?

2nd Place
Mr. Joaquín Magaña
Occidental College
Mentor: Dr. Cheryl Okumudra
Developing a qPCR assay to quantify relative telomere length: a tool to investigate the basic science of health disparities

3rd Place
Ms. Marina Armendariz
California State University – Dominguez Hills
Mentor: Dr. Silvia Santos
Obesity-related eating habits heighten risk of type 2 diabetes among at-risk Latino college students



Graduate and Undergraduate Student Award Recipients

Graduate Student Poster Presentation Winners

1st Place
Ms. Tanya Troy
Wayne State University
Mentor: Dr. Denise White-Perkins
Advance directives in an older African American population: what are the attitudes and barriers to completion? A pilot study

2nd Place
Ms. Jasmine Travers
Columbia University
Mentor: Dr. Patricia Stone
Does state legislation improve nursing workforce diversity?

3rd Place
Ms. Lorena Rodriguez
California State University-Long Beach
Mentor: Dr. Gino Galvez
Does nutritional training increase knowledge and self-efficacy among Promotores de Salud?



Ms. Tanya Troy, Wayne State University, 1st Place Graduate Student Poster Winner

Oral Presenters

Undergraduate Student Oral Presenter
Ms. Gabriela Guzman
California State University-Monterey Bay
Mentor: Dr. Andrew T. Anglemeyer, California State University- Monterey Bay
Immigration status and its impact on access to healthcare



Ms. Jessica Brown, Georgia State University, Graduate Student Oral Presenter



Ms. Gabriela Guzman, California State University, Monterey Bay, Undergraduate Student Oral Presenter

Graduate Student Oral Presenter
Ms. Jessica Brown
Georgia State University
Mentor: Dr. Kim Ramsey-White, Georgia State University
Water quality as a barrier to health for Haitians living in the Dominican Republic



Ms. Nanci Alanis Alcantara, 1st Place Undergraduate Winner, University of Illinois at Chicago



DAY TWO: THURSDAY, NOVEMBER 6, 2014

Once again, **Ms. Carolyn Sawyer** of the Tom Sawyer Company served as Mistress of Ceremonies of the National Conference on Health Disparities. Ms. Sawyer opened the second day of the conference with some special accolades. She noted that in the Eighth Year of the National Conference on Health Disparities there were several supporters and organizers of the annual conference who had been a part of it since it began in Charleston in 2006. She recognized Melinda Downing of the U.S. Department of Energy and Congressional Delegate Donna Christensen of the U.S. Virgin Islands for their ongoing support of the conference. She also recognized three sponsors that had supported the conference for eight years: AmeriHealth Caritas, the U.S. Department of Energy, and the Congressional Black Caucus Foundation. Of course, she also cited the Medical University of South Carolina for special recognition because it has served as not only the birthplace of the national initiative on health disparities, but also for its ongoing sponsorship of the conference under the leadership of Dr. David E. Rivers.

After Ms. Sawyer's introduction of Dr. Rivers, he greeted the conference participants and thanked volunteers, the conference planning team, and introduced conference sponsors and hosts who brought greetings to the participants.

During her remarks **Dr. Jane Close Conoley**, the President of California State University (CSU)-Long Beach, noted that inequality in our nation exists in income, housing, and education. She stated that inequality in education is highly correlated with problems in health, in employment, and in civic participation. Thus, she stated that CSU's role was to be a part of the solution to the problem of education by offering highly accessible, low cost, but excellent, distinctive education for Californians who have been willing to do the work and meet the requirements.

Ms. Maryann Reyes Jackmon, the Senior Director of External Relations for the CSU Chancellor's Office, greeted the attendees at the conference and informed them that the CSU system is the largest and most diverse in the country. She also stated that she was thrilled that CSU students representing eight campuses had presented 30 of the 61 abstracts in the Student Research Forum.

Ms. Maria Pajil Battle, President of AmeriHealth Caritas Partnership, brought greetings from the CEO of her company. She stated that her company has been an ardent supporter of the National Conference on Health Disparities and has participated as a member of its planning committee and advisory board since 2006. She cited several specific reasons for her company's ongoing support. She said that the conference addresses the challenges and the barriers to eliminate health disparities, generates new and innovative ideas on health care, and identifies solutions that bring the nation one step closer to health equity.

Mrs. Kelly Colopy, Director of the Department of Health and Human Services for the City of Long Beach, shared information about the uniqueness and diversity of the City of Long Beach. She encouraged the conference participants to work together as government, academic and healthcare professionals to achieve health equity for all American citizens.

Dr. Sabra Slaughter, Senior Advisor to the President at the Medical University of South Carolina, brought greetings to the conference participants on behalf of MUSC President Dr. David Cole. He stated that MUSC is thrilled to be a part of the mind-building process to address health disparities in our nation. He stated that since the Seventh Annual National Conference in St. Thomas, MUSC had continued its work on addressing primary care; health, wellness and prevention; and developing telemedicine programs that serve some of the most remote and underserved areas of the State of South Carolina.



Ms. Carolyn Sawyer of the Tom Sawyer Company, Mistress of Ceremonies



Dr. Jane Close Conoley, President, California State University-Long Beach



Ms. Maryann Reyes Jackmon, Senior Director of External Relations, California State University



Ms. Maria Pajil Battle, President of AmeriHealth Caritas Partnership



Mrs. Kelly Colopy, Director of the Department of Health and Human Services, City of Long Beach



Dr. Sabra Slaughter, Senior Advisor to the President, Medical University of South Carolina

DAY TWO: THURSDAY, NOVEMBER 6, 2014 *continued*

Dr. Valerie Montgomery Rice, the President and Dean of the Morehouse College of Medicine, stated that Morehouse participates in the annual conference on health disparities because it recognizes that health disparities are a result of social, economic and environmental disadvantages. Dr. Rice also noted that although much has been accomplished in understanding the causes of health disparities and the impact that they have on our communities, we have yet to see the desired outcomes that have led to the reduction and the ultimate elimination of health disparities. She concluded that we must address the social determinants that impact health outcomes if we are ever to achieve health equity.

Observing that this year was his third opportunity to attend the National Conference on Health Disparities, **Dr. Billy Thomas**, Vice Chancellor for Diversity and Inclusion at the University of Arkansas for Medical Sciences, remarked that serving as a judge for the student poster session and seeing the student research on a variety topics related to health disparities was one of the most exciting parts of the conference for him. He also stated that while the state of Arkansas ranked either 48th or 49th on many negative health outcomes (such as infant deaths), the annual conference had helped to indoctrinate his university with the idea of health and health disparities. One result of the involvement of UAMS in the annual conference was the establishment of a lecture series named in honor of the former U.S. Surgeon General from Arkansas, Dr. Jocelyn Elders.

Dr. Britt Rios-Ellis, the Founding Dean of the College of Health Science and Human Services at CSU, Monterey Bay, began her greeting by observing that “we are familia.” That is, she feels that the supporters and organizers of the National Conference on Health Disparities have developed a special bond over the eight-year span of the annual conference. Reiterating the observations of Dr. Thomas, she was also pleased that the student research forum “grows and grows and gets better and better.”

Dr. Charlene Spearen, Interim Vice President for Academic Affairs at Allen University, brought greetings from the university’s Acting President Dr. Lady June Cole. Dr. Spearen presented a brief history of Allen University, founded in 1870 by the African Methodist Episcopal Church “to address issues of disparity.” She noted that many Allen University students are first- generation college students who bring firsthand knowledge about the issues that surround health disparities as well as other disparities in education, housing, and access to social justice.

Ms. Cynthia A. Harding, Interim Director of Public Health for Los Angeles County Department of Public Health, greeted conference participants and shared with them some of what Los Angeles County is doing to address health disparities. She noted that Los Angeles County has a “majority minority” population and that it is a classic example of an urban county where your zip code is more predictive of health outcomes than genetic code. She stated that in order to change health outcomes in counties laden with poverty and other problems we cannot rely on the traditional public health, behavioral change model because it blames the victim. Instead, we have to hold ourselves and our community leaders accountable for the health outcomes in our community and develop “healthy policies initiatives.”



Dr. Valerie Montgomery Rice, President and Dean of Morehouse College of Medicine



Dr. Billy Thomas, Vice Chancellor for Diversity & Inclusion, University of Arkansas for Medical Sciences



Dr. Britt Rios-Ellis, Founding Dean, College of Health Science and Human Services, California State University Monterey Bay



Ms. Cynthia A. Harding, Interim Director of Public Health, Los Angeles County Department of Public Health



Dr. Charlene Spearen, Interim Vice President for Academic Affairs, Allen University

DAY TWO: THURSDAY, NOVEMBER 6, 2014 *continued*

Keynote Address

The Honorable James E. Clyburn



Congressman James E. Clyburn

Congressman James E. Clyburn of South Carolina delivered the opening keynote address for the conference. At the beginning of his presentation he posed the question: "What affects people's health more than anything else?" His answer was "clean water." He cited statistics that indicate how the increase in potable and clean water has increased the average

life expectancy of Americans from 50 years of age at the beginning of the twentieth century to 70 years of age at the beginning of the twenty-first century. Yet, Congressman Clyburn also noted that for people living in areas where potable and clean water was still unavailable, life expectancy is shorter and they are more than likely to suffer from diabetes and other debilitating diseases.

Congressman Clyburn also discussed the impact of poverty on health and health disparities. He described his own efforts to address the problem of persistent poverty among those who are most likely to suffer from health disparities by proposing the 10-20-30 plan. First proposed as a part of the American Recovery and Reinvestment Act in 2009, the plan sought to provide 10% of the funding from the act to counties where 20% of the population is below the federal poverty level for more than 30 years. He stated that this is a way to address one of the key social determinants of health disparities by not focusing funding on groups based on race or ethnicity, but on need.

Congressman Clyburn addressed the problems encountered by and the resistance to the Affordable Care Act. He stated that healthcare is the civil rights issue of the 21st century. Citing a statement made by Dr. Martin Luther King, Jr in 1966 that "of all of the forms of injustice, injustice in healthcare is the most shocking and inhumane," he defended the ACA as the civil rights bill of the 21st century because it ends discrimination against Americans in the following ways:

- It outlaws discrimination against children who have pre-existing conditions.
- It ends discrimination against women who previously paid more for their health insurance premiums than men.
- It ends discrimination against college students who may now remain on their parents' health insurance until they are age 26.
- It ends discrimination against Americans who develop long- term illnesses and are then dropped from coverage by their insurance companies.

Finally, Congressman Clyburn asked the conference participants not to allow "efficiency" to get in the way of "effectiveness" as they discuss and develop solutions on how to solve the problem of health disparities. He said too often people want the government to be efficient and run like a business. But he said that the government does not need to run like a business and make a profit. Instead, the government needs to be effective because it exists to solve problems for its citizens in whatever manner that it could.



Congressman James E. Clyburn with conference attendees



Congressman James E. Clyburn with Dr. J. Nadine Gracia

DAY TWO: THURSDAY, NOVEMBER 6, 2014 *continued*

Keynote Speaker

Dr. J. Nadine Gracia

Assistant Secretary of Minority Health and
Director of the Office of Minority Health
U. S. Department of Health and Human Services



Dr. J. Nadine J. Gracia

Dr. J. Nadine J. Gracia followed Congressman Clyburn's address with a very detailed and remarkable presentation on the impact and results of the Affordable Care Act (ACA). She stated that after four years with the ACA as the law of the land, 10.3 million Americans now have health insurance.

The ACA has reduced the rate of non-insured Americans by 26%. In addition, 1.7 million African Americans and 2.6 million Latino Americans have gained access to health coverage. An additional 8.7 million Americans now have coverage under Medicaid expansion and the Children's Health Insurance Program. Many of the Americans who have taken advantage of the ACA now have health insurance "for the first time."

Dr. Gracia also described how the implementation of the Affordable Care Act has improved the delivery of health care and moved the nation toward more healthy communities. Seventy-six million Americans with private insurance or who have coverage under Medicare can get cancer and diabetes screening, vaccinations and other needed services at no cost. The National Health Service Corp, a program that repays student loans for

medical practitioners who agree to work in underserved communities, has more doubled and it has provided primary care to some 9.7 million Americans since 2008.

Dr. Gracia also touted the economic and social impact of the ACA. The ACA has slowed growth of healthcare costs. High school graduation rates are up to the highest level in three decades. The number of children in poverty fell by 1.4 million—the largest decline since 1966. Incarceration and crime rates have gone down by 10%. Businesses have added 7.3 million jobs to the economy since 2008.

In her conclusion, Dr. Gracia cautioned the participants that in spite of the successes of the Affordable Care Act, there is still much unfinished work. There are persistent health disparities in minority communities, inequities in the social determinants of health, high unemployment rates, and people who still lived in communities with no access to healthy foods. The high school dropout rate is still too high among African-American, Latino-American and Native American youth. Thus, she urged everyone to continue their efforts to reduce health disparities, to form partnerships with government and private sector organizations, and to encourage people to sign up for health insurance during the next open enrollment period for the Affordable Care Act.

Following the morning keynote addresses, Panel One was on the "The impact of social determinants in reducing health disparities and sustaining healthy communities with a major focus on race, poverty, education and environmental justice." Dr. David Rivers served as the moderator for this panel, and it featured presentations by Ms. Kathy Ko Chin of the Asian & Pacific Islander American Health Forum; Dr. Kurt C. Organista of the University of California-Berkeley and Dr. Gail C. Christopher of the W. K. Kellogg Foundation.

"This is a remarkable moment to turn the tide of persistent health disparities."



(L to R) Ms. Kathy Ko Chin, Dr. Kurt C. Organista and Dr. Gail C. Christopher

Panel One Highlights

Ms. Kathy K. Chin noted that Asian Americans have the highest educational and socioeconomic status in the United States, but this broad view of their status hides the fact that some Asian Americans and Pacific Islanders still suffer from health disparities. She was pleased to announce that during the first enrollment period for health care under the Affordable Care Act, 70 community-based and federal health care centers formed Action for Health Justice and successfully enrolled a quarter of a million Asian Americans and Pacific Islanders in health care programs.

Dr. Kurt C. Organista shared with the audience that the United States is the second-most obese country in the world (after Mexico). Addressing the overall theme of the panel, he stated that health disparities are caused by the social disparities caused by social problems. Thus, these problems require social solutions. His conclusion was: "If you have something that is a social problem, you need structural, environmental, political and community solutions."

Dr. Gail C. Christopher stated that: "We have the power to change America. We have the power to shape this country, and it is up to us to seize it." She stated further that in order to address health disparities and the violence against young men; we deal with what our country believes about the hierarchy of human values based on pigmentation, gender, sexual orientation and where you come from. Until we define what our country believes, we will continue to address the symptoms of health disparities rather than develop the actual solutions to them.

DAY TWO: THURSDAY, NOVEMBER 6, 2014 *continued*

Luncheon Program

Remarks and Introduction by **Mr. Castulo de la Rocha**

*President and CEO, AltMed/Health Services Corporation
and Keynote Address by Dr. Dwayne Proctor, Director of
Disparities, Robert Wood Johnson Foundation*



Mr. Castulo de la Rocha

On the second day of the conference, two luncheon speakers addressed similar themes, but in two different ways. **Mr. Castulo de la Rocha** focused on the importance of the Affordable Care Act as a law that will provide Latino Americans and immigrants access to the health care that they have historically been denied. Dr. Dwayne Proctor emphasized the importance of "systems changes" as the key way of solving health disparities. Both men agreed, however, that much still needs to be done to provide all Americans access to quality health care without regard to their racial, ethnic or socioeconomic backgrounds.

Mr. de la Rocha made two key points during his presentation. First, Latino Americans have fought more for access to affordable care than health equity. Thus, his second point was that the Affordable Care Act is important to Latino Americans precisely because they now have more access to health care. He noted that 30-40% of the 35

million people who will benefit from the ACA are Latino Americans. In California alone, where some 5-6 million people are uninsured, almost 60% of the uninsured are Latino Americans. Thus, he encouraged support of the ACA because it provides healthcare coverage to those Americans who were previously denied access. It also provides some coverage to immigrants and undocumented worker who also had been denied coverage.

Dr. Dwayne Proctor

*Director of Disparities, Robert Wood Johnson Foundation
Princeton, NJ*



Dr. Dwayne Proctor

In a very personal presentation that detailed how health disparities affected his own family, **Dr. Dwayne Proctor** cited statistics that indicated how one's zip code-or where one lives-affects life expectancy. He also announced the new initiative by the Robert Wood Johnson Foundation to address health disparities. Defining health disparities as "the presence of large differences in health from limited opportunities and increased risks caused by disadvantaging factors such as access to and quality care, education, employment, income, community, environment, and housing and safety," Dr. Proctor announced that the Robert Wood Johnson Foundation will support "systems changes" to eliminate health disparities.

**"While disparities have been important to us,
the key for our community has been access."**

DAY THREE: FRIDAY, NOVEMBER 7, 2014

Keynote Address

Ms. Lisa Williams, Author,

Founder Living Water Resource Center, Atlanta, GA



Ms. Lisa Williams

Ms. Lisa Williams In recent years, the National Conference on Health Disparities has turned increasing attention to the issue of human trafficking, including the enslavement of vulnerable children and young adults for the purpose of prostitution. As a Keynote Speaker at the 2014 NCHD, Ms. Lisa Williams provided the kind of statistical and anecdotal evidence

on human trafficking that cries out for action at all levels of society, beginning with each and every person of conscience.

Ms. Williams described the world of sex trafficking in Atlanta, GA, and the United States, beginning with her own experience of seeing a television report on a 10-year-old girl who had been arrested for prostitution. Ms. Williams was appalled. When investigating the circumstances surrounding the story, she discovered that the child was a victim of sex trafficking and had been lured into prostitution by a pimp. The pimp walked away from the crime with impunity. Ms. Williams asked herself the question she said each of us must ask: "What can I do, even if I do not know this child?"

Ms. Williams painted a graphic picture of how children and young women are lured into sex trafficking. She said pimps use social media to attract children and young women who are bored, seeking fame, wanting to be models, or are ignored by their parents. Pimps also prey on young males who have suffered some type of mental or social trauma. They control their victims through violence and coercion, or by playing to their need for love and attention. In many instances, the victims of sex trafficking feel isolated from, ignored or judged by such traditional support groups as family, friends, teachers, churches and the community at-large.

Ms. Williams provided ugly and abhorrent statistics of sex trafficking in the United States. She said that as many as 300,000 children are at risk for being lured into sex trafficking, and that the sex portion of human trafficking, excluding those who are being held for forced labor, is a \$13 billion per year industry. Young women engaged in prostitution are forced to earn \$1,000 a day, and often perform as many as 20 sex acts per day.

Ms. Williams concluded her address by urging healthcare professionals and all Americans to commit themselves to ending sex trafficking in the United States. She said that people involved in healthcare and helping professions must respond to both the physical and emotional trauma victims suffer before, during and after their immersion in the world of sex trafficking. She emphasized that each of us must pay attention to young people and those people around them. Young people often need a "safe refuge" from pimps and other sexual predators, and it's often up to us to provide such safe havens.

DAY THREE: FRIDAY, NOVEMBER 7, 2014 *continued*

PANEL THREE

The impact of global climate change on the built environment with emphasis on environmental quality, health, food supply and infrastructure

One of the highlights of Day Three was a panel on global climate change and its relationship to health disparities. **Dr. LaVerne E. Ragster**, President Emerita of the University of the Virgin Islands, St. Thomas, chaired the panel. She was accompanied by Mr. Ernesto Diaz, Director of the Puerto Rico Coastal Zone Program, and Ms. Femke Oldham of the San Francisco Foundation.

Dr. Ragster opened the panel with some key facts. She explained that “the work of human beings over the last century is a big part of why we are experiencing changes in our climate.” From 1983 to 2012, the world experienced the warmest period in the last 1,400 years. As a result we will see an increase in droughts, flooding, sea level rises, extreme weather conditions from the cold to the warm, hurricanes, major snowstorms, and ocean ossification that will affect the

food chain. She was very pleased, however, that the NCHD included a panel to address the issue of climate change because the World Health Organization cites climate change “as the biggest health challenge of the 21st century.”

Following Dr. Ragster’s dire analysis of how climate change would affect health disparities, **Mr. Ernesto Diaz** offered some solutions based on a model from Puerto Rico. Mr. Diaz outlined the work of the Puerto Rico Climate Change Council (PRCCC), a working group of 170 scientists, engineers, planners, economists, architects and a medical doctor. The objective of the PRCCC is to provide decision makers the science needed to address the impact of climate change in Puerto Rico. It seeks to address how the island of Puerto Rico will address the rise in temperature and sea levels, flooding, increased rainfall, ocean surges related to hurricanes, and the health and disease issues related to climate change. The PRCCC works with public and private sector organizations, the Centers for Disease Control, and the U.S. government to anticipate the impact of climate change on Puerto Rico. The PRCCC developed five recommendations to address the impact of climate change.



Dr. LaVerne Ragster, Retired Professor and President Emerita, University of the Virgin Islands, St. Thomas, USVI



Mr. Ernesto Diaz and Ms. Femke Oldham

“The world’s most disadvantaged people will bear the hardest part of the burden from future global change.”

– Dr. LaVerne E. Ragster

“It is imperative that we learn how to take care of a multiracial society in a really robust fashion.”

Ms. Femke Oldham closed the panel with an analysis of the objectives and strategies used by the San Francisco Foundation (SFF) to invest in healthy communities and the environment as a way of responding to climate change. Ms. Oldham outlined the four objectives of the Foundation as: (1) providing access to fresh, local and healthy food; (2) investing in the capacity of organizations working on access to clean water; (3) promoting and advocating for clean, efficient and renewable energy; and (4) investing in equitable and transit-oriented development and urban sustainability. One of the examples that she gave of the SFF’s success in linking environment and social justice issues is the organization’s support for California Senate Bill S535 requires 25% of “cap and trade” revenues go to disadvantaged communities to fund and support projects that benefit those communities.

Luncheon Keynote Address

Dr. Michael Kanter

Medical Director, Quality & Clinical Analysis, Southern California Permanente Medical Group, Pasadena, CA



Dr. Michael Kanter

In short, to address health disparities there must be large-scale solutions that are customized, but scalable.

He also discussed how solutions to health care disparities must address the changing demographics of the American population. By 2050, the Latino-American and Asian-American populations will triple; the African-American population will double; while the Caucasian population will remain approximately the same. As other conference presenters noted, the population of the United States will be more than 50% nonwhite.

Dr. Kanter shared with the audience the “**Six Aims**” for good health care developed by the Institute of Medicine. Health care had to be:

- | | | |
|----------|-------------|--------------------|
| – Safe | – Effective | – Patient Centered |
| – Timely | – Efficient | – Equitable |

Although he believes that “equitable” healthcare would address health disparities by providing everybody good quality care, he also believes that the medical profession did not have the systems in place to actually achieve and address the inequities that many Americans face in health care. According to Dr. Kanter, health care is “systemless” and as a result there are too many deaths per year from medical errors (over 100,000); the costs are skyrocketing; and the outcomes are at the bottom end when compared to those in other nations with health care systems that are better organized.

His solution to these problems, which would also solve the problem of health disparities, is to create more systems. These systems would employ good doctors, good nurses, and good teamwork in order to get better results. The results would be constantly measured and the algorithms monitored to determine what works best and eliminates disparities. His example of such a system is one that his company implemented to lower the high blood pressure and hypertension rates among African Americans to one that equaled or was less than that of Caucasian patients. Starting in June 2011, the medical staff of his company lowered the hypertension rate among African-American patients from 5.7% to 3.4% in September 2014.

DAY THREE: FRIDAY, NOVEMBER 7, 2014 *continued*

PANEL FIVE

Successful community-based programs for building, sustaining and strengthening healthy communities.

Following Dr. Kanter's luncheon keynote on Day Three of the conference was a panel moderated by **Dr. Sabra C. Slaughter** of the Medical University of South Carolina. Dr. Slaughter introduced this panel by stating that one of goals of the National Conference on Health Disparities has always been to provide participants a way to find "real assets and exemplary models" of successful programs that address health disparities "as a way of thinking positively about our resilience and our strengths." He noted that it was never the purpose of the NCHD just to dwell on the negative aspects of health disparities. From the beginning the purpose has been to find solutions and to highlight programs and models that work to alleviate health disparities.

After observing and noting how a dedicated health professional can make a difference in a community, **Dr. L. Toni Lewis** of the Service Employees International Union (SEIU) opened the panel with a discussion of her role as a healthcare professional and union representative for over one million healthcare workers. Dr. Lewis described how her family background in social justice led her to medicine and to developing programs that address "the disconnect" between what doctors learn in medical school and what was actually happening on the ground in the communities that they served. Dr. Lewis stated that the latter concern led resident doctors, community unions, and other healthcare practitioners to partner with community residents and faith-based organizations to create the "Healthy Bronx Initiative" in the Bronx and Brooklyn boroughs of New York City. She outlined how the program had worked with these communities to promote healthy lifestyles and community

based medicine. The Initiative also focused on enrolling people in the insurance programs provided by the Affordable Care Act and addressing the hysteria caused by the Ebola crisis of 2014.

Mr. Roland J. Gardner's presentation consisted of two parts. First, he showed a five-minute film that documented the history of community health centers in the South and how they developed as a part of the civil rights movement and from grassroots advocacy efforts. The film also addressed the resistance to community health centers in the South because they served so many people of color and because doctors felt threatened by them. Yet, the centers overcame the opposition because their staffs served people who lacked access to quality healthcare. The second part of Mr. Gardner's presentation consisted of an analysis of the Beaufort-Jasper-Hampton Comprehensive Health Services (BJHCHS) under his leadership as CEO. In the past fiscal year, the BJHCHS served 17,000 patients and served as a "one stop medical center." It provided its patients pediatric care, family medical services, laboratory work, x-rays, dental care, home health and pharmacy services. In addition, the BJHCHS had developed a program to address public health in the area by installing septic tanks where they were desperately needed. Mr. Gardner concluded his presentation by discussing how the BJHCHS uses a mobile unit to reach the people who do not have access or transportation to one of its many sites in the three-county area in southeastern South Carolina.

Mr. Nolan Rollins, Director of the Los Angeles County Urban League, began his presentation with the theme that health disparities represent the "broken compact with our people, our community, and with humanity." He stated that our country needs a "domestic Marshall Plan to restore the American Dream" and to provide people "opportunity to thrive, opportunity to earn, opportunity to own, opportunity to function and opportunity to prosper." He concluded

his presentation by stating that we must invest in our greatest resource: people. And, if we are going to close the conversation about health disparities, we must talk about a systematic approach to them. In short, we must change the system that makes health disparities possible.

Ms. Karen Dale, President of AmeriHealth Caritas District of Columbia, offered what she called a "Medicaid managed care perspective" on health disparities. She cited the challenges of serving 111,000 residents, many of whom suffer from hypertension and obesity. She also stated that they face other problems, such as teenage pregnancy, infant mortality, food insecurity, an education gap, and poverty- all of which affects their health outcomes. She posed the question: "Why are community-based programs important" as a way of addressing health disparities. She explained that such programs are necessary because they give her clients a voice and help them "to feel empowered to create change that would help them to be more healthy and to bring about change." Ms. Dale cited and explained several community-based programs that Amerihealth Caritas had developed and implemented in conjunction with members of the community in D.C. to encourage awareness of health problems such as hypertension, diabetes, breast cancer; and to improve general health awareness. Among them were: "It Takes A Village," Impact D.C., "Breathe D.C.," a Children's Law Center, and "Pinky Parties" to encourage women to have mammograms. She concluded that to build healthy communities health leaders must take a community approach and pull together all stakeholders to develop solutions.

Panel Five concluded with a presentation by **Mrs. Kelly Colopy**, Director of the Long Beach Department of Health and Human Services. In addition to touting the livability of her city because of its commitment to providing its citizens a variety of health services, Mrs. Colopy cited the city's diversity as one of its attractions. Latinos, African Americans and Asians make up nearly 70% of Long Beach's population and as a result, it is one of the nation's most diverse cities. Mrs. Colopy described the variety of health services that the city provides its residents, including immunizations, family planning, water



Dr. Sabra Slaughter, Senior Advisor to the President, Medical University of South Carolina



Mr. Roland J. Gardner, CEO, Beaufort-Jasper-Hampton Comprehensive Health Services



Ms. Karen Dale, President of AmeriHealth Caritas District of Columbia



Dr. L. Toni Lewis, Chair, Service Employees International Union Healthcare (SEIU), Physician Chair, SEIU Healthcare, International Vice President SEIU



Mr. Nolan Rollins, President, Los Angeles Urban League



Mrs. Kelly Colopy, Director, City of Long Beach Department of Health and Human Services

"It would be great if every single one of us had a Dr. Thomas Ellison in our neighborhoods. There would be no health disparities; there would only be health justice."

– Dr. Sabra C. Slaughter

DAY THREE: FRIDAY, NOVEMBER 7, 2014 *continued*

and restaurant inspection, medical clinics, healthcare enrollment under the Affordable Care Act and HIV and STD screening. She also announced that the Long Beach City Council had adopted a "healthy communities policy" focused on health equity. This policy had resulted in 500 nonprofits joining with all of the city's departments to address health disparities. She cited two programs that had developed from this effort: (1) a multiservice center to provide care for the homeless; and (2) the Healthy Active Long Beach Program funded by a three-year grant from Kaiser Permanente that will provide citizens access to healthier foods and fitness programs. Mrs. Colopy concluded her presentation by urging the conference participants to work with local governments, corporate partners, nonprofit organizations, and community members to develop sustainable programs to address health disparities.

PANEL SIX

Health, education and the military: How health issues- including disparities- impact the recruitment, retention and long-term well-being of our nation's servicemen and women.

Dr. Jennifer Friday of the Friday Consulting Group in Atlanta, GA, moderated the last panel of the third day of the conference. Dr. Friday introduced the panel and noted that whether young men and women joined the four branches of the military to improve their standard of living or to serve God and country, health issues play a role in their access or success in the military.

Dr. Gloria Ramsey of the Uniformed Services University of Health Sciences opened the panel with a presentation on the racial and ethnic composition of the military and how health

disparities affect the military readiness and national defense of the United States. Dr. Ramsey shared charts indicating that over two million people serve in the United States Armed Services. But a disproportionate number of them come from the southern states and especially from the states that are expanded Medicaid under the Affordable Care Act. She stated that 75% of young adults can not join the military because of obesity. Indeed, obesity is the number one obstacle preventing young adults from joining the military and their retention as personnel even after they had been successfully recruited. Many of them can not "make weight" and as a result are discharged or separated from the military. The problem of obesity does not end when military personnel are discharged and become veterans. Dr. Ramsey showed that 80% of male veterans and 60% of female veterans using the hospitals and clinics of the Veterans Administration are overweight. This is a condition that exacerbates their other health problems and costs the country \$2.5 billion a year. She concluded that obesity in the United States military has enormous policy implications and that it is a health disparity that puts the country at risk in defending itself.

Major General (Retired) Abraham J. Turner of the AT Consulting Group, sounded a similar alarm about the lack of preparedness of young Americans for military service. While General Turner praised "millennials" for their technical savvy and felt that they would solve some of the country's major problems, he is concerned that only one in four young people qualified for military service. He is also concerned about how Medicaid denial would affect the health of recruits in the 16 states from which the military obtains its largest number of recruits. Shifting topics, General Turner addressed the threat of colorectal cancer among African American men and the new policies for the clinics and hospitals for the Veterans Administration. He stated that he

is on a crusade to urge and encourage African American men, whose rate of colorectal cancer is double that of the national average, to get colonoscopies. He is taking this message to churches all around the country. Finally, he reported that the Secretary of Defense has developed a Five-Point Plan to address last year's scandal in the VA. The new policies included having the Defense Health Agency review all policies and procedures at VA hospitals and clinics, recommend new policies to improve access for all veterans, monitor the new plan, and then fix any problems in 45 days if they did not meet quality and safety standards.

Despite the many problems that veterans face in obtaining healthcare and other services under the GI Bill, **Mr. Michael Pischner** described two programs at Florida International University that are working to provide veterans education and employment. Mr. Pischner described the Vet Success on Campus (VSOC) program that the new GI Bill established for veterans who had served at least 36 months in the military. The VSOC program provides veterans free tuition, a \$2,000 per month stipend for living expenses, and \$1,000 for books and supplies. Started in 2009 at the University of South Florida as way of mitigating unemployment among veterans, the VSOC program has expanded to 94 colleges and assisted 80,000 veterans. Mr. Pischner also described a program aimed at utilizing the medical expertise of veterans who had served as medics, nurses and corpsmen in the military: the Veterans Bachelors of Science in Nursing (VBSN) program. This is a program that provides a fast track to a nursing degree that veterans can complete in one year. The VBSN program has expanded to 20 locations nationwide. Finally, Mr. Pischner stated that FIU hired a full-time counselor for veterans and opened a clinic on campus for veterans so that they would not have to make a 10-mile trek to the VA from the FIU campus.

After returning to active service **Ms. Lori Diaz** created the Holiday Help for Heroes (HHH) organization. After showing a film about the problem of suicides among veterans and how the military ignored them, Ms. Diaz explained why she created (HHH) to address the problem. She noted that while



*Dr. Jennifer Friday,
President and Principal
Researcher, The Friday
Consulting Group*



*Maj. General (Ret.)
Abraham J. Turner,
President & CEO, AT
Consulting Group*



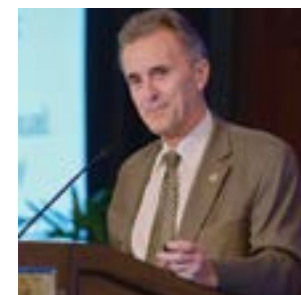
*Ms. Lori Diaz, U.S. Army
Reservist and Executive
Director of Holiday Help
for Heroes*



*Dr. Gloria Ramsey,
Associate Professor, Daniel
K. Inouye Graduate School
of Nursing, Uniformed
Services University of the
Health Sciences*



*Mr. Michael Pischner,
Director, Department
of Veteran and
Military Affairs, Florida
International University*



*Dr. Eduardo M. Ochoa,
President, California
State University-
Monterey Bay*

"Long Beach is the place to be."

— Ms. Karen Dale

DAY THREE: FRIDAY, NOVEMBER 7, 2014 *continued*

127 American soldiers died in combat in 2013, 425 committed suicide. She also provided the following startling statistics to contrast the rate of suicide among veterans with the general American population:

30 per 100,000 American soldiers commit suicide.

17 per 100,000 American citizens commit suicide.

Ms. Diaz stated while she created her organization to provide veterans holiday gifts, she found that they need much more. They need shelter, employment, food, and counseling for domestic violence and PTSD. But there is so much red tape that prevents them from getting the services that they need, they become a part of the nation's problem of health disparities.

Dr. Eduardo M. Ochoa, President of California State University, Monterey Bay, was the final presenter for this important session on health disparities and the United States military. He shared with the conference participants the history of Fort Ord as a military base and how the site became a part of the California State University system. Fort Ord was established as a military base in 1917. Soldiers were trained there for World Wars I and II, the Korean War, Vietnam and Desert Storm. In 1991, Fort Ord closed and was transferred to Base Reuse and Closure (BRAC). In 1994, Fort Ord was donated to the CSU system and the first classes were taught at the site in 1995. Dr. Ochoa stated that because of its history as a site for military training CSU, Monterey Bay continues to serve a growing number of veterans and to provide services for them. GI Jobs Magazine has named it a military friendly school for five years in a row. The university participates in the Vet Net Ally Awareness Program, a program of faculty, staff and administrators who are committed to creating a welcoming and supportive campus environment for military service members and veterans. Dr. Ochoa concluded his presentation by stating: "We think that by using education as a sort of theme for our cradle to career partnership across the county we can actually help impact and improve health in the long run."

DAY FOUR: SATURDAY, NOVEMBER 8, 2014

Keynote Address

Dr. Debra Joy Pérez

*Vice President, Research Education and Learning
Annie E. Casey Foundation, Baltimore, MD*



Dr. Debra Joy Pérez

Dr. Debra Joy Pérez

presented the last keynote of the conference. Her theme: Since the United States is becoming increasingly diverse, with African Americans, Latino-Americans, and Asian Americans projected to become the majority of the population of the country by the middle of the twenty-first century, our country needs to invest in

its minority population in order to secure its future. Indeed, she quoted statistics about the Social Security and Medicare systems and how in the near future, only two working people will be supporting one retiree; one of those two working people will be a person of color.

Dr. Pérez focused on some of the key American "systems" and how they negatively affect the lives of people of color. Citing systems such as the juvenile justice, healthcare, social services and education that operate in a vacuum (or in their own silos) when they deal with the lives of people of color. Dr. Pérez made the point that these systems destroy good programs and create a toxic environment for people of color. She advocated that all of these systems must be studied and reformed because they foster segregation and unhealthy communities, and support a racist, toxic society for people of color.

After making a very strong case for why some American systems needed to be overhauled, Dr. Pérez presented some solutions. She cited several programs sponsored and supported by the Annie E. Casey Foundation, such as the Latino Scholars Program and President Obama's Our Brother's Keeper program. She also cited the research that is being done on the interventions by other foundations to measure and assess their impact on boys and young men of color. One research study found that 31 foundations funded intervention programs, but only 25% of the programs had an exclusive focus on boys and young men. Less than half of them have been evaluated to determine their impact and outcomes. Dr. Pérez concluded that, in most cases, all of the research is on the problems, deficits, and the outcomes, but rarely do they study the systems that cause and perpetrate those negative outcomes. She said that data should focus on solutions.

PANEL EIGHT

The causes and impacts of violence, with emphasis on such contributing factors as guns, poverty, mental health and education including a focus on black-on-black crime.

Dr. W. Marvin Dulaney of the University of Texas at Arlington chaired a panel that focused on violence as a healthcare issue for young African American men. On the panel were Dr. Bryant T. Marks of Morehouse College Research Institute, Dr. Robert Bing of the University of Texas at Arlington, Dr. William Oliver of Indiana University, and Dr. Nicholas Cooper-Lewter of the University of South Carolina.

Dr. Dulaney opened the panel with introductory remarks about the negative effects of black-on-black violence on the lives of young African American men. Before introducing the panel he cited some of the solutions that local and national organizations have proposed to redirect young African American men from violence. Among them were the President Obama's Our Brother's Keeper program, the mentoring programs of 100 Black Men of America, and the Becoming A Man program in Chicago.



*Dr. W. Marvin Dulaney,
Associate Professor of
History, University of
Texas at Arlington*



*Dr. Bryant T. Marks,
Associate Professor,
Department of
Psychology, Morehouse
College*



*Dr. Robert Bing, III,
Associate Professor,
Criminology and Criminal
Justice, University of
Texas at Arlington*



*Dr. William Oliver,
Associate Professor,
Department of Criminal
Justice, Indiana University*



*Dr. Nicholas Cooper-
Lewter, Professor,
College of Social Work,
University of South
Carolina*

"You would never think that there would be health disparities in the United States in our army. But there are."

— Mr. Michael Pischner

DAY FOUR: SATURDAY, NOVEMBER 8, 2014 *continued*

Dr. Bryant T. Marks stated that many young African American males engage in crime to make enough money to meet their needs and wants. For some African American males, crime and violence became normative and logical, given their lack of options to meet their own needs and to provide for their families. He promotes the idea that we must provide these young men more options in their lives. He believes that education is critical to reducing crime and enhancing positive life outcomes for African American males. He cited statistics that indicated that African American males with college degrees are healthier and live longer; are less likely to commit crimes, and are more involved in their children's lives. For Dr. Marks, aside from family socialization, education is the chief option to reducing violence and negative outcomes among young African American men.

Dr. Robert Bing, III cited two theoretical perspectives to explain the phenomenon of black-on-black crime and violence: the social disorganization theory and the conflict theory. Both theories address the role of poverty, the lack of opportunity, hyper-segregated neighborhoods, and the lack of role models in such neighborhoods. Dr. Bing also offered his own "conflict Marxist criminologist" analysis: "some property crime is a rational response to the inequalities that are inherent in a capitalist society." According to Dr. Bing, the criminal justice system is designed to fail to ensure its survival. The criminal justice system is also obsessed with crimes committed by the poor because of the money involved. His solution: We must see crime as a public health issue. And as such, criminal justice would be just one area addressed by a holistic approach to improving public health for all Americans. In addition, we must seek to "habilitate" rather than rehabilitate, and "integrate" rather than re-integrate formerly incarcerated persons because people who encounter problems with the law really have not been a part of the mainstream of American society.

Dr. Nicholas Cooper-Lewter advocated solving the spiritual basis of violence. He stated that violence is a spiritual issue because the young men who are engaged in crime and violence are suffering from "inceptional and persistent wretchedness." He cited his work with two groups of African American males—prisoners and athletes—as examples of men who suffered from not knowing "Who the who is in who they are." He faulted most of the solutions that sought to address violence among African American men as not addressing the most important part of the problem: the spiritual. He advocated that we can solve the problem of violence among our young men by ending their belief in their wretchedness and by teaching them that they are not flawed and sinful individuals at birth as taught by your typical Christian church.

Dr. William Oliver concluded this important and informative panel by offering a structural-cultural analysis of black-on-black crime. First, he noted that black-on-black crime is not unique. All crime tends to be intra-racial, whether it is white-on-white, Latino-on-Latino, or Asian-on-Asian. Nevertheless, he cited statistics that clearly showed the racial disparities in the homicide rate for African Americans and other groups. For example, African American males of all ages have a homicide rate that is 10 times greater than that of white males and three times greater than that of Latino males. He stated that the high rate of violence among African American males is structural, cultural, and situational. Focusing on the cultural and situational, Dr. Oliver described how "the streets" served as an alternative socialization institution where African American boys became men and as a place where they became "at risk" and "in risk." "The streets" is the place where violence becomes an acceptable way to maintain one's status, but also a place that increases the risk of fatal and nonfatal injuries. In the interest of addressing the public health aspect of violence and reducing the risk that African American males face in their lives, Dr. Oliver stated that healthcare professionals should assess not only the educational and employment status of African American males, but also their involvement in the streets.

CONGRESSIONAL ROUNDTABLE DISCUSSION

Three members of the **United States House of Representatives** followed Dr. Pérez's keynote address with short presentations on the status of health legislation in the United States Congress and a question- and-answer session with the audience. Participating in the Roundtable were the **Honorable Lucille Roybal-Allard (California-40th District)**, the **Honorable G. K. Butterfield (North Carolina-1st District)**, and the **Honorable Grace F. Napolitano (California-32nd District)**.

In her opening remarks **Congresswoman Lucille Roybal-Allard** provided a short history of the national movement to address health disparities. She stated that prior to 2001 there was no national dialogue about health inequities in this country. She credited the Tri-Caucus (Hispanic, Black, and Asian-American and Pacific Islander caucuses) for introducing the issue in Congress when it first introduced the Health Equity and Accountability Act (HEAA) in 2003 in the 107th Congress. The bill did not pass, but the Tri-Caucus has introduced it in every session of Congress since then. According to Congresswoman Roybal-Allard, the Affordable Care Act includes many of the proposals first advanced in the HEAA. But there is still a need for a bill that directly addresses the health inequities cited by the Tri-Caucus in 2003. She called the HEAA "the consensus blueprint of the most comprehensive and strategic plan to eliminate health disparities in our country."

Congresswoman Grace Napolitano focused her remarks on the need for mental healthcare in the United States. She cited statistics that indicated that 60% of the people incarcerated in the United States are Hispanic or African American. Fifty percent of those who are incarcerated need mental healthcare.



The Congressional Roundtable



Dr. David Rivers, Congresswoman Lucille Roybal-Allard, Congresswoman Grace Napolitano and Congressman G. K. Butterfield

She also cited statistics that indicate that Latina adolescents (26%) and African American adolescents (18%) make up a disproportionate amount of the young people who contemplate or try to commit suicide. She stated that she had been able to address this issue in California by creating 26 schools where students can receive mental health treatment to address the trauma and special needs that lead them to consider and attempt suicide.

In his opening remarks **Congressman G. K. Butterfield** discussed the history of the Affordable Care Act. He noted that every president for the last 50 to 60 years—from Johnson to Clinton—attempted to reform access to healthcare, and all of them failed. He stated that President Barack Obama delayed healthcare legislation for a year in order to address the economic depression and downturn left by the George W. Bush administration. But after the passage of the very successful \$787 billion stimulus package that stabilized the economy and reversed the job losses of the Bush administration, President Obama took on the healthcare issue and got it passed. Although every Republican in Congress opposed the Affordable Care Act and threatened to punish its supporters, the ACA was passed and it revolutionized healthcare in the United States by expanding Medicaid, establishing the individual mandate, and providing all Americans the opportunity to have health insurance.

The three congressmembers then entertained a spirited discussion with the audience and further explained the significance of the Affordable Care Act as the first step toward addressing health disparities in the United States.

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AARP

American Kidney Fund

AmeriHealth Caritas

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California State University Long Beach Research Foundation (CSULB)

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California State University Monterey Bay

California State University San Bernardino

Community Care Network and Project H.E.L.P. USA/MRC

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National Black Nurses Association

National Library of Medicine

OraSure Technologies, Inc

Southeastern Virtual Institute for Health Equity and Wellness (SEVIEW)

(Department of Defense-Medical University of SC)

US Food and Drug Administration Office of Communications & Quality Program Management



California State University Monterey Bay Information Booth



AmeriHealth Caritas Information Booth



California State University Long Beach Information Booth



National Library of Medicine Information Booth



Mr. Kenneth F. Joe, Sr. at the AARP Exhibit Booth

AGENDA

EIGHTH ANNUAL NATIONAL CONFERENCE ON HEALTH DISPARITIES

Reducing Health Disparities through Sustaining Healthy Communities

November 5-8, 2014

DAY ONE: WEDNESDAY, NOVEMBER 5, 2014

9:00 a.m. -3:00 p.m. Undergraduate and Graduate Student Research Forum
Location: Centennial Ballroom

I. Continental Breakfast and Student Forum Registration

II. Welcome and Overview

Dr. Marvella Ford, *Chair, Student Research Forum*
Professor, Department of Public Health Science; Associate Director, Cancer Disparities
Hollings Cancer Center, Medical University of South Carolina, Charleston, SC

III. Oral Presentations

IV. Poster Session

V. Keynote Address/Lunch

Dr. Britt Rios-Ellis
Founding Dean, College of Health Sciences and Human Services, California State University-Monterey Bay; Founder and
Co-Director, Center for Latino Community Health, Evaluation, and Leadership Training, Seaside, CA.

VI. Roundtable Discussions

VII. Closing/Evaluations

1:00-4:00 p.m. Registration
Location: 3rd Floor Foyer

All sessions will be held in the Centennial Ballroom unless otherwise noted.



Conference Attendees enjoying the Cyber Cafe



Dr. Mildred McClain and conference attendees



Dr. Tionna Jenkins and Mrs. Cassandra Allen



AGENDA

DAY TWO: THURSDAY, NOVEMBER 6, 2014

7:30 a.m.....Continental Breakfast: Centennial Ballroom
7:30 a.m. – 4:00 p.m.....Registration, 3rd Floor Foyer

8:15 a.m.
Mistress of Ceremonies

Ms. Carolyn Sawyer, *Communications Strategist Tom Sawyer Company, Columbia, SC*

Opening Remarks

Moderator

Dr. David E. Rivers, *Associate Professor and Public Information and Community Outreach Director, Department of Library Science and Informatics; Advisory Board Chairman, Medical University of South Carolina, Charleston, SC*

Speakers

Dr. Jane Close Conoley, *President, California State University-Long Beach, Long Beach, CA*

Mrs. Maryanne Reyes Jackmon, *Senior Director of External Relations, CSU Chancellor's Office, Long Beach, CA*

Ms. Maria Pajil Battle, *President, AmeriHealth Caritas Partnership, Philadelphia, PA*

Mrs. Kelly Colopy, *Director, City of Long Beach Department of Health and Human Services*

Dr. Sabra C. Slaughter, *Associate Professor, Medical University of South Carolina, Charleston, SC*

Dr. Valerie Montgomery Rice, *President, Morehouse School of Medicine, Atlanta, GA*

Dr. Billy Thomas, *Vice Chancellor for Diversity and Inclusion, University of Arkansas for Medical Sciences, Little Rock, AR*

Dr. Britt Rios-Ellis, *Founding Dean, College of Health Sciences and Human Services, California State University-Monterey Bay; Founder and Co-Director, Center for Latino Community Health, Evaluation, and Leadership Training, Seaside, CA.*

Dr. Charlene Spearen, *Interim Vice President of Academic Affairs, Allen University, Columbia, SC*

Ms. Cynthia A. Harding, *Interim Director of Public Health and Chief Deputy Director, Los Angeles County Department of Public Health, Los Angeles, CA*

9:00 a.m.....Introduction of Keynote Speaker

Dr. David E. Rivers

Associate Professor and Public Information and Community Outreach Director, Department of Library Science and Informatics; Advisory Board Chairman, Medical University of South Carolina, Charleston, SC

Keynote Address

The Honorable James E. Clyburn

Assistant Democratic Leader

U. S. House of Representatives, South Carolina-Sixth District

10:00 a.m.Introduction of Keynote Speaker

Keynote Speaker: Overview of Health Disparities

Dr. J. Nadine Gracia

Deputy Assistant Secretary for Minority Health, Director of the Office of Minority Health, U.S. Department of Health and Human Services, Washington, DC

10:30 a.m.....Break

10:45 a.m.

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, *Associate Professor, Advisory Board Chairman, Medical University of South Carolina, Charleston, SC*

Video Presentation on the Social Determinants of Health

Panelists

Ms. Kathy Ko Chin, *President and CEO, Asian & Pacific Islander American Health Forum (APIAHF), San Francisco, CA*

Dr. Kurt C. Organista, *Professor, School of Social Welfare, University of California–Berkeley, Berkeley, CA*

Dr. Gail C. Christopher, *Vice President for Programs, Food, Health & Well-Being, W.K. Kellogg Foundation, Battle Creek, MI*

12:00 p.m.....Break

12:30 p.m.....Luncheon

AGENDA

Opening Remarks/Introduction of Speaker

Mr. Castulo de la Rocha
President and CEO
AltaMed Health Services Corporation
Los Angeles, CA

Luncheon Speaker

Dr. Dwayne Proctor
Director of Disparities
Robert Wood Johnson Foundation
Princeton, NJ

1:45 p.m.Break

2:00 p.m.

Panel Two
Translational research with proven results in reducing health disparities, with a major focus on chronic and communicable diseases

Moderator
Dr.Valerie Montgomery Rice, *President, Morehouse School of Medicine, Atlanta, GA*

Panelists
Dr. Stephanie Gardner, *Dean, College of Pharmacy, Associate Provost for Society and Health, University of Arkansas for Medical Sciences, Little Rock, AR*
Dr. Roberta Troy, *Founding Director of the Health Disparities Institute for Research and Education, Tuskegee University, Tuskegee, AL*
Dr. Frank Meza, *Assistant Area Medical Director for Los Angeles and West Los Angeles Kaiser Medical Centers, Los Angeles, CA*
Dr. Gregory A. Talavera, *Associate Professor, Division of Health Promotion, Gradaute School of Public Health, San Diego State University, San Diego, CA*

6:00-8:00 p.m.RECEPTION
The Westin Long Beach Lobby



Panel Session



Student Attendees at Opening Reception



Dr. Roberta Troy, Dr. David Rivers & Dr. Latecia Abraham



AGENDA

Remarks

Dr. David E. Rivers, Associate Professor, Advisory Board Chairman, Medical University of South Carolina, Charleston, SC
Mr. Bob Blair, Chief Administrative Officer, Kaiser Permanente South Bay, Harbor City, CA

DAY THREE: FRIDAY, NOVEMBER 7, 2014

7:30 a.m.Continental Breakfast: Centennial Ballroom

7:30 a.m.-4:00 p.m.....Registration, 3rd Floor foyer

8:00 a.m.
Mistress of Ceremonies

Ms. Carolyn Sawyer, Communications Strategist, Tom Sawyer Company, Columbia, SC

Keynote Address
Ms. Lisa Williams, Author; Founder, Living Water Learning Resource center, Atlanta, GA

8:45 a.m.
Panel Three
The impact of global climate change on the built environment with emphasis on environmental quality, health, food supply and infrastructure

Moderator
Dr. LaVerne E. Ragster, Retired Professor and President Emerita, University of the Virgin Islands, St. Thomas, USVI
Mr. Ernesto Diaz, Director, Puerto Rico Coastal Zone Management Program, Department of Natural and Environmental Resources, San Juan, Puerto Rico
Ms. Femke Oldham, MPP Candidate, Goldman School of Public Policy and the San Francisco Foundation, UC Berkeley, Berkeley, CA

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

Moderator
Dr. Britt Rios-Ellis, Founding Dean, College of Health Sciences and Human Services, California State University-Monterey Bay; Founder and Co-Director, Center for Latino Community Health, Evaluation, and Leadership Training, Seaside, CA

Panelists

Dr. Thomas Ellison, Medical Services Director, Principal Investigator, Project H.E.L.P. USA/MRC, Bruno-Smithfield Community Health Center, Birmingham, AL
Dr. Elisa Nicholas, CEO, The Children’s Clinic, Long Beach, CA
Dr. Nneka Ifejika, Director of Neurorehabilitation, University of Texas Stroke Team; Associate Professor, Department of Neurology, University of Texas Health Science Center, Houston, TX
Dr. Gloria Wilder, President and CEO, Core Health LLC, Washington, DC

11:45 a.m.....BREAK
12:15 p.m.....LUNCHEON

Opening Remarks and Introduction of Keynote Speaker
Dr. Beatrice Yorker, Dean, College of Health and Human Resources, California State University-Los Angeles, Los Angeles, CA

Keynote Speaker
Dr. Michael Kanter, Medical Director Quality & Clinical Analysis, Southern California Permanente Medical Group, Pasadena, CA

Student Awards Ceremony
Dr. Marvella Ford, Chair, Student Research Forum, Medical University of South Carolina, Charleston, SC
Dr. Milford W. Greene, Co-Chair Student Research Forum, Director of Health and Clinical Services, Sickle Cell Anemia Foundation of Georgia, Atlanta, GA
Dr. David E. Rivers, Advisory Board Chairman, Medical University of South Carolina, Charleston, SC
Dr. Sabra C. Slaughter, Senior Advisor to the President, Medical University of South Carolina, Charleston, SC

1:30 p.mBREAK
1:45

Panel Five
Successful community-based programs for building, sustaining and strengthening healthy communities

Moderator
Dr. Sabra C. Slaughter, Principal Investigator, SE VIEW; Associate Professor, Family Medicine, Office of the President, Medical University of South Carolina, Charleston, SC

AGENDA

Panelists

Dr. L.Toni Lewis, Chair, Service Employees International Union (SEIU) Healthcare, Physician Chair, SEIU Healthcare, International Vice President, SEIU, New York, NY

Mr. Roland J. Gardner, CEO, Beaufort-Jasper-Hampton Comprehensive Health Services, Ridgeland, SC

Mr. Nolan Rollins, President, Los Angeles Urban League, Los Angeles, CA

Ms. Karen Dale, Executive Director, AmeriHealth District of Columbia, Washington, DC

Mrs. Kelly Colopy, Director, City of Long Beach Department of Health and Human Services, Long Beach, CA

3:15 p.m.BREAK

3:30 p.m.

Panel Six

Health, education and the military: How health issues – including disparities—impact recruitment, retention and long term well-being of our nation’s servicemen and women

Moderator

Dr. Jennifer Friday, President and Principal Researcher, The Friday Consulting Group, Atlanta, GA

Panelists

Dr. Gloria Ramsey, Associate Professor, Daniel K. Inouye Graduate school of Nursing, Ph.D. Nursing Science Program; Secondary Appointment, Department of Preventive Medicine and Biometrics, School of Medicine; Director, Community Research Engagement, Center for Health Disparities, Uniformed Services University of the Health Science, Bethesda, MD

Major General (Ret.) Abraham J. Turner, President & CEO AT Consulting Group, West Columbia, SC

Mr. Michael Pischner, Director, Department of Veteran and Military Affairs, Florida International University, Miami, FL

Ms. Lori Diaz, U.S. Army Reservist and Executive Director of Holiday Help for Heroes, Huntsville, AL

Dr. Eduardo M. Ochoa, President, California State University-Monterey Bay, Seaside, CA

DAY FOUR: SATURDAY, NOVEMBER 8, 2014

7:30 a.m.Continental Breakfast

8:00 a.m.Opening Remarks/Introduction of Speaker

Ms. Carolyn Sawyer, Communications Strategist, Tom Sawyer company, Columbia, SC



Mrs. Kelly Colopy, Dr. Kenneth Millar, Dr. Britt Rios-Ellis, Dr. David Rivers and Dr. Robert Blair



Conference attendees at Opening Reception



Dr. Sabra Slaughter, Dr. Michael Kanter, Dr. Marvella Ford, Dr. David Rivers, Dr. Milford Greene

AGENDA

Keynote Speaker

Dr. Debra Joy Perez
*Vice President, Research, Evaluation and Learning
Annie E. Casey Foundation
Baltimore, MD*

8:45 a.m.....Special Session
A Roundtable discussion with Congressional leaders on health care and the reduction of health disparities

Congressional Roundtable Members

The Honorable G. K. Butterfield, Jr. *U.S. Congress, First District, North Carolina, Chief Deputy Whip and First Vice Chair of the Congressional Black Caucus*
The Honorable Lucille Roybal-Allard, *U.S. Congress, 40th District, California, Chair, Congressional Hispanic Caucus Health Care Task Force*
The Honorable Grace Napolitano, *32nd District, California, Congressional Hispanic Caucus and House Committee on Natural Resources*

10:15 a.m.
Panel Seven
The impact of human trafficking (for labor and sexual purposes) at the national, state and local level

Moderator
Ms. Shirley Franklin, *Barbara Jordan Visiting Professor, Lyndon B. Johnson School of Public Affairs, University of Texas; CEO and Chair of the Board, Purpose Built Communities, Former Mayor of Atlanta, Austin, TX*

Panelists
Ms. Deborah J. Richardson, *Executive Vice President, National Center for Civil and Human Rights, Atlanta, GA*
Ms. Lisa Williams, *Author; Founder, Living Water Learning Resource Center, Atlanta, GA*
Mr. Kenneth F. Joe, *Community Advocate, Author and Consultant, Atlanta, GA*
Ms. Renee Murrell, *Victim Specialist, Baltimore Division, Federal Bureau of Investigation, Baltimore, MD*

11:45 a.m.....BREAK

12:00 p.m.
Panel Eight
The causes and impacts of violence, with emphasis on such contributing factors as guns, poverty, mental health and education, including a focus on black-on-black crime

Moderator

Dr. W. Marvin Dulaney, *Associate Professor of History, Department of History University of Texas at Arlington, Arlington, TX*

Panelists

Dr. Bryant T. Marks, *Associate Professor, Department of Psychology, Morehouse College; Executive Director, The Morehouse Research Institute; Commissioner, the White House Initiative on Educational Excellence for African Americans, Atlanta, GA*
Dr. Robert Bing, III, *Associate Professor, Criminology and Criminal Justice, University of Texas-Arlington, Arlington, TX*
Dr. Nicholas Cooper-Lewter, *Professor, University of South Carolina, College of Social Work, Columbia, SC*
Dr. William Oliver, *Associate Professor, Department of Criminal Justice, Indiana University, Bloomington, IN*

Closing Remarks

Dr. David E. Rivers, *Advisory Board Chairman, Medical University of South Carolina, Charleston, SC*



Conference planning team with Advisory Board Committee

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Eighth Annual National Conference on Health Disparities Reducing Health Disparities Through Sustaining and Strengthening Healthy Communities

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Dr. Kurt C. Organista

Professor; School of Social Welfare
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Dr. Debra Joy Perez

Vice President for Research and Evaluation and
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Baltimore, MD

Mr. Michael Rashid

Former President and Chief Executive Officer
AmeriHealth Caritas Family of Companies
Philadelphia, PA

Dr. Britt Rios-Ellis

Founding Dean, College of Health Sciences and
Human Services, California State University
Monterey Bay; Founder and Co-Director; Center
For Latino Community Health, Evaluation, and
Leadership Training
Seaside, CA

Dr. Sabra Slaughter

Principal Investigator
Associate Professor; Family Medicine
Office of the President
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The Honorable Calvin Smyre

State Representative, 132nd District
Georgia House of Representatives
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PHOTO HIGHLIGHTS

For the full catalog of pictures, please visit our website at www.nationalhealthdisparities.com.



Conference Attendee and Ms. Shelly Thomas at Opening Reception



Dr. Dorothy Harris, Mrs. Dorothy Harrison and Dr. David Rivers



Keynote Address by Congressman James E. Clyburn



Dr. Edrin Bell, Dr. Jennifer Friday and Mr. Herman Gentry



Conference attendees at Opening Night Reception



Dr. Gregory A. Talavera, Mr. Iran Barrera and Dr. Kurt C. Organista



Dr. J. Nadine Gracia and Conference Attendee



Dr. Mara Byrd, Miguel Angel Ortiz-Valenzuela and Dr. Kurt C. Organista



Dr. Nneka L. Ifejika and Conference Attendee

PHOTO HIGHLIGHTS

For the full catalog of pictures, please visit our website at www.nationalhealthdisparities.com.



Dr. Mark Homonoff



Ms. Lisa Williams and Ms. Marlene Inyang



Mr. Lloyd Moore and Dr. David Rivers



Mrs. Carolyn Sawyer, Dr. David Rivers, Dr. Kurt C. Organista, Dr. Gail C. Christopher and Ms. Kathy Ko Chin



Student Volunteers assisting with Conference Registration



Ms. Maria Pajil Battle



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**The Ninth Annual
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and

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**A National Dialogue
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www.nationalhealthdisparities.com

Rural residents can't always come to us,
so we're taking health care to them.



What's the point of offering world-class care if patients can't access it? Southeastern states share a disproportionate burden of chronic maladies, a problem compounded by ethnic and socio-economic disparities in rural communities. So the Medical University of South Carolina (MUSC) developed programs like the MUSC Public Information and Community Outreach (PICO) Initiative and the Southeastern Virtual Institute for Health Equity and Wellness (SE VIEW), which are using the Internet and telemedicine to engage communities and treat chronic diseases. Visit www.musc.edu/seview

Changing What's Possible in Rural Health Care.

