



CENTER *for* HEALTH EQUITY

School of Public Health

Maryland Center for Health Equity

NEWSLETTER

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Approximately 500 people attended the 9th Annual Maryland Minority Health Conference on October 17th in Baltimore. Dr. Howard K. Koh received the 2012 Shirley Nathan-Pulliam Health Equity Leadership Award.

Dean Jane Clark, Univ. Maryland School Public Health; Dr. Joshua Sharfstein, Secretary Maryland DHMH; Dr. Stephen B. Thomas, Director M-CHE; Dr. Howard K. Koh, Assistant Secretary for Health U.S. DHHS; Shirley Nathan-Pulliam, Delegate Maryland District 10 Baltimore County; Dr. Carlesia Hussein, Dir. Maryland Office Minority Health & Health Disparities DHMH; and Donna Jacobs, Senior VP Univ. Maryland Medical System.



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Message from the Principal Investigators

On April 12, 2012, Governor Martin O'Malley signed into law the **Maryland Health Improvement and Disparities Reduction Act** (SB 234), positioning the state as a leader in the national effort to eliminate racial and ethnic health disparities. M-CHE Director Stephen B. Thomas served as a member of the Maryland Health Quality and Cost Council's Health Disparities Workgroup, which produced a final report with recommendations that shaped the new law. One key provision of the law is the establishment of Health Enterprise Zones (HEZs), which will provide economic incentives for medical health practitioners to form partnerships with community based organizations and local governments in order to identify geographic zones to target for delivery of innovative interventions focused on addressing hypertension, type-2 diabetes and asthma. Additionally, the law calls for creation of the Health Innovation Prize, as an incentive to inspire trans-disciplinary collaboration to break the cycle of persistent health disparities and to encourage facilities to expand their reach to underserved areas in the state.



While passage of the legislation was a critical first step in the health policy arena, now is the time for action. We must now move our focus to implementation of the evidence based interventions facilitated by the new law. To that end, the M-CHE was proud to serve as a co-sponsor of the 9th Annual Maryland Minority Health Disparities Conference, held October 17, 2012 in Baltimore. Consistent with this year's theme, **Advancing Healthy Public Policy: The Maryland Health Improvement** and Disparities Reduction Initiative, conference speakers provided the over 500 attendees with information about the implementation of the legislation, including the establishment of HEZs and opportunities for collaboration so that various groups throughout the state can concentrate their efforts to improve health and reduce disparities. Howard K. Koh, MD, MPH, Assistant Secretary for Health, U.S. Department of Health and Human Services delivered the Keynote address and received the 2012 Shirley Nathan-Pulliam Health Equity Leadership Award.

Toward a Better State of Health: The University of Maryland Collaborative School of Public Health

We recognize that collaboration is key to making great strides towards the realization of health equity, and so we are excited to see the development of the new collaborative school of public health, which brings together the School of Public Health in College Park and the Master's of Public Health Program in the Department of Public Health and Epidemiology at the University of Maryland, Baltimore. M-CHE Senior Associate Director Sandra Quinn, who also serves as Associate Dean for Public Health Initiatives, is one of four members of the Inter-Campus Steering Committee that is working towards integration and national accreditation of the collaborative school. Dr. Quinn reflects on this new challenge and opportunity, "Our current accredited SPH brings all the strengths of a full SPH, and we're excited to join with our colleagues in Baltimore, who have built a MPH program that advances inter-professional education with other health professionals, law and social work. Ultimately, this collaborative SPH will facilitate expanded efforts toward health equity across our state." For more information about the move toward the collaborative school of public health, click here: <http://newsdesk.umd.edu/vibrant/release.cfm?ArticleID=2785>



The Affordable Care Act: Maryland in the Lead

In 2014, nearly 250,000 Marylanders are expected to become newly insured as a result of expanded Medicaid eligibility and the creation of a health insurance exchange as authorized under the Patient Protection and Affordable Care Act (ACA). To successfully enroll these individuals in coverage, the state is developing a set of robust outreach and enrollment mechanisms. One of these resources, the navigator program, will help consumers learn about, apply for and enroll in health insurance coverage. Dr. Thomas has been appointed to the Maryland Health Benefit Exchange Navigator Advisory Committee. In October they produced the final report "*Options for the Design and Implementation of Maryland's Navigator Program*," which provides a roadmap to ensure Marylanders receive the care they deserve.

This is an important time for our state's and our nation's efforts to eliminate health disparities. With united efforts and the combined strengths of various institutions and the support of the legislature we can move forward towards our shared goal of eliminating health disparities and achieving health equity.



M-CHE Awarded \$5.9M NIH Grant to Launch Health Equity Research

We are pleased to announce that the NIH has designated the University of Maryland School of Public Health a **Center of Excellence on Race, Ethnicity, and Health Disparities Research** with a new five year grant from the National Institute on Minority Health and Health Disparities (NIMHD). Drs. Sandra C. Quinn and Stephen B. Thomas are the principal investigators of the \$5.96M Center for Excellence (COE) grant that will operate through the Maryland Center for Health Equity (M-CHE).

Three research studies will be supported by the COE grant. The first, a major study on vaccination disparities between whites and African Americans, will use qualitative and quantitative methods to explore critical issues that affect vaccine acceptance in routine and emergency situations. Led by Dr. Quinn, with co-investigators at the University of Georgia and the University of Pittsburgh, it builds on her team's success in examining public attitudes during the 2009 H1N1 influenza pandemic. A second study, Sisters Healthy and Physically Empowered (SHAPE), will utilize barbershops and beauty salons as venues to test a social support intervention on the physical activity levels of African-American women (led by Dr. Deborah Young). Finally, a third study will focus on promoting healthy behaviors among African-American men in a partnership with Drs. Jermaine Bond and Brian Smedley at the Joint Center for Political and Economic Studies.

"The new COE will enable us to make a great leap forward," said Thomas. "We have assembled a multidisciplinary team of faculty from across the school of public health and the University of Maryland to conduct intervention research designed to reduce and ultimately eliminate racial and ethnic disparities in diabetes, asthma, hypertension, obesity and vaccine preventable diseases," he said.

The COE research agenda is guided by the "Health Equity Action Research Trajectory" (HEART), a conceptual framework first described by the Maryland team in the Annual Review of Public Health (2011). "Focusing directly on the contribution of race and ethnicity to health disparities brings racism and discrimination to the forefront of our research design," said Quinn. "In addition, the passage of the 2012 Maryland Health Improvement and Disparities Reduction Act supports our ability to sustain successful interventions and have a greater impact."

In addition to the new research studies, senior investigators on the COE team will also lead community outreach and engagement efforts, educational and training programs and the development of healthy public policy designed to address social determinants of health, such as poverty and racial housing segregation. These new initiatives will build upon current M-CHE efforts and the sound scientific foundation established over ten consecutive years of NIH funding.

"We are excited to both strengthen the ability of researchers throughout the country to grapple with race and racism through our unique and innovative training institutes, and to add a new focus on policy initiatives related to health equity through the School of Public Health's Legacy Leaders in Public Policy program," said Dr. Quinn. "This will better enable leaders who work with the Maryland General Assembly and local governments to consider the impact of policy and legislation on health equity in our state."



Quinn and Thomas Educate an International Audience on the Ethics of Recruiting Vulnerable Populations in Clinical Research

Sandra C. Quinn and Stephen B. Thomas were invited to participate as speakers at the 8th International Conference on Bioethics Education held September 2-5 in Tiberias, Israel. Led by the United Nations Educational, Scientific, and Cultural Organization (UNESCO) Chair in Bioethics, this conference was designed as a forum that offered participants the opportunity to exchange information and knowledge about bioethics education through discussions, lectures, workshops, and exhibitions. The conference brought over 300 participants from 40 countries together to address a diverse array of topics relevant to bioethics education. The conference was sponsored by the UNESCO Chair in Bioethics; the Israel National-Commission for UNESCO; the World Medical Association; the Israeli Medical Association; the International Center for Health, Law and Ethics, University of Haifa; the Zefat Forum on Bioethics and the Zefat Academic College, Israel.

During a session focused entirely on informed consent issues, Quinn and Thomas spoke on the critical importance of improving the informed consent process in a presentation, *The Dynamics of the Informed Consent Encounter: The Confluence of Race, Class and Power in Clinical Trials Recruitment*. They utilized video components from the *Becoming a Self-Reflective Researcher: Successfully Engaging Minority Communities* curriculum; the components used actors to examine communication during the informed consent process between a white physician and an African American patient, and potential research subject.

In a second session, titled *Toward a Paradigm of Openness: Implications for Bioethics Education for Researchers*, Dr. Quinn presented a new framework to understand the factors that contribute to participation in research. While Quinn and Thomas focus primarily on racial and ethnic minorities within the US, their message resonated with the international crowd at the conference, as participants acknowledged encountering many of the same challenges when recruiting vulnerable populations within their own countries that researchers in the US encounter face when engaging with minority communities. "It was particularly exciting to see strong interest in our curriculum, *Becoming a Self-Reflective Researcher: Successfully Engaging Minority Communities*, and our conceptual framework, with people from other countries recognizing its value in their different cultural context", said Quinn.

While their focus will remain on US minority populations, with this recent expansion of their reach beyond the state of Maryland and the US to the global audience of researchers, Quinn and Thomas will look for further opportunities to disseminate and test the curriculum in other international settings.

Building Trust: Improving Minority Participation in Research

In our last Newsletter, we announced the formal completion of our NIH funded Bioethics Research Infrastructure Initiative called Building Trust between Minorities and Researchers. We accomplished all of the goals we set out to achieve during the life of the grant, and even surpassed many of our stated aims.

So why are we still talking about updates to Building Trust? For the simple reason that our efforts to Build Trust began before the funding of NIH sponsored BT Initiative and it continues to be part of the DNA of our research enterprise. Build-



ing trust between minorities and researchers is central to our M-CHE mission to eliminate racial and ethnic health disparities to achieve health equity for all.

What will the next phase of Building Trust look like? We will soon release the BT interactive website designed to disseminate our educational programs ([BT CURRICULUM](#)) and make these curricula more broadly available to different audiences across the nation and around the world.

Our web-based partner is Interactive Knowledge, Inc., one of the nation's leading developers of online educational content. They are helping us to introduce key messages from the BT curricula to an exciting and interactive web-based platform. This on-line program is designed for use by community members, health sciences students, researchers, and others interested in learning more about the value of medical research, important things to know about participation in research, and how to become an informed decision maker about participating in research, including clinical trials. Please visit our website for current updates.

Opening Doors for the Next Generation of Public Health Researchers: M-CHE Hosts a Summer McNair Scholar

During the summer of 2012, the M-CHE hosted an undergraduate student participating in the University of Maryland Ronald E. McNair Post-Baccalaureate Achievement Program. The program is designed to prepare students who are primarily first generation and from traditionally underrepresented groups to pursue doctoral studies. Drs. Craig S. Fryer, James Butler III, and Natasha A. Brown served as mentors for the Center's first McNair Scholar, D. Nandi McCammon, a junior in the Department of Behavioral and Community Health. Guided by McCammon's interest in health issues among minority youth, understanding health disparities, and conducting qualitative research, her mentors helped her to develop a literature review examining nicotine dependence among African American youth. During her six-week internship, she conducted a critical review of the current research on nicotine dependence, gained an understanding of the nuances of qualitative data transcription, enhanced her public speaking skills, and developed a resume reflective of her exemplary background. McCammon presented her research findings at the Ronald E. McNair Summer Research Institute Symposium in July, where she demonstrated her mastery of both the oral and scientific poster presentation styles. When reflecting upon her experience as a McNair Scholar, McCammon stated, "Working with three mentors who are in my field, and also look like me, made this a rich and truly unforgettable experience. I cannot imagine how it [her summer research project] would have turned out, had I not been blessed with the opportunity to work with you all. You are stellar role models. It is my hope that I will be able to continue to do research with you all, and consistently set the bar." To learn more about the **Ronald E. McNair Post-baccalaureate Achievement Program**, please visit <http://mcnairscholars.com/about>



M-CHE Research: Hear about Our Research Updates and Results at the Upcoming APHA Annual Meeting and the Summit on the Science of Elimination of Health Disparities

APHA 140th Annual Meeting and Exposition
 San Francisco, CA, October 27-31, 2012

Monday, October 29
11:30am, Oral Presentation, Session 3170.0
[Developing workforce capacity for disparities research: The Health Equity Leadership Institute \(HELI\)](#)
 Brenda González, Christina Hower, Sarah Esmond, Alexandra Adams, Christine Sorkness, **James Butler, Craig Fryer, Mary A. Garza, Sandra C. Quinn, and Stephen Thomas**

Tuesday, October 30
11:30am, Oral Presentation, Session 4131.0
[Parental decision-making about H1N1 vaccines for children](#)
 Karen Hilyard, **Sandra C. Quinn**, Kevin H. Kim, Donald Musa, and Vicki Freimuth

4:30-5:30pm, Poster Presentation, Session 3405.1, Board 8
[Ideology, partisanship, and support for government actions in 2009 H1N1 influenza pandemic](#)
 Nestor Castaneda-Angarita, Karen Hilyard, Kevin H. Kim, Vicki Freimuth, and **Sandra C. Quinn**

2012 Summit on the SCIENCE OF ELIMINATION OF HEALTH DISPARITIES: BUILDING A HEALTHIER SOCIETY
 National Harbor, MD, October 31-November 2 2012

Thursday, November 1
3:15-4:45pm, Oral Presentations, Concurrent Session: B
[Listening to the Voices of African Americans and Latinos to Shape Investigators' Practices](#)
 Presented by Sandra C. Quinn

[Methods and Procedures for Community Engagement: Recruitment of African Americans into a Clinical Trial in Preventing Depression](#)
 Presented by Stephen B. Thomas

10:30-11:30am, Poster Presentation, Poster Session 1
Poster #T06-004: Toward a Deeper Understanding of African American and Latino Participation in Research
 Presented by Mary A Garza

Friday, November 2
9:30-10:30am, Poster Presentations, Poster Session 2
Poster #F10-009: National Survey Results on Investigator Strategies used to Retain Minorities in Research
 Presented by James Butler, III

Poster #F14-007: Engaging Public Housing Residents in Smoking Cessation Research: Challenges and Strategies
 Presented by James Butler, III

Poster #F10-014: Racial Concordance and Recruitment of Minority Populations into Research
 Presented by Craig S. Fryer

Poster #F02-024: "Maybe I can lead more by example": Examining Dietary Socialization Strategies in African American Extended Family Networks
 Presented by Natasha A. Brown



Bioethics in the News

Do Post-Market Drug Trials Need a Higher Dose of Ethics?

(Scientific American, Katherine Harmon, August 23, 2012). Patients who sign up for trials testing more than one already approved intervention do not always know if one is being tested for harmful side effects.

<http://www.scientificamerican.com/article.cfm?id=post-market-drug-trial-ethics>

What Business Are We In? The Emergence of Health as the Business of Health Care.

(The New England Journal of Medicine, David A. Asch and Kevin G. Volpp, September 6, 2012). On January 19, 2012, after 131 years of operation, the Eastman Kodak Company filed for Chapter 11 protection in U.S. bankruptcy court.

<http://www.nejm.org/doi/full/10.1056/NEJMp1206862#.UGe40dfFt9U.twitter>

Helsinki doctrine under review.

(CMAJ News, September 24, 2012). The World Medical Association will revise the Declaration of Helsinki before the core biomedical ethics document's 50th anniversary in 2014, a process sure to spark intense debate over the use of placebos during clinical trials in poor countries, and guaranteed access to after-study care.

http://www.cmaj.ca/site/earlyreleases/24sept12_helsinki-doctrine-under-review.xhtml

Fewer HIV funds for women, youth in big cities including D.C.

(The Washington Post, Lena H. Sun, October 7, 2012). The federal government is providing fewer safety-net funds for women and children living with HIV/AIDS in many large cities with high infection rates, including Washington.

http://www.washingtonpost.com/national/health-science/fewer-hiv-funds-for-women-youth-in-big-cities-including-dc/2012/10/07/ff85263c-0f39-11e2-bb5e-492c0d30bff6_story.html

The Ups and Downs of Electronic Medical Records.

(The New York Times, Milt Freudenheim, October 8, 2012). The case for electronic medical records is compelling: They can make health care more efficient and less expensive, and improve the quality of care by making patients' medical history easily accessible to all who treat them.

http://www.nytimes.com/2012/10/09/health/the-ups-and-downs-of-electronic-medical-records-the-digital-doctor.html?_r=0