



THE WALLACE CONERLY HEALTH POLICY SYMPOSIUM

“Improving Quality and Achieving Equity: Developing Solutions to Health Disparities”

APRIL 30, 2009



**THE UNIVERSITY OF MISSISSIPPI
MEDICAL CENTER**

*Sponsored by the University of Mississippi Schools of Medicine and Nursing and
the University of Mississippi Medical Center Division of Multicultural Affairs*

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AN EXECUTIVE BRIEF

THE WALLACE CONERLY HEALTH POLICY SYMPOSIUM

Thursday, April 30, 2009
The University of Mississippi Medical Center

MORNING SESSION (AMPHITHEATRE R354)

7:00-8:00 A.M. **KEYNOTE ADDRESS**
***“Improving Quality and Achieving Equity:
Addressing Disparities in Health Care”***
Joseph R. Betancourt, M.D., M.P.H.

AFTERNOON SESSIONS FOCUS GROUPS ON HEALTH DISPARITIES

(No continuing education credit available for these sessions.)

- 12:00-1:00 P.M. ***Unnatural Causes...Is Inequality Making Us Sick?—Place Matters***
Facilitator: Dr. Mario Sims, Assistant Professor for the Department of Medicine
Location: Jackson Medical Mall Community Meeting Room
- 12:00-1:00 P.M. ***Understanding the Impact of Health Disparities***
Facilitator: Dr. Warren Jones, Executive Director, Mississippi Institute for Improvement of Geographic and Minority Health
Location: School of Health Related Professions (SHRP) Lecture Room 1B
- 12:00-1:00 P.M. ***Understanding Health Disparities and Cardiovascular Disease: The Role of the Jackson Heart Study***
Facilitator: Dr. Herman Taylor, Principal Investigator, Jackson Heart Study
Location: School of Medicine (SOM) R153
- 12:00-1:00 P.M. ***Health Disparities in Oral Health and Dental Care***
Facilitators: Dr. Denise Krause, Associate Professor, School of Dentistry and Dr. Jasmin Chapman, Chief Executive Officer, Jackson Hinds Comprehensive Health Center
Location: School of Dentistry (SOD) Classroom D114
- 12:00-1:00 P.M. ***Disparate Treatment: Dealing with Patient Mistrust and Uncertainty***
Facilitators: Dr. Shirley Schlessinger, Associate Dean for Graduate Medical Education and Dr. Jasmine Taylor, Associate Vice Chancellor for Multicultural Affairs
Location: School of Nursing (SON) A018

KEYNOTE SPEAKER

Joseph R. Betancourt, M.D., M.P.H.
Director, The Disparities Solutions Center
Senior Scientist, Institute for Health Policy
Assistant Professor of Medicine, Harvard Medical School
Program Director of Multicultural Education, Multicultural Affairs Office



Dr. Betancourt's primary interests include racial and ethnic disparities in health care, cross-cultural medicine, minority recruitment into the health professions, and minority health/health policy research. He has served as principal investigator on grants from the Center for Medicare and Medicaid Services, the Commonwealth Fund, the Robert Wood Johnson Foundation, and the California Endowment, in addition to being co-investigator on a project funded by the National Cancer Institute and the Health Resources and Services Administration.

Dr. Betancourt has served on several Institute of Medicine (IOM) Committees, including those that produced "Unequal Treatment: Confronting Racial/Ethnic Disparities in Health Care", "Guidance for a National Health Care Disparities Report", and "In the Nation's Compelling Interest: Ensuring Diversity in the Health Care Workforce", and served on the IOM Roundtable on Health Literacy. He was a member of the Massachusetts State Committee on Racial/Ethnic Disparities and served on the Boston Public Health Commission Committee on Racial/Ethnic Disparities. Dr. Betancourt currently co-chairs the Massachusetts General Hospital Committee on Racial/Ethnic Disparities and the Harvard Medical School Cross-Cultural Care Committee.

Dr. Betancourt has authored peer-reviewed articles on topics including racial/ethnic disparities in health and health care; public health; hypertension, diabetes, and cerebrovascular disease in minority communities; cross-cultural care and education; clinical decision making; ethics; workforce diversity; and the impact of language barriers on health care. Dr. Betancourt also teaches cross-cultural medicine, health disparities, and health policy to medical students and residents at MGH-Harvard Medical School and to students at the Harvard School of Public Health.

Dr. Betancourt received his Bachelor of Science from the University of Maryland, his medical degree from the UMDNJ – New Jersey Medical School, and completed his residency in Internal Medicine at the New York Hospital-Cornell Medical Center. Following residency, he completed The Commonwealth Fund-Harvard University Fellowship in Minority Health Policy, and received his Master's in Public Health from the Harvard School of Public Health.

The Wallace Conerly Health Policy Symposium 2009
Evaluative Briefing

This year's annual Wallace Conerly Health Policy Symposium is continued evidence of the Medical Center's commitment to maintaining its focus on eliminating health care disparities. Held on April 30th, 2009, the theme for this year's signature lecture was, ***“Improving Quality and Achieving Equity: Developing Solutions to Health Disparities”***. Nearly 200 physicians, students, clinicians and UMC community members filled the amphitheater in the School of Medicine to receive an instructive lecture presented by Dr. Joseph Betancourt. Dr. Betancourt serves as the director of the Disparities Solutions Center at Massachusetts General Hospital (Boston), in addition to holding several research and administrative positions such as senior scientist for the Institute for Health Policy, assistant professor of medicine at Harvard Medical School and program director of multicultural of education in the Multicultural Affairs office at Mass *General* (see page 4 for complete biography).

Dr. Betancourt's message specifically outlined the core elements on how providers must breakdown barriers and answer the call towards eliminating disparities in health care. Dr. Betancourt also introduced *Improving Quality and Achieving Equity: A Guide for Hospital Leaders*, a valuable tool which focuses on racial/ethnic disparities in healthcare and why equity is a vital component to quality. The University of Mississippi Medical Center is one of 10 hospitals interviewed and featured in this guide.

Dr. Dan Jones, vice chancellor for health affairs and dean of the medical school commended Dr. Betancourt on the excellent, yet informative lecture and also acknowledged Dr. Wallace Conerly, vice chancellor emeritus for health affairs and dean emeritus of the School of Medicine at the University of Mississippi Medical Center, who was also present. Dr. Jasmine Taylor, associate vice chancellor for multicultural affairs, was also applauded for co-coordinating this dynamic event. Up to .01 continuing education units were give to participating physicians, social workers, and nurses.

Continuing Education

Prior to the Dr. Betancourt's lecture, participants were asked to register whether they were seeking continuing education credit or not. While many did not register, it was estimated that at least 185 attended the morning lecture. A total of 153 registration forms were received by continuing education office. Among those included 61 dental students, 19 nursing students, and 14 medical students, which is half of the estimated total number of participants. Thirty-four (34) registrants received continuing education credit.

While the 2009 Wallace Conerly Health Policy Symposium received high overall evaluative ratings on organization, content and purpose; 85% of the respondents gave Dr. Betancourt a rating of "Excellent". The evaluation also included the following question *“As a result of this meeting is there anything you plan to change in your clinical practice?”* in which 73% answered "Yes". See complete results in *Appendix A* produced by the Department of Institutional Research for the Office of Continuing Education.

Meeting with University Hospitals and Health System Leadership

Following the lecture, Dr. Jasmine Taylor and Dr. Joseph Betancourt met with 15 employees, 11 from senior leadership, from the University Hospitals and Health System (UHHS). UHHS leaders were given the opportunity to illustrate proposed plans of action in which the hospital is taking towards the elimination of health disparities. Under the leadership of Mr. David Putt, interim chief operating officer of University Hospitals and Health System, the hospital administration is considering the formulation of two very important groups. The first is the *Health Disparities Council*. Its mission is to identify key areas where racial and ethnic disparities may exist at UHHS and to develop solutions to eliminate disparities at UHHS. The second group is the *Multicultural Advisory Committee*. Its primary purpose is to advise the UHHS on minority patient's experience of care and the perception of the hospital in various minority communities. The group will also provide guidance and feedback on UHHS disparities efforts and initiatives. It will be made up of community leaders, patients and family members of minority communities, chaired by hospital leadership. Ms. Mary Mixon, assistant administrator for University Hospitals and Health System will serve as the chairwoman for both groups.

Highlights from Afternoon Focus Groups

A unique feature of the symposium were five, multi-site focus groups which were conducted during the noon hour across the University of Mississippi Medical Center (UMC) campus. Each focus group focused on disparities from a variety of aspects such as socioeconomic factors, access care issues, chronic disease and oral health disparities. The goal of each was to encourage dialogue among participants and speak to the pros and cons of the subject matter. The goal was to reach a minimum of at least 250 to participate in these sessions (at least 50 per focus group). This goal was exceeded, as nearly 270 individuals participated overall. At the close of each focus group, participants were asked to complete satisfaction surveys following each session. Approximately, 53% of the estimated number of total participants returned the evaluations (n=138). Overall, this segment of the symposium was a remarkable success. See *Appendix B* for complete results from evaluations for each focus group.

Focus Group #1

This focus group was facilitated by Dr. Mario Sims, assistant professor in the School of Medicine, and was held at the Jackson Medical Mall community meeting room. Dr. Judith Gearhart, professor of family medicine, opened the session and introduced the facilitator. Participants watched a 20-minute video from the 7-part series "*Unnatural Causes...is inequality making us sick*" produced by California Newsreel. In particular, participants viewed an episode focusing poor social conditions and its affect on population health and health policy. After watching the video, the participants stated that there was no "shock value"; meaning that most were not surprised by the content of the video. The discussion was very intense in which participants had very strong views on how government, politicians and local leaders need to be held more accountable and community members need to also take a stand. "*Mobilize the people and force the officials to show us where the money is going and refine their efforts. We should focus more on health care than towards the business sector. We should focus on education.*",

was a comment from one participant and strongly agreed upon by the observance of several head nods. Community action and grassroots efforts were also common themes discussed to aid in the eradication of impoverished communities; a common cause of severe health risks. One participant stated, “*We need more people to come into the streets. Stop talking and do action.*”

There were a total of 23 participants for this session. Nineteen completed evaluations. Overall, 89.5% agreed or strongly agreed that the content was relevant (n=17). Nearly 85% agreed or strongly agreed that the session improved their general understanding of the topic.

Focus Group #2

“*Understanding the Impact of Health Disparities*” was the title of this focus group and was led by Dr. Warren Jones who serves as the executive director for the Mississippi Institute for Improvement of Geographic and Minority Health. Held in a lecture room within the School of Health Related Professions, 50 participants gained insight on improving access to health care and were actively engaged in an experiential exercise by identifying potential solutions to current problems in health care. Participants were broken to smaller discussion groups and identified various recurring problems in health care such as: 1) *the utilization of the emergency room for primary care services*; 2) *obesity*; 3) *communication/language barriers*; and 4) *lack of integrative services between health care providers*. A diversity of ideas was discussed in which education and preventative health measures were the most common solutions to these problems.

Among the participants, only 68% completed evaluations (n=34). Among the results, 94.2% agreed or strongly agreed that the content discussed in the session was relevant; 88.2% agreed or strongly agreed that the session improved their understanding of the topic; 88.3% agreed or strongly agreed that they are likely to participate in similar sessions related to health disparities; and 85.3% indicated that the information from the session will impact their approach to healthcare delivery.

Focus Group #3

Dr. Herman Taylor, principal investigator for the Jackson Heart Study, captured the attention of an audience filled with a majority of medical students. Dr. Taylor’s research was conveyed during the session titled “*Understanding Health Disparities and Cardiovascular Disease: The Role of the Jackson Heart Study*” and held in the School of Medicine’s amphitheater. After being introduced by Dr. Lou Ann Woodward, associate dean of the School of Medicine, Dr. Taylor began by explaining that although there has been a decline in cardiovascular disease since the mid-sixties; there are still major disparities between whites and blacks including geographic disparities (those residing in southern states). Taylor continued by providing comparative data from the Framingham Study to the Jackson Heart Study which has identified a much higher prevalence of risk factors for cardiovascular disease in the black population vs. the white population. Participants viewed the short informational designed for physicians titled “*Paying Attention to Preventing Cardiovascular Disease Among Racial and Ethnic Minorities*” which is

one of five short film's from the *Educating Physicians on Controversies and Challenges in Health* series, produced by the American Medical Association.

Although only 18 of the 42 participants completed evaluations, the session received excellent reviews. Almost 95% agreed or strongly agreed that the content discussed in the session was relevant and that Dr. Taylor was knowledgeable about the topic. Eighty-three percent (83%) agreed or strongly agreed that the information presented would impact their approach to health care delivery and that they are likely to participate in similar sessions related to health disparities. Nearly 90% agreed or strongly agreed that the session improved their understanding of the topic.

Focus Group #4

Oral health disparities among racial and ethnic populations have been linked to limited access to dental care and dental coverage. Dr. Suezan McCormick, assistant professor in the School of Dentistry, had the pleasure of introducing facilitators Dr. Denise Krause, an associate professor in the School of Dentistry at UMC and Dr. Jasmin Chapman, director of Jackson Hinds Comprehensive Health Center. Jointly, they cultured the group towards a better understanding on how oral health is integral to overall health throughout one's life and how socioeconomic conditions are directly linked to the disparity. Dr. Krause expounded on regional and statewide statistics pertaining to oral health disparities. "*Public health data for untreated tooth decay in 3rd grade students shows that MS is among the highest percentage in the entire nation*", she explained. "*Urban areas are slightly different than the state average and in Jackson there appears to be more opportunities to visit dentist than in other parts of the states.*" Dr. Krause proceeded to show a clip from a documentary produced by ABC titled "*A Hidden America: Children of the Mountains*" which focused on how becoming toothless in Central Appalachia is not uncommon and that 1 out of 10 residents are completely without teeth and children under the age of 2 are stricken with severe cavities due to poor oral hygiene (also a common problem in Mississippi). Dr. Jasmin Chapman also shared valuable statistics and challenging patient encounters with the group. "*I had a mother with 3 small children under 6 who thought that her children's tooth problems were inherited but she was putting Kool-Aid into all of their bottles. Health literacy is causing that problem.*", explained Chapman.

This highly engaged session warranted in-depth discussions from participants who were mainly students and residents from the School of Dentistry at UMC. One comment made was "*A definite lack of education – I have a patient with advanced periodontal disease who didn't know how to appropriately brush his teeth. We educated him and it felt amazing to see the difference it made after he was educated as to the appropriate oral hygiene.*" Another stated that "*A lot of people come [to UMC] thinking it's free; and if they need a lot of work done, it's hard to turn them away because they can't pay.*" Dr. Chapman reiterated that as a result of poor oral health practices and disparities, psychosocial determinants manifest such as low self-esteem causing missed time from work and/or school. Participants agreed that community involvement is important and that better communication is needed between oral health practitioners, medical doctors, nurses and pharmacists regarding oral health education such as hygiene, prescriptions, nutrition, etc.

There were approximately 116 participants in this session and among them 37% completed evaluations (n=43). Eighty-one percent (81%) agreed or strongly agreed that the content shared in this session was relevant. Over 50% of the participants agreed or strongly agreed that the session improved their understanding, will impact their approach to health care delivery, and are likely to participate in similar sessions related to health disparities.

Focus Group #5

The final focus group, “*Disparate Treatment: Dealing with Patient Mistrust and Uncertainty*”, led by Dr. Shirley Schlessinger, associate dean for Graduate Medical Education and Dr. Jasmine Taylor, associate vice chancellor for Multicultural Affairs, was held in the School of Nursing. Approximately 32 participants, discussed issues from the short video *Worlds Apart*, produced by Fanlight Productions, which captured the story of a young African-American man with end-stage renal disease. Stereotyping and psychological issues were key components of the dialogue including solutions to defeating challenges associated with patient mistrust. Dr. Schlessinger and Dr. Taylor provided important facts about barriers to transplantation such as socioeconomic conditions, issues of allocation or “organ matching”, and co-existing health problems such as diabetes or cardiovascular disease. Solutions were also provided by the facilitators on how providers can combat disparities and offer more effective physician practices such as: *1) reviewing the patient’s cultural history and personal experiences; 2) avoid stereotyping; 3) and taking into consideration the patient’s limitations on health literacy.* The focus group was broken into 4 smaller discussion groups. Each group was asked to answer questions pertaining to the subject matter and report out to the entire group. Overall, effective communication between the patient and provider as a solution to eliminating the stereotype threat was the underlying consensus of this focus group.

While 75% of the participants (n=24) completed the evaluation, results were very favorable. The focus group received positive ratings in which over 95% of the participants agreed or strongly agreed that the content was relevant; they gained an improved understanding of the topic; the instructors were knowledgeable; likelihood of participating in similar sessions related to health disparities; and that the information gained will impact their approach to health care delivery.



APPENDIX A

Evaluation results prepared for Ann Gordon, UMMC Division of Continuing Health Professional Education, by Jamil Ibrahim, Ph.D., Department of Institutional Research (May 7, 2009).

The Wallace Conerly Health Policy Symposium 2009 April 30, 2009 Course Number: ME09191

Professional Category

Choice	Count	Percent
Dentist	23	24%
Nurse Practitioner	1	1%
Physical Therapist	2	2%
Physician	16	17%
RN	19	20%
Social Worker	1	1%
Other	22	23%
OMIT	11	12%

Employment /Practice Setting

Choice	Count	Percent
A Hospital	11	12%
B Physician Clinic	2	2%
C Dental Clinic	1	1%
F Medical School	11	12%
G Nursing School	16	17%
H Dental School	40	42%
I Health Related School	2	2%
U Omit	8	8%
V Muti-MARKED	4	4%

State of Employment

Choice	Count	Percent
1 Mississippi	77	81%
2 Other State	2	2%
3 OMIT	16	17%

GENERAL

1. Was this meeting well organized?

Choice	Count	Percent
1 Very Much	82	87%
2 Moderate	12	13%
3 Minimal	0	0%
4 Not at All	0	0%
5 Not Applicable	0	

2. To what degree did this meeting enhance your current knowledge?

Choice	Count	Percent
1 Very Much	65	69%
2 Moderate	24	26%
3 Minimal	5	5%
4 Not at All	0	0%
5 Not Applicable	0	

3. To what degree will you use knowledge from this meeting in your clinical practice?

Choice	Count	Percent
1 Very Much	61	71%
2 Moderate	22	26%
3 Minimal	3	3%
4 Not at All	0	0%
5 Not Applicable	0	

4. Did the content correspond to the specific objectives?

Choice	Count	Percent
1 Very Much	81	89%
2 Moderate	10	11%
3 Minimal	0	0%
4 Not at All	0	0%
5 Not Applicable	0	

5. Were the teaching methods and aids used effectively?

Choice	Count	Percent
1 Very Much	70	77%
2 Moderate	20	22%
3 Minimal	1	1%
4 Not at All	0	0%
5 Not Applicable	0	

6. Were discussion periods sufficient for adequate exchange of information?

Choice	Count	Percent
1 Very Much	55	66%
2 Moderate	20	24%
3 Minimal	6	7%
4 Not at All	2	2%
5 Not Applicable	7	

7. Were the physical facilities adequate and conducive to learning?

Choice	Count	Percent
1 Very Much	81	85%
2 Moderate	13	14%
3 Minimal	1	1%
4 Not at All	0	0%
5 Not Applicable	0	

8. Rate how the content related to the general purpose:

Choice	Count	Percent
1 Excellent	73	78%
2 Good	21	22%
3 Adequate	0	0%
4 Inadequate	0	

9. Did you detect commercial bias by any speaker:

Choice	Count	Percent
1 Yes	1	1%
2 No	94	99%

10. Considering the content covered, the length of this meeting was:

Choice	Count	Percent
1 Too Long	6	6%
2 About Right	80	84%
3 Too Short	9	9%

11. What overall rating would you give the speakers?

Choice	Count	Percent
1 Excellent	81	85%
2 Good	13	14%
3 Adequate	1	1%
4 Inadequate	0	0%

12. What overall rating would you give the entire meeting?

Choice	Count	Percent
1 Excellent	63	66%
2 Good	31	33%
3 Adequate	1	1%
4 Inadequate	0	0%

13. As a result of attending this meeting is there anything you plan to change in your clinical practice?

Choice	Count	Percent
1 Yes	61	73%
2 No	22	27%

SPEAKER(S): Joseph R. Betancourt, M.D., M.P.H.
 “Improving Quality and Achieving Equity: Developing Solutions to Health Disparities”

Choice	Count	Percent
1 Very Much	91	96%
2 Moderate	4	4%
3 Minimal	0	0%
4 Not at All	0	0%

Objective 1. Present evidence of racial/ethnic disparities in health care.

Choice	Count	Percent
1 Very Much	82	86%
2 Moderate	13	14%
3 Minimal	0	0%
4 Not at All	0	0%

Objective 2. Describe the link between quality of care and equity.

Choice	Count	Percent
1 Very Much	79	83%
2 Moderate	14	15%
3 Minimal	2	2%
4 Not at All	0	0%

Objective 3. Review several strategies and solutions to address disparities as seen in the field.

Choice	Count	Percent
1 Very Much	78	83%
2 Moderate	15	16%
3 Minimal	1	1%
4 Not at All	0	0%

APPENDIX B

The following tables outline responses from the evaluation surveys returned by focus group participants (*broken down by sessions*).

Table 1 - Survey Results from Focus Group #1 “Unnatural Causes...is inequality making us sick”, Dr. Mario Sims

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Response Count
1. The content discussed in this session is relevant.	5.3%(1)	10.0%(0)	5.3%(1)	5.3%(1)	84.2%(16)	19
2. The session improved my understanding of the topic.	5.3%(1)	5.3%(1)	5.3%(1)	26.3%(5)	57.9%(11)	19
3. The instructor was knowledgeable about the topic.	5.3%(1)	0.0%(0)	5.3%(1)	21.1%(4)	68.4%(13)	19
4. I am likely to participate in similar sessions related to health disparities.	5.3%(1)	0.0%(0)	5.3%(1)	10.5%(2)	78.9%(15)	19
5. This information will impact my approach to health care delivery.	0.0%(0)	10.5%(2)	10.5% (2)	21.1%(4)	57.9%(11)	19
						19

Additional Comments:

- *Excellent session.*
- *As a public health professional, I found this session very informative.*
- *Quite intriguing. Enough to go make me go on-line for other units of this PBS program. Maybe there will be insights onto how we can help in our own neighborhoods and working environments.*

Table 2 - Survey Results from Focus Group #2: “Understanding the Impact of Health Disparities”, Dr. Warren Jones

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Response Count
1. The content discussed in this session is relevant.	5.9%(2)	0.0%(0)	0.0%(0)	11.8%(4)	82.4%(28)	34
2. The session improved my understanding of the topic.	5.9%(2)	0.0%(0)	5.9%(2)	35.3%(12)	52.9%(18)	34
3. The instructor was knowledgeable about the topic.	5.9%(2)	0.0%(0)	0.0%(0)	2.9%(1)	91.2%(31)	34
4. I am likely to participate in similar sessions related to health disparities.	5.9%(2)	0.0%(0)	5.9%(2)	26.5%(9)	61.8%(21)	34
5. This information will impact my approach to health care delivery.	5.9%(2)	0.0%(0)	8.8% (3)	26.5%(9)	58.8%(20)	34
						34

Additional Comments:

- *The session was excellent. The interactive segment allowed us to engage in conversation about the subject matter and come up with possible solutions. Excellent participation.*
- *Excellent and the hands-on presentation was great!*
- *Well done-very informative.*

Table 3 - Survey Results from Focus Group #3: “Understanding Health Disparities and Cardiovascular Disease: The Role of the Jackson Heart Study”, Dr. Herman Taylor

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Response Count
1. The content discussed in this session is relevant.	5.9%(2)	0.0%(0)	0.0%(0)	11.8%(4)	82.4%(28)	34
2. The session improved my understanding of the topic.	5.9%(2)	0.0%(0)	5.9%(2)	35.3%(12)	52.9%(18)	34
3. The instructor was knowledgeable about the topic.	5.9%(2)	0.0%(0)	0.0%(0)	2.9%(1)	91.2%(31)	34
4. I am likely to participate in similar sessions related to health disparities.	5.9%(2)	0.0%(0)	5.9%(2)	26.5%(9)	61.8%(21)	34
5. This information will impact my approach to health care delivery.	5.9%(2)	0.0%(0)	8.8%(3)	26.5%(9)	58.8%(20)	34
						34

Additional Comments:

- *Dr. Taylor was very informative in the discussion for today's topic. These type of studies and discussions are very much needed in today's society. We pray everyone takes heed after today.*
- *Great!*
- *Interesting talk, but I wonder if there are still disparities in heart disease among whites and blacks who both: 1) Eat a healthy diet and 2) Exercise regularly.*

Table 4 - Survey Results from Focus Group #4: “Health Disparities in Oral Health and Dental Care”, Dr. Denise Krause and Dr. Jasmin Chapman

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Response Count
1. The content discussed in this session is relevant.	4.7%(2)	0.0%(0)	14.0%(6)	27.9%(12)	53.5%(23)	43
2. The session improved my understanding of the topic.	9.3%(4)	7.0%(3)	25.6%(11)	25.6%(11)	32.6%(14)	43
3. The instructor was knowledgeable about the topic.	7.1%(3)	0.0%(0)	16.7%(7)	26.2%(11)	50.0%(21)	42
4. I am likely to participate in similar sessions related to health disparities.	9.3%(4)	14.0%(6)	16.3%(7)	32.6%(14)	27.9%(12)	43
5. This information will impact my approach to health care delivery.	7.0%(3)	4.7%(2)	25.6%(11)	37.2%(9)	25.6%(20)	43
						43

Additional Comments:

- *Great!*

Table 5 - Survey Results from Focus Group #5: “Disparate Treatment: Dealing with Patient Mistrust and Uncertainty”, Dr. Shirley Schlessinger and Dr. Jasmine Taylor

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Response Count
1. The content discussed in this session is relevant.	4.2%(1)	0.0%(0)	0.0%(0)	20.8%(5)	75.0%(18)	24
2. The session improved my understanding of the topic.	4.2%(1)	0.0%(0)	0.0%(0)	37.5%(9)	58.3%(14)	24
3. The instructor was knowledgeable about the topic.	4.2%(1)	0.0%(0)	0.0%(0)	4.2%(1)	91.7%(22)	24
4. I am likely to participate in similar sessions related to health disparities.	4.2%(1)	0.0%(0)	0.0%(0)	33.3%(8)	62.5%(15)	24
5. This information will impact my approach to health care delivery.	4.2%(1)	0.0%(0)	4.2%(1)	33.3%(8)	58.3%(14)	24
						24

Additional Comments:

- *Need more than an hour.*
- *Loved it. I would definitely come to more of them.*
- *Excellent program.*

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2009 Planning Committee

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Vice Chancellor of Health Affairs and
Dean of the School of Medicine

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2009 Partners

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Minority Health

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University of Mississippi School of Medicine
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You may also contact us at our office at (601)984-1340.



DR. WALLACE CONERLY

A native of Tylertown, Dr. Conerly is vice chancellor emeritus for health affairs and dean emeritus of the School of Medicine at the University of Mississippi Medical Center in Jackson.

He received the B.S. with honors from Millsaps College and the M.D. from Tulane University. Dr. Conerly also received special training while in the U.S. Air Force's School of Aerospace Medicine, and later became director of the Aerospace Medicine Division.

Dr. Conerly came to the Medical Center in 1971 as a resident in medicine. He became the Mississippi Lung Association's Fellow in Pulmonary Disease in 1972 and was appointed to the faculty in 1973. He served for 13 years as assistant vice chancellor before becoming vice chancellor in 1994, a position he held until he retired on June 30, 2003.

Dr. Conerly was the chief architect of the largest expansion program in the history of higher education in Mississippi. The \$335 million building program included a children's hospital, a comprehensive women's hospital, a critical care hospital, a School of Nursing addition, a School of Health Related Professions building, a 256-bed adult hospital and classroom addition, all completed since 1997.

Dr. Conerly created a campus-wide Office of Research in 1998. Since then, grants and contracts awarded to Medical Center investigators have more than doubled. Working to create a more diverse environment, he expanded the institution's efforts to recruit and retain minority students. He secured funding for 12 full, four-year scholarships, \$26,369 annually, for African-American students in the School of Medicine. Dr. Conerly also sought to increase the number of minority employees on the health sciences campus, resulting in the Medical Center being recognized in 2001 as a "National Role Model Institution" by Minority Access, Inc. Dr. Conerly worked with Dr. Aaron Shirley, Reuben Anderson, and others to create the Jackson Medical Mall, now recognized nationally as a model for affordable health care and economic revitalization. Dr. Conerly has participated in many medical organizations and received numerous medical honors over the years. Most recently, in 2002, the U.S. Secretary of Health and Human Services appointed him to the Board of Regents of the National Library of Medicine, making Dr. Conerly the first Mississippian to serve on this prestigious body. The Tulane School of Medicine honored him with its Alumnus of the Year Award in 2005.