In This Issue

Featured Stories
2

Cancer Health Disparities
3

Child Health Equity
4

Health of Minority Males
5

HIV/AIDS Research, Education, & Advocacy
6

Research Training
7

Funding Opportunities
7

Upcoming Conferences
8

Evers-Williams Institute Celebrates First Year Anniversary

The Myrlie Evers-Williams Institute has laid the foundation for improving health outcomes for racial/ethnic minority populations in Mississippi through education, research, research training, and community-based programs and services. Addressing the social determinants of health is the mechanism through which we partner to reduce health disparities. Some of our accomplishments over the past year include the establishment of the: RICE BOWL, Marian Wright Edelman Lectureship, Affiliates Program, National Advisory Board and C-HMM Advisory Board, Monthly Health Disparities Journal Club, K-Writer’s Program, NHLBI R25 Research Training and Education grant, and Rural Health Champion Award. Thank you to our many partners and contributors for your support.

Dr. Robert Smith Honored at Symposium on Race and Medicine

Dr. Robert Smith (center), a physician leader during the civil rights movement of the 1960s, was honored at the second Robert Q. Marston Symposium on Race and Medicine. The symposium will henceforth be named for Smith as well as Marston, who served as UMMC vice chancellor from 1961 to 1966. Presenting the award to Smith were Dr. Bettina Beech, Associate Vice Chancellor for Population Health, and Dr. Richard deShazo, Billy S. Guyton Distinguished Professor of Medicine and Pediatrics and the Marston-Smith symposium director.


Remembering Medgar Evers
July 2, 1925—June 12, 1963

You can kill a man, but you can’t kill an idea. ~ Medgar Evers
Health Disparities Among Black Male Ex-Offenders

Mississippi has one of the largest populations of incarcerated black males and even more ex-offenders who are released and return to the community with limited to no access to health care. Despite the myths that the Department of Corrections provides for re-entry expenses and assistance, ex-offenders do not receive substantial financial support or other resources upon release. This contributes to a decrease in the “continuity of care” for ex-offenders once released from prison and affects their ability to identify or qualify for services to obtain adequate healthcare. As social workers, we see many situations in which ex-offenders are not always provided with adequate health care solutions upon release from prison. Consequently, these individuals often utilize emergency room services as a substitute for non-emergency care.

Unfortunately, because black males represent the largest percentage of incarcerated individuals, upon release they make up a large portion of the population who do not access adequate primary healthcare. As a result, many ex-offenders, particularly black males, do not know the resources that are available, thus many of them avoid healthcare altogether. Subsequently, they do not receive routine blood pressure monitoring, prostate exams, eye exams, and general wellness care. This exaggerates an already strained system of limited healthcare provisions. As social workers and other providers, it is important for us to recognize the barriers presented with this subculture and develop “non-judgmental” approaches to providing healthcare for ex-offenders.

Read More

MSDH Examines Health and Inequalities in First Annual Report

The Mississippi State Department of Health recent publication, State of the State: Health Disparities and Inequalities Report, provides a descriptive analysis of various health outcomes and risk factors Mississippians face. According to the report, the social determinants of health are pivotal to an individual and community’s well-being and impact well-being just as much, if not more, as genetic inheritance. Preventable and avoidable determinants cause some populations to suffer worse health outcomes than others. Differences in social determinants between populations can lead to a burden of illness, disability, and premature death that is often avoidable. Disparities in income, education, and housing are some of the factors that cause individuals to experience greater obstacles to healthcare. Read More


Access to Food Is an Issue for Older Mississippians

Eating a bowl of cereal for dinner can demonstrate the many factors that contribute to food insecurity for older Americans. "Sometimes, an older person chooses a bowl of cereal for dinner because it's quick, easy, inexpensive, available and fairly healthy," said Sylvia Byrd, a professor at Mississippi State University. "Convenience, cost, ease of use and access are all major factors that influence food security." Physical and lifestyle changes also can play a role, said Byrd, professor in the College of Agriculture and Life Sciences Department of Food Science, Nutrition and Health Promotion and researcher in the Mississippi Agricultural and Forestry Experiment Station. "Physical changes like a person's level of mobility can be a barrier to obtaining proper nutrition." Read More

Cancer Health Disparities

It is far more effective to prevent colorectal cancers through screening than to cure established metastatic colorectal cancers with chemotherapy. With the support of a Patient-Centered Outcomes Research Institute (PCORI) Eugene Washington Community Engagement Award, four organizations are working together to establish a community-based dialogue to increase colorectal screening rates in the Mississippi Delta. Mississippi has the highest colorectal cancer death rate in the nation, and within the state, Public Health District 3 has the highest colorectal cancer death rate but few preventive resources, such as gastroenterologists or specialized gastroenterology clinics. According to project lead Dr. Roy J. Duhe, Mississippi’s colorectal cancer burden is characterized by significant population-based disparities. Black Mississippians are less likely to have been screened for colorectal cancers than White Mississippians, which is a major reason why these two populations have such dramatically different colorectal cancer mortality rates. Duhe, along with Ms. Latania Dodd, Dr. Sonja Fuqua, and Dr. Alfio Rausa, comprise the working team representing the four organizations (UMMC, Fannie Lou Hamer Cancer Foundation, Mississippi Primary Health Care Association and Mississippi State Department of Health, respectively) involved in this project. Key community stakeholders and local primary health care providers in Greenville, Greenwood and Cleveland will learn about participatory comparative effectiveness research through a series of community engagement meetings. These meetings will provide a forum to interact with individuals who have used evidence-based interventions to increase colorectal cancer screenings in comparable communities around the nation. By bringing the community together to focus on this highly-preventable cancer, this project will determine the community’s preferences and priorities for evidence-based interventions to increase colorectal cancer screening rates in the Mississippi Delta.

USM, Fannie Lou Hamer Cancer Foundation Receive PCORI Funding

The University of Southern Mississippi, in collaboration with the Fannie Lou Hamer Cancer Foundation (FLHCF), has been awarded an Engagement grant by the Patient-Centered Outcomes Research Institute (PCORI). The project, "Building on a culturally-sensitive network for patient-centered outcomes/comparative effectiveness dissemination," will be co-directed by Freddie White-Johnson, founder and executive director of the FLHCF and program director of the Mississippi Network for Cancer Control and Prevention, and Dr. Carol Connell, professor of nutrition and food systems in the USM College of Health. This engagement project will focus on developing approaches by which residents of the Mississippi Delta can contribute to participation in and dissemination of patient-centered outcomes research in ways that build on cultural strengths. The project builds on work of the Mississippi Network for Cancer Control and Prevention to discover how patient-centered outcomes research is received by stakeholders through the Network and other means, how Network community health advisors disseminate patient-centered outcomes research, and how research capacity-building activities with Delta stakeholder groups strengthen their capacity for engagement in such research. “We are very pleased to establish a formal working relationship with PCORI,” said Freddie White-Johnson.

The Patient-Centered Outcomes Research Institute is a non-profit, non-governmental organization established by the Affordable Care Act of 2010, whose mandate is “to improve the quality and relevance of evidence available to patients, caregivers, clinicians, employers, insurers, and policymakers make informed health decisions.” White-Johnson continued, “This project will allow us to explore some of the unique strengths and challenges found in the Delta associated with disseminating and implementing research that improves patient outcomes.” White-Johnson hosted a visit of PCORI staff to the Mississippi Network for Cancer Control and Prevention in Greenwood in August, 2014, and was invited to speak to PCORI staff at their Washington, D.C. offices in December, 2014.
Health Care Reform as a Vehicle for Promoting Children’s Mental and Behavioral Health

Most mental health conditions emerge in childhood and adolescence (Kessler and Wang, 2008; IOM, 2009), and many develop in the context of the same risk factors as physical disease (Mistry et al., 2012; Shonkoff et al., 2009). Similarly, many behavioral health patterns that result in health conditions and health care expenditures in adulthood emerge early (Center on the Developing Child at Harvard University, 2010; Halfon et al., 2014; Shonkoff et al., 2009). Targeted public investment in children’s mental and behavioral health can result in savings in the areas of education, special education, juvenile justice, child welfare, and health care, as well as enhanced educational attainment, work productivity, and health into adulthood. READ MORE


Obesity Disparity Grew Among U.S. Kindergarteners

Obesity rates among children entering kindergarten in the U.S. have increased since 1998 - except among those from the wealthiest families, according to new research. The findings, published in JAMA Pediatrics, add to evidence that suggests not all young people are benefiting from a leveling out of obesity rates as reported last year by the U.S. Centers for Disease Control and Prevention. Data was analyzed from nearly 17,000 children entering kindergarten in 1998 and compared them to over 15,500 children who entered kindergarten in 2010. There was no difference in obesity rates between boys and girls. There was a difference, however, when the researchers grouped the children into five different levels based on family wealth. READ MORE


Does Summertime Weight Gain Undermine Youth Obesity Prevention Efforts?

For many children, summer vacation is a three-month hiatus from the daily responsibilities and scheduled demands they experience during the nine-month school year. Yet the freedoms many adults may remember from their childhood summers—riding bikes to the corner store, walking to the local swimming hole, playing active games with neighborhood friends every day—have become less common among today’s youth. Many parents are becoming increasingly concerned about neighborhood safety, and limiting children’s outdoor play. Only recently has it been suggested that the change in summer freedoms may have a potentially negative impact on children’s physical activity levels, and that this shift may be contributing to a larger problem of disproportionate summertime weight gain among children. READ MORE


Advancing the Care of Children and Adolescents with Severe Obesity

Childhood obesity affects 17% of children in the U.S., almost a third of whom have severe obesity. Unfortunately, children with severe obesity respond poorly to current conventional lifestyle interventions, the treatment option most commonly available to them. As a result, weight loss surgery is being relied on more frequently as a treatment. Although surgery can be an effective treatment, it is not without significant risk of morbidity. The procedure may not be desired by the family or the child or may be an inappropriate treatment option because of the child’s young age, lack of pubertal or emotional maturity, or cognitive impairments. In addition, bariatric surgery is not accessible to most families due to the limited number of adolescent programs. READ MORE

From the Director’s Desk: Dr. Marino A. Bruce

June is a month in which we celebrate fathers. Male parents play an important role in family life as they can teach their sons about the expectations, responsibilities and challenges of manhood. A father also plays a prominent role in their daughters’ life as they can model how women should be treated during dating and marriage. These are two among many important roles fathers play in families and their communities. One challenge for underserved and under-resourced households and neighborhoods is that fathers are not available for health reasons. African American men, for example, are more likely than other men to have an early onset of disease and to experience complications, disability, and premature death. These trends can be changed for the better in part when individuals make an effort to get routine medical exams, eat healthier meals and snacks, and increase regular physical activity. The gift of health is one that is precious because it has implications that can transcend time and space. So on this Father’s Day, let us encourage all the fathers we know to take steps to maintain good health or strive for better health. The gift of fathers who can be present to engage and invest in the lives of their loved ones will enrich families and communities across this nation and the world.

Executive Advisory Board Members of the Month

June is Men’s Health Month and we wanted to highlight two executive board members who are influencing the discourse about the health of minority men through their research.

Dr. Derek M. Griffith is the Director of the Institute for Research on Men’s Health and an Associate Professor of Medicine, Health and Society; General Internal Medicine and Public Health; Health Policy; and Sociology at Vanderbilt University. Dr. Griffith is a social scientist who seeks to identify and address psychosocial, cultural and environmental determinants of African American (AA) men’s health and well-being. Funded by several institutes within the National Institutes of Health and foundations such as the American Cancer Society and the W.K. Kellogg Foundation, Dr. Griffith specializes in informing, developing and testing interventions to improve AA men’s lifestyle behaviors and chronic disease risk, especially those reducing obesity and increasing healthy eating, physical activity and screening. His research has been featured in such news outlets as MSN, NPR, Time Magazine, US News & World Report and USA Today.

Recent articles by Dr. Griffith include:


Dr. Roland J. Thorpe, Jr. is an Assistant Professor in the Department of Health, Behavior, and Society at the Johns Hopkins Bloomberg School of Public Health, and Director of the Program for Research on Men’s Health, Project Director, and the Research Education and Training Core Director in the Hopkins Center for Health Disparities Solutions. He is a social epidemiologist and gerontologist whose research focuses on the influence of social determinants of health in understanding the etiology of race-related disparities in functional and health status of community-dwelling adults across the life course with a focus on men. Dr. Thorpe’s work appears in leading journals such as Social Science and Medicine, Journals of Gerontology Medical Sciences, American Journal of Men’s Health, and International Journal of Men’s Health.

Recent articles by Dr. Thorpe include:


Study Suggests Health and Social Inequities May Drive HIV Infection in Young Men Who Have Sex with Men

HIV infections continue to rise in a new generation of young, gay, bisexual and other men who have sex with men (YMSM) despite three decades of HIV prevention as well as recent availability of biomedical technologies to prevent infection. Given this heightened risk for HIV seroconversion among YMSM, researchers at New York University’s Center for Health, Identity, Behavior & Prevention Studies sought to identify the factors associated with incident HIV infection among a cohort of racially/ethnically and socioeconomically diverse YMSM. Study findings show that socioeconomic status (SES) is key driver of HIV seroconversion; individuals who reported a lower perceived SES were more likely to seroconvert over the course of the study period. READ MORE


Inter-connecting Health Problems Increase HIV Risk for MSM

Intertwining health problems are associated with higher viral load and poorer adherence in HIV-positive men who have sex with men (MSM) taking antiretroviral treatment (ART), according to a report in the online edition of AIDS. “Higher HIV viral load and lower ART adherence are, respectively, associated with increased syndemics count,” explain the authors. “These findings indicate that combinations of depression symptoms, polysubstance use and sexual risk behavior function as profound barriers to fully reaping the benefits of successful HIV care and that, as these conditions snowball, their impact on HIV outcomes is exacerbated.” These findings have important implications for current treatment as prevention strategies to control the HIV epidemic, as every increase in the number of epidemics was associated with higher viral load. READ MORE


Influences of Social Determinants of Health on African Americans

Social determinants of health (SDH) influence health outcomes and contribute to health disparities in diverse populations. A meta-synthesis was conducted to provide perspectives of the experiences of African Americans living with HIV in the rural southeastern U.S. Analysis of qualitative literature revealed patterns among SDH as upstream factors contributing to health care barriers, poor health outcomes, decreased quality of life, and health disparities. The purpose of this meta-synthesis was the illumination and synthesis of themes describing characteristics of social determinants of health. READ MORE


NATIONAL HIV TESTING DAY
June 27, 2015
“Take the Test, Take Control”
Visit hivtest.cdc.gov for testing sites.

Swipe Left or Right? Some Experts Blame Dating Apps for a Rise in STDs

Diagnoses of sexually transmitted diseases including HIV and syphilis are on the rise among certain groups, with experts attributing the uptick to growing complacency about sexually risky behavior. Public health officials in Rhode Island stated an increase in STDs in the state from 2013 to 2014 was attributable at least in part to the use of social media and dating apps to arrange casual or anonymous hookups. People having sex without a condom, having multiple sex partners, and having sex while under the influence of drugs or alcohol were also to blame. New HIV diagnoses among gay and bisexual men between the ages of 13-24 increased by 132.5 percent between 2001 and 2011, according to data from the CDC. READ MORE

### Summer Reading Initiative

The Evers-Williams Institute Summer Reading Initiative is designed to engage the community in dialogue by creating a common ground for discussion through reading. Each month, internal and external community members of the University of Mississippi Medical Center are invited to read the selected book and participate in a facilitated discussion. In celebration of the Evers-Williams Institute's first anniversary, the book of the month for July is *Watch Me Fly: What I Learned on Becoming the Woman I Was Meant to Be* by Dr. Myrlie Evers-Williams. The book discussion, facilitated by Annie Baker, will take place July 16, 2015 from 5:30-6:30 p.m. in the Evers-Williams Institute located in the Jackson Medical Mall. Please contact Annie Baker at abaker@umc.edu or 601-815-9005 to participate or for more details.

### Research Training

#### Community Research Fellows Training

The Mississippi Department of Health Office of Health Disparity Elimination will offer a free 16-week research training program for community members interested in improving minority health, public health research, or reducing health disparities. The purpose of the Community Research Fellows Training is to promote the role of racial/ethnic and other underserved populations in the research enterprise by increasing the capacity for community based participatory research between academia researchers, public health workers, community based organizations, and community health workers serving Mississippi. [READ MORE]

### Funding Opportunities

#### Healthy Eating Research: Building Evidence to Prevent Childhood Obesity

**Total Awards:** Approximately $2.75 million will be awarded.  
**Deadline for receipt of concept papers:** July 1, 2015

As a national program of the Robert Wood Johnson Foundation, this program supports research on environmental and policy strategies with strong potential to promote healthy eating among children to prevent childhood obesity, especially among groups at highest risk for obesity and children who live in lower-income communities (urban, suburban, and/or rural). The call for proposals (CFP) is for two types of awards: Round 9 grants and RWJF New Connections grants awarded through the Healthy Eating Research program. [READ MORE]

#### Methodologies to Enhance Understanding of HIV-Associated Social Determinants

**Letter of Intent Due Date:** July 19, 2015  
**Application Due Date:** August 19, 2015  
**Funds Available and Anticipated Number of Awards:**  
An estimated total of $2Million in FY16 to fund 3-4 awards

There is mounting evidence that social and economic factors are associated with rates of HIV transmission and clinical outcomes in a range of populations. This Funding Opportunity Announcement invites applications that propose to understand social determinants of health as they relate to HIV infection and disease outcomes. HIV-related health outcomes of interest that may be impacted by social determinants include use of protection from infection, HIV testing, linkage to HIV care, adherence to medications and retention in HIV care. [READ MORE]
Upcoming Conferences

2015 Latino Health Equity Conference
Portland State University
June 18, 2015
Portland, OR
The Famlias en Acción Latino Health Equity Conference provides a forum to focus on individual and community pathways to health equity through research, programs and policies. LEARN MORE

International Conference on HIV Treatment and Prevention Adherence
June 28-30, 2015
Miami, Florida
This conference provides a forum for the presentation and discussion of state-of-the-science HIV treatment and biomedical prevention adherence research. LEARN MORE

Biennial Childhood Obesity Conference
June 29 - July 2, 2015
San Diego, California
This conference will highlight how collective impact principles coupled with evidence and practice based strategies can be used to effectively and efficiently combat the socio-ecological factors that contribute to overweight/obesity in children and adolescents. LEARN MORE

Measure Up/Pressure Down Hypertension Summit
June 29, 2015
Oxford, Mississippi
This one-day seminar will educate participants on the Measure Up Pressure Down Initiative which is a three-year national campaign designed to engage stakeholders in improving blood pressure control and achieving lasting improvements that lead the way to greater health, productivity, and cost savings. LEARN MORE

Do you have a great idea that you would like to share?
Email us to submit content for our newsletter.