Research, Relationships Road to Reducing Health Disparities

A new collaboration between two programs dedicated to eliminating health disparities, both named for female African-American civil rights leaders, isn't your traditional agreement. "So many groups work in silos," said Dr. Bettina Beech, University of Mississippi Medical Center associate vice chancellor for population health and professor of pediatrics and family medicine. She says that won’t be the case in a budding research relationship between UMMC's Myrlie Evers-Williams Institute for the Elimination of Health Disparities and Wake Forest Baptist Medical Center's Maya Angelou Center for Health Equity in Winston-Salem, N.C. The two entities have recently signed a memorandum of understanding, or MOU, that details their plans to together perform health disparities research across multiple platforms. Here's why it's different and why it matters, Beech said. "It's one thing to say you are partners. It's another to sign a MOU," she said. READ MORE


School Quality and the Education–Health Relationship

The correlation between education and health is one of the most established and robust relationships in the social sciences. School quality is a different dimension of human capital investment than quantity of schooling, and to the extent that the relationship between more education and health reflects a causal effect of human capital on health production, school quality may alter the effects of education on health. The empirical challenge in estimating the health effects of school quality is that the qualities of schools attended are the result of household decisions and the unobserved determinants of these decisions may be related to the later health outcomes of students. READ MORE


"Just because a child's parents are poor or uneducated is no reason to deprive the child of basic human rights to health care, education and proper nutrition."

~ Marian Wright Edelman
Featured Stories

Disparities in Health Not Always Preventable, But Still Need To Be Addressed

Discussions around health disparities often center on preventable conditions and ones that affect disadvantaged populations. This is warranted. It is important, as well, to remember that not all disparities are preventable due to predispositions for various conditions among some populations. Also, some disparities in health disproportionately affect non-minority populations. Skin cancer is one of these diseases. Forms of skin cancer differ, primarily among three types: basal and squamous cell carcinomas and melanoma. Among whites, skin cancer represents 35–45% of all new, abnormal growths and only 1-2% of all new abnormal growths in blacks. The differences in these rates are likely attributable to the increased epidermal melanin in blacks, which filters twice as much ultraviolet (UV) radiation as in the epidermis of Caucasians. Among the skin cancers, melanoma is the most dangerous and disproportionately affects blacks who have the condition. Among whites, melanoma rates are 25 per 100,000 compared to 1 per 100,000 in blacks. While there are higher incidence rates of melanoma among whites, the average 5-year survival rate for blacks is only 75 percent, versus 93 percent for whites.

The case of skin cancer between whites and blacks reminds us that addressing health disparities is not simple and straightforward. Disparities persist: Whites are more likely to have skin cancer, but blacks are more likely to die from it if they get it. This complexity leaves us with one option: to continue promoting prevention and awareness of the importance of sun safety and screening for skin cancer among both whites and blacks. This is exactly what Mississippi State University Extension has been doing this summer, in partnership with the Mississippi Department of Health’s Comprehensive Cancer Control Division. We invite you to join us on this journey of educating Mississippians from all races to lather up with water-resistant, broad spectrum sun screen that is 30 SPF or higher. For information about how to partner on this effort, please contact me at david.buys@msstate.edu or 662-325-3060. For more insight into sun safety and skin cancer, please visit: http://www.cdc.gov/cancer/skin/call_to_action/index.htm.

Education Improves Public Health and Promotes Health Equity

Basic educational expertise and skills, including fundamental knowledge, reasoning ability, emotional self-regulation, and interactional abilities, are critical components of health. Moreover, education is a fundamental social determinant of health – an upstream cause of health. Programs that close gaps in educational outcomes between low-income or racial and ethnic minority populations and higher-income or majority populations are needed to promote health equity. READ MORE


Educational Attainment as a Social Determinant of Health

A person’s level of educational attainment is strongly related to his or her well-being and health status. Research shows that better-educated people have lower death rates from common chronic and acute conditions, even after adjusting for demographic and employment factors. Further, the differences in life expectancy for those with and without a college education has widened over time. Differences in health behavior cannot account for all of the differences in health outcomes between those with more education and those with less. READ MORE

Cancer Health Disparities

Mortality Rates for Oral Cavity and Pharyngeal Cancer by Educational Attainment

Mortality rates among patients with major types of cancer, including lung, colon and rectum, female breast, and prostate, have decreased in the U.S. since the early 1990s due to decreases in risk factors and improved detection and treatment. This study describes trends in mortality rates for patients with oral cavity and pharynx cancer by educational attainment, race/ethnicity, sex, and association with human papillomavirus infection. Overall mortality rates for patients with oral cavity and pharynx cancer decreased among blacks and whites; however, decreases were greatest among those with at least 12 years of education. This difference in mortality trends may reflect the changing prevalence of smoking and sexual behaviors among populations of different educational attainment. READ MORE


Selected Cancers with Increasing Mortality Rates by Educational Attainment

Mortality rates continue to increase for liver, esophagus, and pancreatic cancers in non-Hispanic whites and for liver cancer in non-Hispanic blacks. This study evaluated age-standardized death rates for liver, esophagus, and pancreas cancers for non-Hispanic whites and non-Hispanic blacks aged 25–64 years by sex and level of education using mortality data from 26 states with consistent education information on death certificates. Generally, death rates increased for cancers of the liver, esophagus, and pancreas in non-Hispanic whites and non-Hispanic blacks (liver cancer only) with ≤12 and 13–15 years of education, with steeper increases in the least educated group. In contrast, rates remained stable in persons with ≥16 years of education. READ MORE


Cancer Mortality in the U.S. by Education Level and Race

Although both race and socioeconomic status are well known to influence mortality patterns in the United States, few studies have examined the simultaneous influence of these factors on cancer incidence and mortality. This study examined relationships among race, education level, and mortality from cancers of the lung, breast, prostate, colon and rectum, and all sites combined in contemporary US vital statistics. Educational attainment was strongly and inversely associated with mortality from all cancers combined in black and white men and in white women. The all-cancer death rates were nearly identical for black men and white men with 0–8 years of education. READ MORE


“What if the cure for cancer is trapped in the mind of someone who can't afford an education?”
~ Unknown

Disparities in Breast Cancer Prognostic Factors By Race, Insurance Status, and Education

Black women are more likely to be diagnosed with advanced stage and other less favorable breast cancer prognostic factors than white women. The aim of this study was to examine the extent to which markers of socioeconomic position accounts for black–white differences in these factors. In multivariable analyses, adjustment for insurance and area-level educational attainment explained 31–39% of the differences in tumor size and metastasis, but only about 14% of the differences in grade and hormone receptors. The risk of having breast cancer with less favorable prognostic factors increased as area-level educational attainment decreased. READ MORE

Five Social Disadvantages that Depress Student Performance

A study published by the Economic Policy Institute highlights five social disadvantages that diminish student performance: parenting practices that impede children’s intellectual and behavioral development, single parenthood, parents’ irregular work schedules, inadequate access to primary health care, and exposure to and absorption of lead in the blood. The study highlights a connection between student health and student performance, citing that children with limited access are more likely to have routine and preventable illnesses, causing more frequent absences from school. For each characteristic reviewed, the report describes its average incidence by race (black versus white) and socioeconomic status. READ MORE


Growing Evidence on Physical Activity and Academic Performance

Obesity can have serious ramifications for kids’ cognitive development and affect school attendance. Because children spend so much time at school, schools have a unique opportunity to help children become more healthy and active. Policies that support daily physical education and regular activity breaks during the school day can help increase physical activity, improve academic performance and improve classroom behavior among students. This research brief reviews evidence that examines how physical activity and fitness may help school-aged children maximize their academic performance, and provides an overview of the effects of physical activity on the developing brain. READ MORE


Cumulative Inequality in Child Health and Academic Achievement

Socioeconomic inequalities in children’s learning are present at the beginning of the school years, a troubling fact given strong correlations among achievement, completed schooling, and economic status. Economic disadvantage and the risk of poor health go hand in hand, and socioeconomic inequality in child health is present at birth and increases throughout childhood. The appearance of health inequality so early in life has important implications for patterns over the life course and across generations. Child health is a strong determinant of both short-term opportunities for upward mobility in the form of skill development and academic progress, as well as longer-term risk of downward mobility in the form of job loss, declining income, and prohibitive health care costs. READ MORE


Does Neighborhood Deprivation Modify the Effect of Preterm Birth on Children's First Grade Academic Performance?

Children’s cognitive development and academic performance are linked to both fetal and early childhood factors, including preterm birth (PTB) and family socioeconomic status. Children who are PTB are at higher risk of severe neurologic impairments as well as more subtle motor and neurocognitive deficits. This study evaluated whether the relationship between PTB and first grade standardized test performance among public school students was modified by neighborhood deprivation in early childhood. READ MORE

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

Independence Day is the nation’s birthday and it is a day where Americans celebrate freedom and liberty. Many individuals over our nation’s history have given their lives in an effort to experience unfettered opportunities to set and determine their destinies. George Washington Carver, an American genius born over 100 years ago, informs us that freedom is linked to education with the following words, “education is the key to unlock the golden door of freedom.” Education has been one of the ways through which individuals have been able to access stable employment, financial stability, health insurance, and quality health care. Yet, far too many African American and males of color in Mississippi face considerable barriers and distractions that make matriculation to and through secondary and post-secondary educational institutions difficult. Changing this trajectory is a key component in the effort to improve the health of minority males and C-HMM is committed to partner with education professionals and community-based organizations seeking to help more young males successfully navigate educational institutions, thereby expanding their behavioral toolkits to take better care of themselves, their loved ones, and their communities.

Executive Advisory Board Member of the Month

Dr. Lawrence T. Potter, Jr. is chair of the C-HMM Executive Advisory Board and has been a successful university administrator and tenured professor for nearly twenty years. Dr. Potter’s career in higher education—as a faculty member, department chair, committee leader, consultant and advisor, associate dean, dean, and cabinet-level administrator—has given him substantial knowledge as a leader and creative problem solver. As Dean of the College of Liberal Arts at Jackson State University, Dr. Potter developed “New Strategic Directions” (a college-wide strategic priorities roadmap) that raised the profile of the humanities and social sciences on campus and in the Greater Jackson community considerably during his tenure and implemented a number of initiatives in the first two years. Dr. Potter is an accomplished scholar and has produced a body of work concerned with the intellectual, aesthetic, cultural, social, and political dimensions—both imagined and lived—as part of the Black experience in the United States. He has been recognized by professional organizations and has appeared in reputable publications as a leading expert on diversity and inclusive excellence in higher education.

Executive Advisory Board Members on the Move!

Congratulations to you both!

Saint Louis University Names New Dean of College for Public Health and Social Justice

Dr. Collins O. Airhihenbuwa

Following a national search, Collins O. Airhihenbuwa, Ph.D., M.P.H., has been named the next dean of the College for Public Health and Social Justice at Saint Louis University (SLU). His appointment is effective Jan. 1, 2016.

La Verne Appoints New Dean for College of Arts and Sciences

Dr. Lawrence T. Potter

The University of La Verne appointed Dr. Lawrence T. Potter, Jr. to the position of Dean of the College of Arts and Sciences, a move that becomes effective Aug. 10, 2015.


Health and Social Disparities among Substance-Using African American/Black Men Who Have Sex with Men

African American/Black (AA/B) men who have sex with men (MSM) in the U.S. experience health and social disparities at greater rates than MSM of other races/ethnicities, including HIV infection and substance use. This paper presents a quantitative examination of health and social disparities among a sample of substance-using AA/B MSM compared to Caucasian/White (C/W) MSM. Findings indicate that compared to C/W MSM, AA/B MSM experienced a wide range of health and social disparities including: educational attainment; employment; homelessness; identifying as gay; HIV status; and social support. Data suggests that structural interventions that address homophobia and the social environment would be likely to mitigate many of the health and social disparities experienced by AA/B MSM.

READ MORE


Educational Attainment and Life Expectancy

Health disparities are well documented, but to reduce these disparities it is imperative that malleable mechanisms that contribute to these disparities are identified. Education is one example of a potential leverage point. There is a strong relationship between education and life expectancy. The association between educational attainment and life expectancy is apparent for both sexes and for a variety of ethnic groups. In all groups, having less than a high school degree is associated with the shortest life expectancy and the relationship persists through college graduation and beyond. In addition to life expectancy, those with less education report strong differences in health related disability in comparison to those with more education.

READ MORE


Educational Differentials in Adult Mortality in Low- and Middle-Income Countries

In high-income countries, there is extensive evidence showing that higher levels of educational attainment, higher income and higher occupational classes are correlated with lower risks of dying among adults. Far less is known on mortality differentials in low- and middle-income countries due to the lack of information on the socio-economic characteristics of the deceased. This evaluation found that levels of educational attainment are correlated within families. In most surveys, higher education is associated with lower risks of dying, especially in urban areas, but reversed gradients are observed in several countries with high mortality and generalized HIV prevalence.

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The Influence of Sex, Race/Ethnicity, and Educational Attainment on HIV Death Rates

Overall declines in HIV mortality may mask patterns for subgroups, and prior studies of disparities in mortality have used area-level versus individual-level socioeconomic status measures. The aim of this study was to examine temporal trends in HIV mortality by sex, race/ethnicity, and individual level of education (as a proxy for socioeconomic status). The main outcome measures were age-standardized HIV death rates, rate differences, and rate ratios by educational attainment and between the least- and the most-educated individuals. Although absolute declines in HIV mortality were greatest for nonwhites, rates remain high among blacks, especially in the lowest educated groups, underscoring the need for additional interventions.

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
Number of Awards: fund 3-4 awards
An estimated total: of $2Million in FY 2016

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.

Funding Opportunities

Advancing Health Disparities Interventions through Community-Based Participatory Research (U01)
Letter of Intent Due Date: July 18, 2015
Application Due Date: August 18, 2015
Number of Awards: to fund 20 awards
NIMHD intends to: $10,000,000 in FY 2016

The overarching goals of the NIMHD Community-Based Participatory Research (CBPR) Program are to enhance community capacity in research for which they will directly benefit; support collaborative intervention projects addressing health disparities; and accelerate the translation of findings into improved health and health outcomes. The purpose of this FOA is to support promising community interventions using CBPR principles and approaches aimed at reducing and eventually eliminating health disparities.

Behavioral Interventions to Prevent HIV in Diverse Adolescent Men Who Have Sex with Men (U01)
Intent Due Date: December 15, 2015
Application Due Date: January 15, 2016
Number of Awards: to fund approximately 3 awards
NIMHD intends to: $6,000,000 in FY 2016

Despite a sizable portfolio of existing research on preventive HIV interventions for MSM, there remains a dearth of evidence-based interventions for young MSM that are available for broad dissemination in the U.S. The purpose of this initiative is to test behavioral HIV prevention interventions for diverse populations of adolescent (age 13-18) men who have sex with men (MSM).

Book Corner

Race in the Age of Obama: Volume II edited by Marino Bruce and Donald Cunnigen
This volume is the second part of a two-volume examination of the sociological and cultural impact derivative of Barack Hussein Obama’s initial election and re-election as President of the United States. For some scholars and political pundits, the election of the first African-American president was thought to be the start of a post-racial era in the United States. His election/re-election has created a new racial dynamic within the nation. This book is available to read for free until July 22, 2015.

CALL FOR PAPERS!
For the next volume in Research in Race and Ethnic Relations.
The editors invite scholars to contribute studies utilizing original quantitative and qualitative research methods as well as theoretical and conceptual review articles that will further broaden our understanding of the relationship between inequality, crime, punishment, and health.

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Welcome to Our Newest Affiliates

David R. Buys, PhD, MSPH
Assistant Extension and Marian Wright Edelman Distinguished Lectureship Series
Assistant Professor, Department of Food Science, Nutrition, and Health Promotion, Mississippi State University
State Health Specialist
Mississippi State University Extension Service

Cynthia Karlson, PhD
Assistant Professor, Department of Pediatrics, Division of Hematology/Oncology
Department of Psychiatry and Human Behavior
University of Mississippi Medical Center

If you are interested in membership affiliation, please submit your curriculum vitae (CV), resume, or statement of interest to Felicia Bowens. She can also be reached at (601) 815-9019 or by email fbowens@umc.edu should you have further questions.

Upcoming Conferences and Events

Save the date: 2nd Annual Marian Wright Edelman Distinguished Lectureship Series
September 17, 2015—Jackson, MS
Presented by UMMC's Myrlie Evers-Williams Institute for the Elimination of Health Disparities. CLICK HERE for more information.

Mississippi Rural Health Association’s 17th Annual Conference: News You Can Use
September 20-21, 2015—The Hilton Jackson, MS
The conference will provide healthcare leaders in rural communities of MS with networking and educational opportunities as well as renewed motivation to tackle their challenging jobs. LEARN MORE

Save the date: 2nd Annual Rural Interdisciplinary Case Experience (RICE) Bowl
Tuesday, October 27, 2015
5:30 p.m.—7:30 p.m.—UMMC Conference Center at the Jackson Medical Mall
Presented by UMMC’s Myrlie Evers-Williams Institute for the Elimination of Health Disparities. CLICK HERE for more information.

Eighth AACC Conference on the Science of Cancer Health Disparities in Racial/Ethnic Minorities and the Medically Underserved
November 13-16, 2015—Atlanta, Georgia
Abstract Submission and Award Application Deadline: Thursday, August 6, 2015
This year’s conference will feature the most innovative science in cancer health disparities across the entire cancer continuum. LEARN MORE

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Email us to submit content for our newsletter.