NEW YORK CITY ALLIANCE NEWS

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2003 Conference Issue

Annual Urban University

Series

Keynote Address by Dr. John Ruffin

Director, National Center for Minority Health and Health Disparities

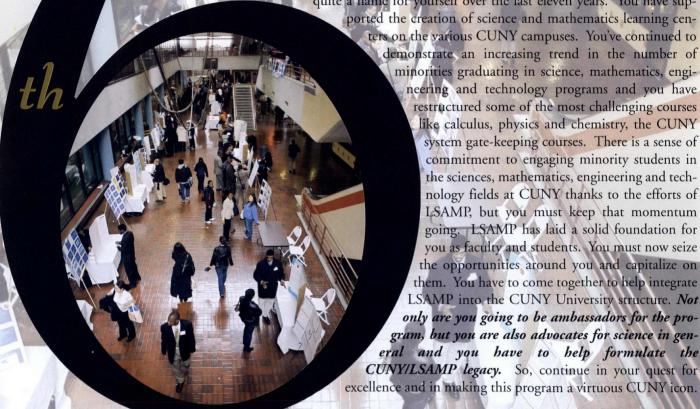
To the LSAMP Leadership, the National Science Foundation and the City University of New York

I think National Science Foundation (NSF) should be complimented for this program, for this effort and for their vision in creating and supporting this program. The LSAMP program is of special interest to me because of it's objective to substantially increase the number of underrepresented minorities enrolling and graduating in science, mathematics, engineering and technology. We too at the National Center for Minority Health and Health Disparities are committed to diversifying and building a competent cadre of scientific researchers for minority and other health disparity populations.

I am impressed with the accomplishments of the CUNY LSAMP program. You have already created quite a name for yourself over the last eleven years. You have sup-

> ported the creation of science and mathematics learning centers on the various CUNY campuses. You've continued to demonstrate an increasing trend in the number of minorities graduating in science, mathematics, engineering and technology programs and you have restructured some of the most challenging courses like calculus, physics and chemistry, the CUNY system gate-keeping courses. There is a sense of commitment to engaging minority students in the sciences, mathematics, engineering and technology fields at CUNY thanks to the efforts of LSAMP, but you must keep that momentum going. LSAMP has laid a solid foundation for you as faculty and students. You must now seize the opportunities around you and capitalize on them. You have to come together to help integrate LSAMP into the CUNY University structure. Not only are you going to be ambassadors for the pro-

gram, but you are also advocates for science in general and you have to help formulate the



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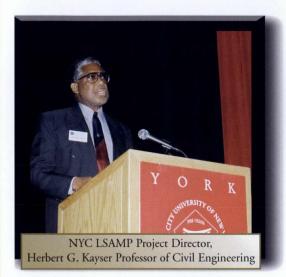
New York City Alliance News

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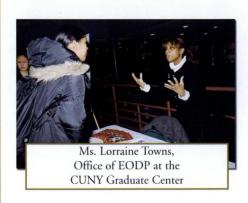
The New York City Louis Stokes Alliance for Minority Participation is funded under a cooperative agreement with the National Science Foundation.

Dr. Neville A. Parker

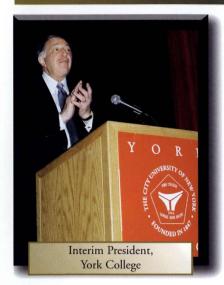


I wish to salute York College for this absolutely fantastic effort to host the Urban University Conference Series, and I don't think I can leave this podium without also stating very publicly how gratifying and almost mind boggling the extent to which York College has taken ownership of this conference. I think, that of all the things we have been working to achieve, this represents that sense of ownership we

want to see. Campus ownership has been one of the central tenets of what we have been trying to create over the last ten years. As we enter Phase III of LSAMP, which began November 1,2002, I wish to state that the New York City LSAMP is in a positive position to continue to contribute to increasing the production of STEM graduates in CUNY. I also want to point out that we have a great challenge before us because there is no question at all in our minds, as we look at what's happening across the county, that we have actually reached a plateau in terms of the production of the minority STEM graduates. Therefore, it is very, very important that we step back and look at how we could attain the goals that we have set for ourselves in LSAMP Phase III, to double the number of graduates by the year 2007 to 1,500 per year. That is what we are about and we call upon the University wide community to join with us. It is very, very important that resources be secured, but it is just as important to create the atmospherics, that pliable climate of academic and social economic support for our students. A climate that would encourage, a climate that is nurturing, a climate in which the students feel that coming to CUNY is an opportunity and a privilege, one that would see them through the hard times, is our goal.





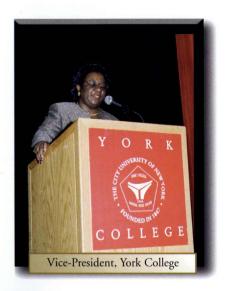


President Russell K. Hostler

You (the students) are the reason we are here today and I want to congratulate all of you for the wonderful effort that you have put forward. Last year, The Alliance celebrated its 10th anniversary and this is quite an achievement. This started as an experiment for the City University. The university had never before put together a project that involved collaborations on a scale of this magnitude. Starting from simple objectives in restructuring gatekeeper courses in calculus and chemistry, to establishing learning centers and building a foundation. You are witness to the Poster Session over in the Atrium, which has been built upon these beginnings.

Dr. Cheryl M. Smith

It is with great pleasure and a sense of accomplishment that I welcome you this morning on behalf of York College to the Sixth Annual Urban University Conference Series. It is the first time the conference is being hosted in the Borough of Queens, and it builds on what began in 2002 when we hosted the LSAMP Queens borough-wide meeting. LSAMP gives us the chance to help students explore new opportunities in student research. At York, we have had, to date, eighteen of our science and math faculty members answer the call to work with and mentor our students. The faculty members have again answered the call to make this the Sixth Annual Urban University Conference Series become a reality at the college. Today, as I look out at the audience, I see a community of learners, I see a large number of York graduates and former LSAMP research scholars serving as LSAMP Activity Coordinators at other campuses. Our LSAMP Scholars are enrolled in Ph.D. programs, some have entered the workforce at Brookhaven National Labs and the New York City public school system, while others are attending medical school, or enrolled in Masters and doctoral programs in the university.









Sixth Annual Conference Series continued from cover

Health and Disease Disparity and You I am encouraged that this program has also made health disparity a priority, one that I hope would penetrate the entire CUNY system, and that's one of the reasons why I wanted to come. I am constantly out recruiting ambassadors for health disparities. When you realize that over 70% of the undergraduates who enrolled in CUNY this past fall are from minority populations, and you understand that health disparities in large part is about the burden of diseases affecting them and their families, then you can't possibly turn your head. Although the United States has made astronomical strides in the scientific and technological Left to Right: Dr. Robert Ford, Dr. domain, as you Jerry Bramwell, Dr. Louise Squitieri probably see as you work through programs, your those advances have not benefited every-Not only are one. minorities not on par with the rest of the nation in the scientific and

The New York City 2000 census showed an increasing trend of a larger and more diverse population. Many of these people are foreign born from places like the Caribbean, Asia, South America and Africa. There is also an increasing trend of non-English speakers and those who speak a language besides English at home. These are important facts to think about when we look at the health status of minorities in this city, in light

technological workforce, but

the

disease and death are still rav-

fabric

of

our

of some of the factors that contribute to health disparities, and I want the young people to listen very carefully to me because when I talk to you I am actually trying to recruit you. It is great to have high school students listen because these are going to be the future doctors, these are going to be the future researchers,

Dr. John Ruffin,

Director,

NCMHD

City deal. We are talking about health disparities and since I'm talking to young people from high school and undergraduate school, when we talk about health disparities I want you to know that health disparities are real, although complex.

The variation in health status among different populations and the fact that some racial and ethnic populations are more burdened by disease than others is what we refer to when we talk about health disparities. We mean that there are certain groups sicker, certain groups who die disproportionately high when compared to other groups, and Mr. Jack Schlein, York College/NASA and the big ques-Dr. Leon Johnson, Medgar Evers College tion is why is this the case. Many of you live the reality of health disparities don't even know it. I'm sure you've heard of the high rate of asthma in the south Bronx and East Mr. Steve Cox, Director Harlem. Some of you may even experience the debilitating effect of diseases like asthma, HIV/AIDS, kidney disease and lupus in your neighborhoods or your own family every day. The complexity of health disparities is that it's like a puzzle with missing pieces.

The pieces that we have managed to

identify are the differences in health sta-

tus, and what we are still searching for

are the factors that cause those differ-

African Americans have the highest

incident and death rate overall, as well as

the highest rate for certain cancers.

For example, we know that

very important for them to know what opportunities exist for them to be able to contribute. Title VI mandates any health care provider receiving federal financial support to provide meaningful access to health care to those with limited English proficiency and I am told that violation of Title VI is one of the most frequent issues with which the Office of Civil Rights here in New York

Greater Philadelphia

LSAMP

continued on next page

aging

communities.

NEW YORK CITY ALLIANCE NEWS

Disease Disparity in New York City On March 18, just a few months ago, the New York City Department of Health and Mental Hygiene issued a press release based on the findings of two recent studies on colon cancer. The studies revealed that the highest death rate of colon cancer was among African Americans. Most disturbing was the low rate of colon cancer screening among this population. In 2000, The New York City Department of Health reported 4,013 new cases of people with Of these, 746 were AIDS. whites, 1,168 were Hispanics, 1,919 were African Americans, and 180 didn't identify who Of the they were. total new cases, 1,175 of those were women. In the state of New York, people of color made up 83.3% of new AIDS cases that year, and 76.5% of all people living with AIDS according to the bureau of HIV/AIDS Epidemiology of the York New State Department of Health. The infant mortality among Native Americans remain about 40% higher than that among whites. among Puerto Rican Americans, it remained 15% higher than among whites. In 2001, here in New York City, the infant mortality rates among children of black non-Hispanic mothers is 10% compared to 4.2% among those of white non-Hispanic mothers. The highest rate was in central Harlem, 13.1%. Cervical cancer, a disease that can be greatly reduced by effective health care, is 5 times higher in Vietnamese women in the United States

all too familiar disease in our community, is 4 times more likely to be found in Hispanics living in New York ages 18 to 39 than their white and Asian counterparts, and twice more likely in African Americans than whites and Asians according to a health survey released earlier this year by the New York City Department of Health and Mental Hygiene.

few things that attribute to health disparities. Let me share with you what some researchers revealed in an April 2000 study on racial injustice in health care published in the New England Journal of Medicine. The study illustrated the substandard medical care that African Americans often receive. One story was that of a 72-year-old African American woman in Harlem who was being treated for breast cancer. The physician prescribed a morphine

pain

based medication for the bone

she was experiencing and out of neighborhood pharmacies, none of them carried this medication or any morphine based medication. After ten hours, a home care team delivered the medication upon physician's request after he was informed that the prescription was available not locally.

A Recruiting Call
These are all injustices

that should not exist. When we are talking about health disparities, it covers so many different areas. Many of the factors attributed to health disparities are inter-related making it difficult at times to separate one from the other. And that is why I allude to health disparities as a puzzle, and what you will see is that it's going to take all kinds of people to solve these problems; lawyers, physicians, people in the laboratory. Every single field that I can think of that a high school student in here today might be interested in going into

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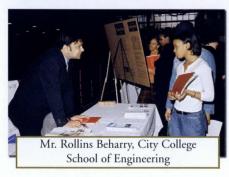
about are preventable, but there is a multiplicity of factors that may lead to health disparities. Researchers are studying the connection with behavior, the connection with genetics, access to care, culture, social injustice, environment, low economical status or poverty, and stereotyping by doctors, just to name a

Many of the diseases that I'm talking

than among white women. Diabetes, an









KEYNOTE SPEAKERS

1998

Keynote Address: Dr. Harold Davis, Director of Toxicology at AMGEN.

1999

Keynote Address: Dr. George Campbell,

President and CEO of National Action Council for Minorities in Engineering Inc.

2000

Keynote Address: Dr. Fitzgerald B. Bramwell,

Vice President for Research and Graduate Studies, University of Kentucky.

2001

Keynote Address: Neville A. Parker, Ph.D., P.E.

Herbert G. Kayser Professor of Civil Engineering and NYC LSAMP Project Director

2002

Keynote Speakers:

Dr. Rita Colwell, Director, National Science Foundation

Dr. Barry R. Komisaruk, MBRS Program Director, Division of Minority Opportunities in Research.

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Sixth Annual Conference Series

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contribute to health disparities. what's exciting about health disparities research is that these multi-factorial pieces present an opportunity for everyone to get involved in the solution and among the many crises of the day, particularly of this day, this nation is definitely faced with a health disparity crisis. Edward Weil, Provost,

you can compete on a level playing field. We are modeling the effort of the National Cancer Centers by now creating Health Disparity Centers around the country and have three different models, so that most institutions can participate in that competitive effort.

York College

the kinds of things we are talking about. Think about the consequences if you don't do that. The consequences are if you don't do it, then the very people on whom you are going to be relying, if one of these travesties attacks you, or someone that you love, are not going to have the workforce to solve many of those problems. Why not do it yourself?

The Congressional

Mandate

Congress gave us COLLEGE grant making authority. Which means they have given us the authority to make grants directly to you, insti-Dr. Karen Hubbard, tutions and City College individuals, and they also said to us, not only shall you take care of ethnic minoribut ties, want you to take care of these other populations as well that are suffering disproportionately. So when you start to formulate your ideas keep in mind there is a large, large contingency of people out there that need your help. They need you to help them to do something about health disparities.

To Institutions

We are always encouraging small institutions and minority institutions to partner with many of the institutions in their communities. It is pretty hard to do that if we cannot build the kind of infrastructure at your institution where To The Students

You cannot participate (young people) unless you take advantage of the sciences. I wish I could tell you how fast time flies. When people are introducing you to these courses; calculus, chemistry and other courses - don't say it's too hard. Time flies. It will pass real fast, but it's how you prepare yourself to do

Dr. Kabba Colley,

Mr. William Rogers, City College

Queens College

To The Conference Participants There is absolutely no reason

why your grandmother or

your mother or your sister or your brother should suffer disproportionately compared any other population. I am on a recruiting mislooking for the very best people, and telling you that there is a crisis in health disparities and that it relates to everything that you are doing now. If you are a high school student, it relates to how well you are preparing yourself now. you are undergraduate student, it

relates to how well you are doing things now. If you are a graduate student, it relates to those long hours that you spend in the laboratory working. It is related to how you train. For faculty - it relates to how seriously you take your job and how well you perform that job in terms of preparing the people for the next generation, who are going to take care of us. .

2003 Urban University Conference Series



Conference Theme: Community University Partnerships

Keynote Address: Dr. John Ruffin

Director of the National Center on Minority Health and Health Disparities (NCMHD)



Dr. James Frost,

LaGuardia CC

Panelists:

Mr. William Rogers, City College

Dr. Karen Hubbard, City College

Dr. Fitzgerald Bramwell, *University of*Kentucky

Dr. Earnest Marquez, NIH

Dr. Jack Schlien, York College

Dr. Kabba Colley, Queens College

Ms. Antoinette Sumpter, York Health

Sciences

Dr. Robert Ford, Southern University

Dr. Frank Scalzo, NASA GISS

Dr. James Frost, Laguardia CC





