

**OCL Health Disparities Study
Steering Committee Meeting
February 27, 2007
Meeting Minutes**

Present: Sandra Barrett, Betty DeFazio, Paula Freedman, Kim Jaffe, Mary Jensen, Andrew London, Cynthia Olmstead, Martha Ryan, Cheryl Abrams

The meeting was called to order at 8:40 a.m. Introductions were made and the February 20, 2007 meeting notes were reviewed. Martha Ryan asked for a clarification of what MAMI is – a language interpretation service.

It was suggested that when the committee discusses the public sessions on healthcare, we invite a representative from Family Care Medicine, North Med or another large practice which accepts Medicaid (and another practice which does not). It was also suggested that dentists be included, since most do not accept Medicaid.

SU Community Geographer Jonnell Allen delivered a presentation titled, “Access to Healthcare and Healthcare Delivery: A Geographer’s Perspective.” (Note: Jonnell will email Sandra her Power Point file.) Betty commented that the committee is trying to ascertain what data exist already so the committee can begin to fill in info gaps. Jonnell stated that there are quite a few data sources out there...

Jonnell: Geographers are interested in spatial relationships – adequate access that is based on geographic or time-related barriers. Many of the barriers to health and healthcare are associated with low socio-economic status. The boundaries for the City of Syracuse are 4 miles by 7 miles; the Onondaga County boundaries are 24 miles by 24 miles. Some general points:

- Pediatric dentistry is a major access problem. Few dentists accept Medicaid.
- Assisted Care – she has observed that there are few minorities present in long-term care facilities. Does this contribute to low life expectancy for minorities?
- Summer Food Service Program – fewer sites in rural areas.
- Grocery stores – few on the southern end of Syracuse with fresh produce. 5-7% of money is spent on food – used to be 25%.
- Green space – good coverage of parks in city and county – free or at low admission/use cost.
- Walkability within the city can be a major problem. Currently students are conducting a study within 2 miles radius of Hughes Magnet School. Sidewalk conditions not good – few paved, not shoveled. Children walk in the middle of the road to go to school during winter.
- Survey of Non-Profits and Services – Youth Resources Mapping Project Survey 2006-Jan 2007. Outside the city, there are not many youth centers. Most are school-based.

Sandra: Is someone looking into taking findings to the next step? Jonnell responded that the Gifford Foundation is possibly funding a mobile market. S.U. Southside Coalition may be establishing a food coop. Cornell Cooperative Extension is involved with “urban delights” program – growing produce in this area and selling. A number of pantries have closed on the southwest side. (WHY?)

Teen Childbearing 2002-2005 – If approved by Dept. of Health, she can provide the stats she has on this: 10-19 years birthing info; 10-19 years sexually transmitted diseases. Survey looks at location, neighborhoods, birth certificate information, how much pre-natal care received and more.

Discussion turned to issue of maternal/child health – how is it connected to neighborhoods. If concentrated in an area, not as easy to place blame on the mother. Andrew stated that stats may assume that no migration has taken place. Betty still wonders how many live in poverty and how that affects

nutrition, etc. – we need to look at objectively and make no assumptions. Mary stated that Syracuse is still a very segregated town, referring to high concentration of African-American population on the south side. Kim and Mary both stated that they have not seen studies or reports that directly correlates poor maternal/child health with high levels of chronic diseases. Martha said that cancer data linking disease to location exists. Kim says information comes from hospital discharge data. Andrew cautions against just using discharge data as source.

Jonnell referenced a report – Access to Healthcare in America – 1993 study by the Institute of Health.

Syracuse Health Center is on bus line but perceived by patients as hard to get to. Jonnell mentioned studies by her students on Centro usage – time is the factor in getting from one place to another.

Mary brought up issue of transportation being a barrier to good maternal/child care. Example: no formula at home for newborn, cannot breastfeed, has no way to get formula quickly. Food pantries are zip code based. Jonnell said that zip code information is the worst to work with – census block group level is better, more reliable.

Sandra raised the issue of “suburbanization of poverty” – some parts of older, inner ring suburbs exhibiting same problems as poor areas of city – we should not ignore health inequalities affecting people living in pockets of poverty within the county outside the city even though economic indicators of 2000 show that there are strong income disparities between city and county dwellers in general.

Kim asked if Jonnell knew of any studies about Medicaid patients and providers; Jonnell is unaware of any. Sandra mentioned that Steve Morgan at Dept. of Social Services can speak to issues of Medicaid utilization.

Next step: How to break out the public sessions. All felt that another meeting is needed. Andrew expressed his feeling that the committee is not focused... perhaps best to organize sessions around six issues or topic areas to gain a better focus. Kim agreed, stating we need to hone in on a set of outcomes.

All agreed that we need to refer to established definitions of health outcomes, health status and healthcare that may exist. (Refer to CDC website.) We need to look at national data on disparities. Kim stated that national surveys show that people do not realize that disparities even exist.

Andrew brought up the issue of “privilege” – need to address who is responsible for nation’s health care. What would the privileged give up to pay for equal coverage for all? Paula stated that there are disparities between the rich and poor in any number of given areas. With regard to education, there are laws establishing the basics, while with health care, there is no legislated standard of service. Andrew commented that social distances are enormous – it is stunning that we cannot solve these sorts of issues within a parcel of land just 4 miles by 7 miles.

Meeting was adjourned at 9:55 a.m.

An additional committee meeting was scheduled for Tuesday, March 6 at 8:30 a.m. in Room 307 of University College.