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Facing Up to Disparity in Health Care

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Facing Up to Disparity in Health Care

This past fall, the Office of Health Policy and Clinical Outcomes hosted the First Annual Multicultural Forum, "Facing Up to Disparity in Health Care: Finding New Ways to Improve Health." Co-sponsored by the Office of Continuing Medical Education, in conjunction with the Office of Diversity and Minority Affairs, the forum responded to a growing problem in the American health care system: the denial of equal access to high-quality, culturally-competent health care on the basis of race, ethnicity, and gender.

"At no time in our history has our country experienced the kind of multicultural influx due to increased birth rates and new immigrants," noted **Edward B. Christian, PhD**, Associate Dean of Diversity and Minority Affairs, in his introductory remarks. "This recent change makes the topic of health care disparities more significant than ever before."

The September 21st day-long program featured presentations by a diverse faculty of locally and nationally recognized experts in the field of multicultural practice and health services research. Attendees included physicians, nurses, social workers, medical students, and officials from public policy groups, health and social service agencies, and managed care organizations.

In the opening presentation, "Health Care Disparity: Myth or Reality?" **Carolyn M. Clancy, MD**, provided a national perspective of the issue and discussed how non-clinical determinants – cultural incompetence of health care providers, socioeconomic inequities, reimbursement, etc. – profoundly affect health outcomes in such areas as diabetes and heart disease.

"Disparities in health are no myth," said Dr. Clancy, a practicing internist and health services researcher who directs the Center for Outcomes and Effectiveness Research at the Agency for Healthcare Research and Quality (AHRQ). "The real question we have to come to grips with is 'what proportion of the observed disparities in health are attributable to health care and what can we do to fix them?'" She offered four levels of interventions to eliminate inequalities in health: (1) improve the physical environment, (2) address social and economic factors, (3) improve access to appropriate and effective health and social services, and (4) reduce barriers to adopting healthy lifestyles and changing behavioral risk factors.

Reactor panel members **Neil R. Powe, MD, MPH, MBA**, of the Johns Hopkins Medical Institutions, and **Raynard S. Kington, MD, PhD**, of the National Institutes of Health (NIH), emphasized the importance of educating consumers on access to health care, issuing "disparity report cards," and, above all, improving information systems and data collection efforts. "We are not going to come up with concrete policy solutions unless we have better data about the race, ethnicity, and socioeconomics of different subgroups," said Dr. Kington, Associate Director of Behavioral and Social Sciences Research at the NIH.

In a presentation on Culturally Competent Clinical Care, **David S. Kountz, MD**, of UMDNJ-Robert Wood Johnson Medical School, focused on race and ethnicity as a risk factor for access to care and the effect of racial bias on clinical trials. He also

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discussed intelligent prescribing to diverse populations, citing studies on varying drug responses in racial and ethnic groups.

According to Program Director **David B. Nash, MD, MBA**, the objective of the forum was not only to present a big picture of health care disparities but also to address the challenge of training a future generation of caregivers for a diverse patient population.

In an afternoon workshop on Resident Training, **Gary Butts, MD**, focused on the need to develop an educational environment supportive of diversity. Dr. Butts, Associate Dean for Student Affairs at Mount Sinai Hospital, stressed the urgency of "moving towards an integrated, cross-cultural approach to curriculum" and "capturing this opportunity to train our residents differently."

Other workshop sessions addressed issues around cultural competence standards, health services research, and disease prevention. Faculty included **James D. Plumb, MD**, Jefferson Medical College; **Lisa A. Cooper, MD, MPH**, Johns Hopkins Medical Institutions; **Robert C. Like, MD, MS**, UMDNJ-Robert Wood Johnson Medical School; and **Edith Mitchell, MD**, Jefferson Medical College.

The First Annual Multicultural Forum, which was supported by an unrestricted educational grant from Pfizer, Inc., has generated interest and enthusiasm across a wide spectrum of health care professionals. The Office of Health Policy looks forward to hosting future programs on this timely and critical issue.

About the Author

Miriam Reisman, MFA, is a medical writer for the Office of Health Policy and Clinical Outcomes at Thomas Jefferson University.