

Health Disparities Committee Meeting Minutes

Wednesday, April 21, 2008

9:30 am – 11:30 am

Location: Inter Tribal Council of Arizona, Inc.

2214 North Central Avenue, Suite 130

Phoenix, AZ 85004

Call in number: Toll-free 1-866-762-4504

Pass code: 7123018

Attendees: Norm Peterson, Tim Flood, Jana Granillo, Raquel Acosta, Naomi Lane, Veronica Vensor, Sharon Jaycox, Veronica Perez, Kendra Sabol, Jesse Nodora, Kenton Laffoon, Naomi Lane, Nate Smith, Kathryn Coe

On Phone: Denise Steinbach

Apologies: Patti King, Michael Trujillo, Doug Hirano,

Agenda Items	Discussion	Follow-up Items
Review of previous Minutes	Minutes from the 10/24/2007 and the 1/23/2008 meetings were reviewed and approved by committee.	
Introduction	Introductions were made. All new and existing committee members welcomed by Co-chair Sharon Jaycox.	
Sub-committee	Jana gave an update on her efforts of identifying groups working with racial and ethnic groups. The "Community Group List Form" was sent out by the Arizona Disparity Center and the Arizona Cancer Coalition. Hoping that the form will be disseminate throughout members list serves and returned to Jana.	Jana will get a list compiled and send out to Sharon Jaycox. The list will be review at the next meeting.
Matrix	<p>The African-American matrix was discussed. Jesse Nodora suggested that the next step would be a readiness assessment. Colorado has published this and it has been used in under-served communities. Key stakeholders would be interviewed with generic questions within the context of cancer control.</p> <p>Another idea would be to determine how prepared a community is to develop an activity. By using the matrix, they could select a cancer disparity. The next level for the committee would be to determine appropriate planning tools. Identify the type of community and use the tools that are already used as models. One suggestion would be Cancer Planet.</p> <p>The Steering Committee approved the matrix for African-Americans. Other committees can also disseminate information. Tim Flood still needs to contact Cynthia Claus. Tim Flood added a section on "How to use this document" The purpose of the matrix is to determine what the disparities we are trying to address</p>	<p>Jesse will send out the Colorado readiness assessment tool to the committee.</p> <p>Tim Flood to get the Native American Matrix to Cynthia Claus</p>

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	<p>and to show the decision that a community might want to make. This matrix has already been presented to leader but it needs to be put into an example format.</p> <p>A web page can be useful to show ideas of how the matrix can be used and this is part of the education needed. The first priority is for the under-served and poor; those with high morbidity other than the under-served and poor. Questions were asked “do we need an emphasis for under-served and poor rural specific effort?” “If not, what happens to the white poor?” The assumption if that this matrix is for the under-served and the poor.</p> <p>Screenings may be available locally to certain communities. The American Cancer Society (ACS) is very active with outreach and more regional specific outreach. These areas for rural outreach are Kingman, Bullhead and Laughlin. It would be beneficial to partner with ACS for the rural exterior belt. The Latinos and the bordering communities are very different.</p> <p>Another phase would be to identify priority areas for point of contact. GIS mapping for various elements of color, poverty level, river locations can be utilized. Since we have preliminary data, we can proceed to the next step.</p> <p>Reference was made to the Texas Cancer Control plan web site and the end of the year report from Texas. A cautionary step before launching into the next step would be study the Texas plan and present it back to the committee. A caution was also made to not loose sight of urban and rural poor whites; i.e., Appalachia community health worker models.</p> <p>Denise Steinbach from National Cancer Institute (NCI) reported that NCI has been working on trying to bring interventions on a local level in a number of states. A Reference can be made to the <u>Community Guide</u>. It is important to identify leaders. Cancer Planet has research tested interventions. A possibility would be for the U of A Evaluation Team to look at priorities of our committee. Clarification was made that poor, white, and rural are not a community.</p> <p>Areas for targeting could be: Greenlee, and La Pas for the Latino and white; Mohave County could be for Latinos, white and American Indians. Bullhead City could be the area. Tim Flood stressed that a priority is to get the community</p>	<p>Tim will assist with how to use the document.</p> <p>Kendra will send out a synopsis of the plan.</p>
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	<p>leaders organized and at the table.</p> <p>Gary Hart is an expert on rural and state data. Five steps would be:</p> <ul style="list-style-type: none">• Identify leaders• Identify a community• Community leaders identify priorities• Develop an action plan• Implementation <p>An example would be the Undy 5000 to link communities to develop seed money to motivate ideas for colorectal cancer treatment dollars.</p> <p>It is important to connect with other communities. SAICN would be important for the American- Indian contacts. It is important that community leaders decide what the priorities are for the community.</p> <p>Kenton Laffoon reported that there are 7 tribal communities that have grants. To implement the matrix one community at a time needs to be educated. For the matrix it is important to work with the tribal health department, medical directors, tribal leaders, with the decision being made to select a cancer priority.</p> <p>Sharon Jaycox suggested providing Cancer 101 training when presenting the Matrix. ACS has a cancer 101 curricula.</p> <p>Naomi explained that cancer 101 which is normally set up for a two day workshop can be set up for a one day workshop. There are 7 modules. A stage of readiness could be to train the trainers. CIS has a cancer 101 with a native American focus.</p> <p>Jesse suggested that other committee chairs and the Steering Committee would be useful for implementation ideas and to include resources. It would be important to keep things simple and not to leave the community leaders without any ideas of what to do. It is important to increase awareness so that the communities can intervene.</p>	<p>Naomi would email the Cancer 101 to the committee.</p>
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	<p>One thing would be make a link to the issues that communities think are important. Ideas might be: tobacco, obesity, alcohol, sun safety. Questions for the leaders to ask are: how do these health risks relate in lay terms? Social math context would be valuable.</p> <p>The African American Matrix going through final revisions. Once this is completed Dr. Flood will make adjustments on the other base on some of the recommendations from the AA Matrix.</p> <p>Kendra reiterated that the each Matrix needed to go through the Steering Committee for review. The African American already went through but the others need to as well.</p>	
Next Meeting Date	Monday June 2, 2008. Time: 9:30 at ITCA	