

Rolf: Welcome to the Health Disparities Podcast, our regular multidisciplinary exploration of health equity-related subjects brought to you by Movement is Life. We're a nonprofit coalition with a mission to eliminate health disparities that we see across race, ethnicity, gender, and zip code. And we are back from our summer break and looking forward to a new season of episodes with some really exciting guests and topics on the schedule, and some news about Movement is Life and our upcoming caucus in Washington, DC. So, first of all, let me introduce our esteemed guest for today's discussion during which we're going to preview our upcoming annual Caucus and share with you information about how you could attend. Dr. Millicent Gorham is the new Executive Director of Movement is Life, and that's a position created when Movement is Life achieved nonprofit status earlier this year. She joins us directly from leading the National Black Nurses Association, and she's been a long-standing member of the Movement is Life Steering Committee. Welcome, Millicent.

Dr. Gorham: Thank you so much, and good day to our listening audience. I am delighted to be the inaugural Executive Director of Movement is Life. Yay! So, it's been 11 years that I've been on the steering committee, and it has been a joy to work with all of my colleagues from this multicultural, diverse group of health leaders from around the country. And I'm excited about the Caucus in November and look forward to all of you all joining us in Washington, DC.

Rolf: Thank you, Millicent. And also, with us today is our longstanding Caucus Chair for Movement is Life, Dr. Mary O'Connor. She's a past professor of Orthopedic Surgery and Rehabilitation at Yale School of Medicine, but she recently swapped her surgeon's gown for an entrepreneur's desk as co-founder and Chief Medical Officer at Vori Health, a new venture making musculoskeletal care more accessible and equitable by taking it online. Welcome, Mary.

Dr. O'Connor: Thank you, Rolf. I'm delighted to be on the podcast today and very excited to share with our listeners some highlights about our upcoming Caucus in Washington, DC, again November 10th and 11th, and really looking forward to highlighting some of our exciting plenary speakers.

Rolf: And Millicent, it's great to have you here today as Executive Director, as Movement is Life moves forward as a nonprofit organization. What are some of the exciting opportunities that this new status will potentially bring us?

Dr. Gorham: I'm just really excited about what all this portends for Movement is Life, and particularly around our ability to look for opportunities to collaborate

with other nonprofits, other associations, other corporations that we haven't been able to do so in the past. And so, we will be able to collaborate with them on health advocacy, on gaining more visibility around health disparities, around health equity, and collaborating with corporations, associations, other nonprofits around community-based programs that will certainly help to improve the health status of everyone. So, we're looking forward to collaborating on fundraising activities, on programs, and public policy. That's what gets me excited about Movement is Life.

Rolf: And Mary, what would you like to add to that?

Dr. O'Connor I agree. Our transition to nonprofit status gives us many more opportunities. And I just want to acknowledge the ongoing support that we receive from now the Zimmer Biomet Foundation. They have been an amazing organization supporting us from our onset and now continuing to support us through their foundation. So, I just want to acknowledge Bryan Hanson, the CEO at Zimmer Biomet and the entire Zimmer Biomet family for their ongoing support of our important mission.

Rolf: Mary, could you say a little about the main theme of this year's caucus?

Dr. O'Connor The theme of this year's conference is "Health Equity: Beyond the Headlines." We have seen a much greater and broader awareness of health equity given the pandemic. The pandemic is of course a horrible thing that has happened to us all but one I would say positive that has occurred from the pandemic is a recognition of the horrible inequities that so many experience. So, we are looking now for solutions beyond the headlines to really say, how can we continue to work to eliminate these disparities? So, this caucus is about solutions.

Rolf: Thank you, Mary. So, let's take a look at some of the highlights and keynotes of the plenary sessions for the November Caucus, starting with our first speaker after your opening remarks, which is Cara McClellan. And she has taken on a new role as director and Associate Practice Professor of the Advocacy for Racial and Civil Justice or ARC Clinic at the University of Pennsylvania. Her plenary presentation is titled "Racism in Healthcare: Affirmative Health Action?" Mary, your thoughts?

Dr. O'Connor I'm really looking forward to this because we know that there have been a lot more conversations and challenges around the need for diversity, for example, in medical school and in medical training, and whether "merit-based" admission standards should be the only type of criteria for consideration. I think it's a very interesting conversation to have. My

husband and I have this all the time, and I continue to say, but if it was-- Because I fall on the we need diversity in our healthcare workforce, and if it was just based on merit and everyone was so smart, then help me understand why we have such disparities. So, I'm very interested in Cara's session. I think it will be really enlightening for everyone and educate us better on some of the legal and regulatory issues that we're facing now.

Rolf: And then following on from that, we have a panel discussion about racism in healthcare.

Dr. O'Connor So, Rolf, this panel will follow Cara McClellan's opening remarks, and that will allow us to have a more in-depth conversation and gain additional perspectives on racism in healthcare with three incredible leaders. Dr. Bonnie Simpson Mason is now the Medical Director of Diversity, Equity, and Inclusion at the American College of Surgeons, Dr. Elena Rios is President of the National Hispanic Medical Association, Frank McClellan is a well-known expert in healthcare law. So, this will be a fascinating panel for the audience to hear their insights and also for us to understand how we can move to solutions.

Rolf: And then later in the day, we welcome Fawn Lopez, Publisher and Vice President of Modern Healthcare. And her talk is entitled, "Harnessing the Media's Power and Purpose in Our Fight for Health Equity." Millicent, your thoughts on this talk?

Dr. Gorham: Oh, my goodness. I'm so excited about Fawn Lopez being a part of Movement is Life. I've followed Modern Healthcare for many years and I'm just excited about what the media can help us do in terms of health equity and dealing with the health disparities. We talk about the vicious cycle. We talk about cardiovascular disease and high blood pressure, diabetes, and depression and how they impact our overall healthcare. So, can you imagine what her conversation will be in terms of exploding the media around health equity and cardiovascular disease, around diabetes, and everything that we've dealt with in these last two years with the pandemic around depression? So, we're really looking forward to her presentation and what that portends not only for modern healthcare but what that portends for all of the media outlets.

Rolf: And Mary, any additional comments?

Dr. O'Connor Modern Healthcare has been a publication that has really, in my mind, kind of stepped up and started focusing specific sections on health equity and a call for papers related to health equity and really understanding the importance of elevating this issue across all of healthcare and Fawn has been a leader in that regard. So, we are just

so blessed to have her, and I echo Millicent's comments about the power of the media to really help us achieve solutions because awareness is essential, but we really have to move to solutions.

Rolf: Okay. And next for discussion, one of the early highlights of the second day is Dr. Garfield Clunie and his talk is "Advocating to Increase Diversity of Clinicians at the Decision-Making Table." Dr. Clunie is the Associate Professor and Vice Chair for Diversity, Equity, and Inclusion at the Department of Obstetrics and Gynecology, NYU Grossman School of Medicine, and he's the current president of the National Medical Association. Millicent, your thoughts on Dr. Clunie's talk?

Dr. Gorham: I think that Dr. Clunie will give us a great opinion around decision-making in terms of getting more diverse clinicians into medical schools, out of medical schools, through their residency programs while they're in the hospital, that will make a difference in making sure that we have access to clinicians that look like their patients. And I think that's the exciting part of his presentation.

Rolf: Mary?

Dr. O'Connor: So, I am so excited about Dr. Clunie's talk and feel that it will really follow very nicely Cara McClellan's opening plenary, which is discussing affirmative action, racism in healthcare. And now we have Dr. Clunie, who is the president of the National Medical Association, continuing along that theme with how are we going to increase diversity of clinicians at the decision-making table? And we know that trust is such an important element of the healthcare provider relationship with the patient. And so, again, it comes back to how do we improve diversity in the healthcare workforce, which will promote patients feeling more comfortable with their providers, their clinicians. And it's not just the diversity of the healthcare workforce, but it's having diversity around that decision-making table. Because we know that the more diverse a group is, the better the decisions are that they make. That has been shown in businesses when boards have more women, for example, on their boards, they're more profitable, corporations will make more money. So, this question of how important is it for us to have diversity at the decision-making table, I think is really critical. That's why I'm really excited about Dr. Clunie's presentation.

Rolf: And then another highlight of the second day is Dr. Alisahah Jackson. She's the System Vice President of Population Health, Innovation and Policy with Common Spirit Health.

Dr. O'Connor: I am so excited that we have Dr. Jackson. She has been a leader in health equity for years, and Common Spirit is a very visionary health

system committed to health equity across all of their institutions and the patients that they serve. And so, as we look to how we are moving beyond the headlines and finding solutions, we need those solutions to come from every aspect of the system, from healthcare systems to neighborhood pharmacies, to physicians, to policymakers. And so really, we want the Caucus audience to be able to come away with important messages from multiple sectors - health systems, businesses, policymakers, etcetera.

Rolf: And then, we really focus on how essential it is to have good healthcare resources in our communities. We have two speakers who come from the worlds of neighborhood pharmacies and health insurance. Firstly, Dr. Priya Mammen from Walgreens Boots Alliance, and she's talking about ways that Walgreens is advancing health equity for our communities. And then Jennifer Truscott, who's with CVS and Aetna, and she's talking about "Moving and Improving: Achieving Health Equity for our Communities." Mary, why is the community focus so important?

Dr. O'Connor: Rolf, that's a great question and I am so excited to have these individuals with us. We are seeing a transformation in healthcare where basically the void of patients having access to primary care that has been created or exists in the current healthcare system, that void is being filled in the commercial space. So, these companies like Walgreens, CVS, that were traditional pharmacy companies, have recognized that there's an opportunity for them to be mini primary care centers. And so that is a fundamental transformation of how patients can access care. I think it's very exciting. The more that we can make healthcare easy and accessible to patients, particularly those who have been traditionally challenged to receive care, the better. And as we know, many of these pharmacies are located in, I would say, less advantaged communities. So, the opportunity for health disparities to be decreased through these efforts is huge. And the leadership in these companies has focused on that. So, I am so excited that we will be able to share these leaders with our Caucus attendees.

Rolf: And Millicent, what would you like to add?

Dr. Gorham: I think Dr. O'Connor is absolutely right in terms of where CVS is and where Walgreens is in neighborhoods. They're everywhere. And this is the perfect opportunity for communities to take advantage of getting their primary care services taken care of, right where they work, right where they live, right where they play, right where they worship. And so this is a perfect opportunity for us to find out what the vision is of Walgreens and of Aetna and CVS, find out what their vision, what their

mission is, what these community programs portend, and how we might be able to work with them, and making sure that people can have better access to healthcare.

Rolf: And then we continue the health in our communities' theme with a panel discussion.

Dr. O'Connor: Rolf, that's correct. That panel will be with Carol Naughton from Purpose Built Communities and Marissa McKeever, who's from Johns Hopkins and was at Sibley Memorial Hospital. And both of these groups have been incredibly visionary in their approaches to addressing health equity. Purpose Built Communities has been a public-private partnership, basically building communities for individuals across multiple income streams and focusing on really the quality of life and their experience in those communities. I am super excited that we will have Carol Naughton back. She was a plenary speaker with us a few years ago, so really excited to learn how they have progressed with their mission and vision. And then Marissa McKeever, equally visionary. The innovative programs that she led at the Sibley Memorial Hospital part of the Johns Hopkins system are very impressive with direct outreach to the community, actually asking the community, what is it that you need from our healthcare system to make health better for you? So super excited for that panel.

Rolf: And Millicent, what are you looking forward to about this panel?

Dr. Gorham: They will be talking about the social determinants of health. So, they're really focusing also on food deserts and making sure that there are grocery stores that are bringing in the adequate nutritious produce that we need to keep healthy there. They will be talking about housing and how that impacts healthcare. They'll also be talking about employment opportunities for community residents because we need to have full employment in order to make sure all these other pieces work. And then they want to talk about walkable communities, communities where they can get exercise and great physical activity. So, we're really excited about having these two visionary thought leaders to talk about community engagement.

Rolf: So, Millicent, returning to our overall theme, which is "Health Equity: Beyond the Headlines," how does all of this come together to make a great caucus?

Dr. Gorham: I think the program is going to take some deep dives into some hot-button issues around racism, around what those solutions portend. One of the things I've talked with several of the speakers, and they talk about microaggressions at the bedside, not just with providers, but with

patients as well, and how we solve that so that the providers can do their best in taking care of patients. But they're going to jump into decisions around how do you get medical students through medical school and what that portends in terms of making sure that we get access to diverse providers. They're really going to jump into the institutions in terms of policies that institutions have that are quite frankly racist policies. But these policies need to be looked at from a different perspective. The panelists will be able to give us their solutions on how this might be done.

Rolf: Okay, so thank you, Millicent, for that wonderful summary and it's going to be a great caucus. Now if you're interested in attending, what you need to do is go to movementislifecaucus.com. That's movementislifecaucus.com and click on the caucus tab and you'll find all of the registration information is right there and we would love to see you in person. Now, earlier in the podcast, we talked about health equity and the vicious cycle, which exacerbates the health disparities that we're trying to eliminate. So, Mary, in closing, could you give us a recap, give us an overview of the Movement is Life mission, how we are approaching the elimination of disparities moving forward?

Dr. O'Connor So, Rolf, Movement is Life is committed to eliminating health disparities, particularly in the field of musculoskeletal care. And by that, I mean spine and joint and orthopedic conditions. We know that movement is the key to life. And I will just briefly walk our listeners through what we call our vicious cycle because it really paints the picture of how critical musculoskeletal health is to overall health and how disparities occur. So, when somebody has pain, for example, in their knee, they will stop moving. They'd lower their level of physical activity, which tends then to promote weight gain because they don't change their eating pattern. That weight gain puts more pressure on their knee, and you can see now there's a cycle. More pressure on the knee, more pain, less physical activity, more obesity, and that patient will end up developing knee arthritis that can be very disabling.

But that's not the only thing that happens because with that lack of physical activity in obesity comes the development of comorbid conditions such as heart disease, hypertension, diabetes, and depression. And so now we have an individual who's really sick with lots of chronic conditions that impact the quality of their life and require a lot of healthcare resources, which is where disparities in the delivery of care come in and disparities and biases both conscious and

unconscious in how that individual experiences healthcare. Now, that cycle, that vicious cycle can affect anyone. It can affect an affluent white male, but we know that women and individuals of color are more likely to get trapped in that cycle because around that medical vicious cycle are social determinants of health.

So, we know that lower-income individuals, I'll use the term disadvantaged individuals, are more likely to live in a neighborhood where there's a food desert. They don't have the same access to fresh fruit and vegetables at a reasonable cost. They may not be able to safely walk in their neighborhood. And surrounding those social determinants of health are public and private policies related to healthcare. And this is where we see policies such as bundled payments for joint replacement surgery, disproportionately disadvantaging individuals that are sicker. And we use the terms cherry picking of healthy patients and lemon dropping of less healthy patients. And the less healthy patients are those patients that have been impacted by the medical vicious cycle. They have more obesity, more comorbid conditions like diabetes, they're not moving, they have knee arthritis. And we know that those individuals are going to be overrepresented in rural America and in communities of color and by women. So, that's what we're about. We're about breaking that vicious cycle and impacting social determinants and policies and all the things that contribute to disparities that so tragically affect so many Americans.

Rolf: Thank you, Mary, and thank you, Millicent. Thank you both for a really insightful walk through some of the highlights of our upcoming Caucus, which is happening on November 10th and 11th. In a future episode, we're going to take a deep dive looking at the workshops, which are part of the Caucus. And if you can't attend the caucus, don't worry because we'll be featuring many of the speakers and workshop leaders in future episodes of the Health Disparities Podcast. So, thanks for listening and we'll see you next time.

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