



Arthur Ashe Institute for Urban Health

**IDEAS Film Distribution and
Public Education Plan**

ideas

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A M D U R S P I T Z & A S S O C I A T E S , I N C .



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“Education is the passport to the future, for tomorrow belongs to those who prepare for it today.”

-- Malcolm X

Executive Summary

The Arthur Ashe Institute for Urban Health seeks support for a proposed public education project that aims to broaden access into the medical professions for those who have been historically excluded. The working title for this project is ***Be The Cure.***

This project will pair medical professionals with middle-school classrooms to provide exposure to the variety of careers in health and medicine, as well as exposure to medical professionals of color, in the hope of encouraging students and their families to work towards these career pathways.

A key subtext of this project is the inspirational role that may be played by encounters with individual medical professionals. For young persons who do not typically meet African-American physicians or other professionals in their daily lives, this will be an organized and intentional way of creating new relationships designed to inspire, motivate and stimulate interest and enthusiasm.

Problem Statement:

Our country faces a crisis in health care. This crisis concerns not only access to care, but also the quality of care and of caregivers. Urgent measures are required in order to boost the numbers of persons of color and members of underrepresented groups in the allied health field, and particularly in the medical professions. Research has established that the presence of caregivers with strong cultural competency, caregivers of color, and caregivers who speak the language of the community they

serve will be more effective in understanding, treating and communicating with patients, and are far more likely to be sought out by patients. ⁱ

The shortage of health care professionals of color is no accident; it arose from a historic pattern of deliberate and systematic discrimination and exclusion. Only recently the American Medical Association has issued an apology for its part not only in excluding African-Americans from membership, but also in actually recommending the closing of most African-American medical schools.ⁱⁱ These acts of racial discrimination combined with the adverse educational conditions in urban and rural schools serving the majority of children of color in this country, have over time given rise to severe inequities that remain with us to this day. The shortage of African-American, Latino and Native American medical professionals affects both the quality of care and likelihood of care seeking by the public, particularly in these communities.ⁱⁱⁱ

There are of course a great many complex reasons for the inadequacy of medical care and this proposal cannot address all of them. Health care reform remains a priority issue on the national agenda. We have elected to take on one aspect of the problem; that of ensuring the future supply of health-care professionals from underrepresented communities, by a program of early exposure, role modeling, mentorship and collaboration among health care providers.

The systematic recruitment and retention of young persons of color will help to address long-standing injustices in the healthcare system. The proposed project aims to expose children as early as middle school to medical professionals to inspire, educate and encourage youth of color along the path to medical careers. The project will utilize the professionals to provide stimulating new ideas and experiences in their classrooms, through a series of on-site visits, presentations, conversations and activities. Because mentorship and role modeling are proven strategies that encourage minority youth to go into health professions,^{iv} these activities will form the nucleus of the project.

The term “mentor” is commonly used to describe a protracted, one-on-one advisory relationship between a senior and junior professional or between an individual learner and teacher. However, in this project description, the term “mentors” refers to the dual role of the African-American medical professionals, both as providers of educational enrichment, and as role models who may provide encouragement, and may embolden groups of youngsters to pursue careers as doctors, dentists or other health care providers. The medical professionals and their respective organizations will provide a form of group or collective mentorship to cohorts or classes of students.

Several professional organizations already have programs designed to encourage members of color to serve as mentors, working directly with middle and high school students. We will work with a combination of mainstream and culturally specific professional association partners, as well as with health education providers and higher education institutions specializing in the preparation of physicians and nurses of color. We seek to forge a unified, cooperative effort with such national organizations as the National Medical Association (NMA) and Student NMA, National Association of Medical Minority Educators (NAMME), Health Occupations Students of America (HOSA), The American Medical Association (AMA), Mentoring in Medicine, National Dental Association, and Student National Dental Association. Numerous other organizations of the professions, including general and culturally specific organizations and institutions may be enlisted to this effort. These include the American Academy for Medical Directors, the American Black Chiropractors Association, the Association of Black Cardiologists and the National Pediatric Medical Association, the American College of Obstetricians and Gynecologists, as well as other specialty associations, such as the Association of Black Nursing Faculty, the National Black Nurses Association, the National Dental Hygienists’ Association and the National Dental Assistants Association. Regional and local associations such as the Detroit-based National Center for the Advancement of Blacks in the Health Professions, the Houston Medical Forum, and others may prove to be valuable on-the-ground partners to this project. Smaller but quite active ethnic and faith-based organizations include the Islamic Medical Association, with chapters at major medical schools throughout the country, and the Brooklyn-based Association of Haitian Physicians Abroad, are not to be overlooked.



[The NMA began at a time when African-American physicians were excluded from membership in the AMA. The induction and retention of African-Americans into the field was one of the core objectives of the NMA and remains so today. This organization became the leader and the model for the array of professional and fraternal organizations that followed it.] The medical schools of the historically black colleges and universities (HBCU's) will also become an important resource in this effort.

To prepare health professionals to serve as effective mentors in public school classrooms, the Arthur Ashe Institute for Urban Health has developed IDEAS, a DVD that is organized into chapters that are used to trigger discussions, along with an intensive training program to equip health professionals with the tools to serve as effective mentors for early adolescents.

The proposed training of participating professionals will take place at the annual conferences of the professional associations. Arthur Ashe Institute for Urban Health will partner with local chapters of national organizations to further extend the reach of this training.

We aim to tie together a strong network of the national professional organizations, and of motivated, trained and connected health care workers of color to deliver content, relationships, and motivational experiences to students at an early point in their schooling. In its initial phase, we will focus on developing this project with the African-American medical associations and with public middle schools in Brooklyn in proximity to a major public medical school which is a rich source of medical students actively committed to working with youngsters.

While the professional organizations have some outreach programs in place, they do not presently provide a cohesive middle school curriculum, training for their volunteers, or assistance in coordinating logistics. To be fully effective, these organizations need support to facilitate relationships with public schools, and to manage a network for professionals involved in mentoring youth. The Arthur Ashe Institute for Urban Health proposes to partner with the health professional organizations and public schools to effect long-term and highly productive relationships and programs.



The proposed plan of work includes education for parents, raising community expectations and advocacy skills in order to improve opportunity for their children. The campaign of group mentoring and relationship-building will increase understanding on the part of educators, parents and community stakeholders on what is required in order to expand access to the health professions. The deliberate cultivation of a collaborative relationship between healthcare providers, educators and parents can yield a powerful nexus, creating an enduring set of relationships which nurture and support our young people through high school and on into higher education.

The ideas that propel the *Be the Cure* project forward are not reserved for the African-American population alone. After initial program development in the African-American community and the mobilization of its medical professional organizations in this effort, we will be strongly positioned to reach out to other communities of color; and to collaborate with potential host agencies in those communities to adapt the project to various Latino and Native American medical personnel and the great range of professional organizations of those communities. (Notable among these is the National Hispanic Medical Association, with nearly 40,000 licensed physicians in its ranks.) To that end, we will issue a request for proposals that invites partner agencies to adapt the model for use in Latino and Native American communities.

As the project develops we envision a series of conferences, parallel educational campaigns and recruitment programs in these communities, accompanied by culturally and linguistically appropriate teaching materials, in print, video and digital media.

To keep this initiative growing and vibrant, we will need to tap both public and private funding sources, governmental and nongovernmental, medical and lay civic organizations. As we grow the project, the need for support will expand. Therefore, we intend to retain fundraising professional and later a development specialist who will work with each chapter to help them identify local resources for their programs.

Sponsorship of training materials and training events will be secured from pharmaceutical companies, medical equipment suppliers and others who seek the goodwill and attention of medical professionals. Clearly, these essential roles and tasks must be in our work plan from the outset.

We claim no easy victories over the profound and knotty social problems this project seeks to address. *Be the Cure* will not solve the underlying social and economic injustice that has historically excluded people of color from the health professions.

What the proposed project can do is to provide an organized and supportive setting for health professionals, educators and community members to make a significant contribution to changing the odds for African-American youth and other under-represented groups in medicine. The project will yield model tools, materials, and educational programs which feature personal outreach and give each volunteer mentor a unique role, making use of his/her talents, experiences and individual stories as a way to reach out to young persons, their teachers and families.

It will create a set of materials including lesson plans and demonstration activities that can be adapted for use by other communities and organizations. And it will create a pre-conference training program that can be held in conjunction with any healthcare professional association conference. It will use new media to document the stories of students and professionals involved in the engagements, create exciting web-based forums for them to communicate, and amplify the program's messages to the community at large through the media. The training program itself will aid attracting and recruiting new mentors, recognize mentors for their service, and expose the professional majority to the inequities in the system and the efforts of their colleagues of color to right the way in the future.

Be The Cure will harness the enormous intellectual and social strengths of the professional and student organizations such as NMA and Mentoring in Medicine to make a concerted push at the neighborhood school level, on up to the policy level, to change the way our youth view themselves and how their schools view them. By inviting the leadership of each national organization to partner with us, AAIUH will stimulate an internal discussion and commitment to this process, as part and parcel of the broader national conversation about health care reform.

Every person of color who has a medical degree has, in addition to immense technical skill and knowledge, a compelling personal story to tell. This program will offer an organized context in which to share those stories and ideas in order to reverse the patterns of exclusion, discrimination and low expectations.

We cannot undo the harms of history without doing something big, different, and interactive. *Be the Cure* aims to unite some of the key organizations and institutional resources in our communities in order to change the future for our youth.

The proposed project is ambitious but grounded in reality. To succeed, it requires adequacy of resources, careful attention to the development of partnerships, and sufficient time to plan and to allow the relationships to solidify and for the school programs to take root. The Arthur Ashe Institute for Urban Health believes that this is an excellent use of our own experiences and resources, and is fully in line with the mission, purpose and spirit of our organization.