

**SOCIETY FOR THE ANALYSIS OF
AFRICAN AMERICAN PUBLIC HEALTH
ISSUES**



**“CRITICAL RACE THEORY AND
EMANCIPATORY PUBLIC HEALTH:
MOVING TOWARDS SOCIAL JUSTICE”**

**2010 ANNUAL MEETING
Hyatt Regency Centennial Ballroom H
November 6, 2010
Denver, CO**

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Dear Friends,

On behalf of the ***Society for the Analysis of African-American Public Health Issues (SAAPHI)***, welcome to our 2010 annual workshop and scientific symposium. We hope that you find this event informative, thought-provoking as well as an opportunity for networking and active collaboration across public health disciplines.

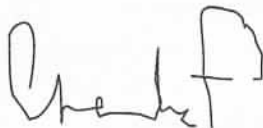
SAAPHI, a related organization of the American Public Health Association, is a national public health organization comprising researchers, physicians and health advocates dedicated to improving the overall health of African Americans. The organization promotes and utilizes scientific research to inform scientific knowledge, program development and policy decisions. In the United States, racial and ethnic disparities are evident in almost all measures of health and the root causes of these inequities are complex. The elimination of health disparities will require collaboration between science, practice, and policy. For almost two decades, SAAPHI members have been examining these issues.

The theme of SAAPHI's 2010 Annual Meeting is: "*Critical Race Theory and Emancipatory Public Health: Moving Towards Social Justice*". Critical Race Theory is an emerging transdisciplinary, race equity methodology that originated in legal studies and is grounded in social justice. Today's panel will introduce Critical Race Theory to the SAAPHI community, highlight key Critical Race Theory characteristics (race consciousness, emphasizes on contemporary societal dynamics and socially marginalized groups, and praxis between research and practice) and describe Critical Race Theory's contribution to studies on racism and health among African Americans.

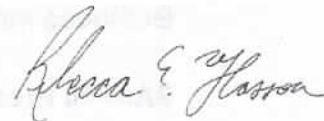
Please find in this program an agenda for today's event, as well as additional information about SAAPHI and its membership. More information can be obtained at our website: www.saaphi.org.

We would like to express our deepest appreciation for the support and inspiration of Dr. William C. Jenkins, the founder of SAAPHI along with other senior members of the organization. Finally we would like to thank you for participating in this year's event. Your continued participation, support as well as suggestions have made this event an annual success.

Sincerely,



Chandra L. Ford, Ph.D., MPH, MLIS
SAAPHI President, 2008-2010



Rebecca E. Hasson, Ph.D.
SAAPHI President-Elect, 2008-2010



Dorothy Stephens
SAAPHI Immediate Past-President, 2006-2008

2010 ANNUAL MEETING AGENDA

- 8:00-8:30 **Coffee**
- 8:30-8:35 **Welcome**
Chandra Ford, SAAPHI President
- 8:35-10:30 **“Critical Race Theory: What is it and how does it apply to public health”**
Moderator: Rebecca Hasson, SAAPHI President-Elect
- “Culture and Race: Where and When We Reentered”, **Collins Airhihenbuwa**, Pennsylvania State University
 - “The Public Health Critical Race Praxis: What it is and How to Apply it”, **Chandra Ford**, University of California Los Angeles
 - “How the History of Socioeconomic Status Influences Impoverished Race and Ethnicity Variables”, **Jay Pearson**, University of California San Francisco
- 10:30-10:45 **Break**
- 10:45-11:45 **Scientific Symposium**
Moderator: Valerie Rock, SAAPHI Scientific Review Committee
- “Diabetes Self-Management Education for African Americans: The LIFE Study”, **Elizabeth Lynch**, Rush University Medical Center
 - “Intersection of Neighborhood Socioeconomic Disadvantage, Race, and Sex with Alcohol Use and Associated Problems in a National Sample of U.S. Drinkers”, **Katherine Karriker-Jaffe**, Public Health Institute
 - “Risk Factors for the Prevalence of HIV/TB Coinfection Among Residents of Washington, DC, 1998-2008”, **Quynh Vo**, George Washington University
 - “An assessment of the association between Frequency of Thoughts of Race and Reports of Poor Mental Health”, **Shane Lloyd**, Brown University
- 11:45-12:00 **Presentation of Student Awards**
Jessie Richardson-Hood, SAAPHI Scientific Review Committee
- 12:00-1:00 **Lunch and book signing with Dr. Antronette Yancey, author of “Instant Recess: Building a Fit Nation 10 Minutes at a Time”**
- 1:00-2:45 **Business meeting**
- 2:45-3:00 **SAAPHI President’s Remarks and Rewards**
- 3:00 **Meeting Concludes**
- 3:00-5:00 *APHA candidate forum and policy meetings- on your own*
- 5:00-7:00 **Robert Wood Johnson Foundation New Connections Reception**
Centennial Ballroom A (RSVP required)

CRITICAL RACE THEORY PANELISTS

Chandra L. Ford, PhD, MPH, MLIS, is an Assistant Professor in the Department of Community Health Sciences in the UCLA School of Public Health. She earned her doctorate from the Gillings School of Public Health at the University of North Carolina. Prior to joining UCLA, Dr. Ford completed postdoctoral fellowships in Social Medicine (University of North Carolina) and Epidemiology (Columbia University), where she was a W. K. Kellogg Foundation Kellogg Health Scholar. Dr. Ford's research examines ways that racism and other societal inequities contribute to health inequities. Specific areas of expertise include social determinants of HIV/AIDS inequities, Critical Race Theory and sexual minority health. Her research, which strives to make both conceptual and empirical contributions to the field, has been published in the *American Journal of Public Health*, the *Annals of Epidemiology*, *Social Science & Medicine* and other refereed journals.

Collins O. Airhihenbuwa, PhD, MPH, is a Professor and Head, Department of Biobehavioral health, the Pennsylvania State University. He has been a consultant to WHO, UNAIDS, UNESCO, UNFPA and other international agencies. He is the author of the PEN-3 model used to centralize culture in public health and health promotion projects. He has published numerous articles, book chapters, and books. His books include *Health and Culture: Beyond the Western Paradigm*; the UNAIDS Communications Framework for HIV/AIDS: A New Direction; and his 2007 book entitled *Healing Our Differences: the Crisis of Global Health and the Politics of Identity* by Roman and Littlefield. He was the Principle Investigator on a 5 year (2004 – 2009) NIMH grant on Capacity Building for research on HIV/AIDS stigma in South Africa. He is also the PI on a 5 year (2006 – 2011) Fogarty/NIH global health and georesource grant to address public health training and capacity building in Nigeria. Racism and race has been central to his work on culture as evident in chapters in his books. He also has co-authored two articles with Chandra Ford on Critical Race Theory and Public Health.

Jay Pearson, Ph.D., received his doctorate in Health Behavior and Health Education from the University of Michigan. He holds a BS in Community Health Education from North Carolina Central University and an MPH in Health Behavior and Health Education from The University of North Carolina Chapel Hill. His research interests include examining the development of socio-economic status as a research construct, the conceptualization and measurement of race and ethnicity variables with an emphasis on ethnic heterogeneity within assumed homogenous racial categories, nativity/immigration/trans-nationalism and the health effects of social discrimination, high effort coping, alternative social-cultural orientations and related resource networks.

CRITICAL RACE THEORY (CRT) AND PUBLIC HEALTH: A BIBLIOGRAPHY

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TARGETING TENETS OF CRT

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SAAPHI SCIENTIFIC SYMPOSIUM PRESENTATION ABSTRACTS

Diabetes Self-management Education for African Americans: The LIFE Study. Elizabeth B. Lynch, Rebecca Liebman, and Jennifer Ventrelle Chicago, IL

Objective: To determine the effect of a culturally-competent self-management intervention in African Americans with co-morbid diabetes and hypertension. **Methods:** A randomized controlled trial was conducted with 59 low-income African American adults with type 2 diabetes and hypertension. Participants were randomized to an intensive intervention or control group. The intensive intervention, targeting diet, activity, and self-monitoring of blood glucose, consisted of 12 weekly and six bi-weekly group sessions led by a dietitian and 2 peer supporters and weekly phone calls from peer supporters. Control group participants received 6 hours of diabetes self-management education from a community health worker. Hemoglobin A1c (HbA1c) and weight were measured at baseline, 3 months, and 6 months. **Results:** The overall retention rate was 90%. A greater proportion of intervention than control participants reduced HbA1c by $\geq 0.5\%$ at three months (I: 48%, C: 14%, $p < 0.01$) and six months (I: 52%, C: 22%, $p < 0.05$). Change in mean HbA1c at 6 months was 0.06% in the control group and -0.53% in the intervention group, for a difference of 0.6% between groups ($p = 0.09$). A greater proportion of intervention participants lost $\geq 5\%$ of body weight at three months (I: 32%, C: 7%, $p = 0.02$) but not at six months (I: 28%, C: 25%, $p = 0.80$). Change in weight at 6 months was -3.24 kg in the intervention group and -1.1 kg in the control group, for a net difference of 2.2 kg ($p = 0.09$). **Conclusion:** The intervention resulted in improved glycemic control and weight in low income African Americans with co-morbid diabetes and hypertension.

Intersection of neighborhood socioeconomic disadvantage, race and sex with alcohol use and associated problems in a national sample of U.S. drinkers. K.J. Karriker-Jaffe, S.E. Zemore, N. Mulia, & J. Bond. Alcohol Research Group, Public Health Institute, Emeryville, CA

Objective: Prior research suggests negative consequences of alcohol use are more common in disadvantaged neighborhoods, particularly for African American men. To replicate this work with recent data on additional alcohol outcomes and for women, we tested joint contributions of neighborhood socioeconomic disadvantage, race and sex to alcohol use and associated problems. **Methods:** Data from the 2000 and 2005 National Alcohol Surveys (N = 7,324 drinkers) on light and heavy drinking, drunkenness, negative consequences and dependence were linked with US Census data on neighborhood disadvantage ($\alpha = .90$). Overall and sex-stratified regression analyses adjusted for individual SES and other sociodemographics. **Results:** Race modified relationships between neighborhood disadvantage and all outcomes; some associations varied further by sex. Simple slopes by race showed neighborhood disadvantage was significantly associated with (1) higher odds of consequences for Whites and African Americans, with stronger effects for women than men; (2) higher odds of dependence for White women only; (3) more heavy drinking for African American men, but less heavy drinking and less drunkenness for White men; (4) less light drinking for White women only; and (5) no effects for Hispanics. **Conclusions:** In contrast to prior studies, the most consistent evidence of deleterious effects of neighborhood disadvantage was seen among Whites, particularly for women. However, findings also support an alternate hypothesis that higher neighborhood SES may be associated with greater alcohol use by Whites. The overall pattern of results raises questions about measurement of neighborhood disadvantage for African Americans and Hispanics.

Risk factors for the prevalence of HIV/TB Coinfection among residents of Washington, DC, 1998-2008. Quynh Vo, Rowena Samala, Tiffany West, Kim Seechuk, Amanda Castel. George Washington University

Purpose/Objective: The prevalence of HIV/AIDS is 3% in Washington, DC. Additionally, the high proportion of tuberculosis (TB) cases among both U.S.-born blacks and foreign-born residents (38.9% and 51.9%, respectively) places District residents at increased risk for HIV/TB co-infection. Through a match investigation, this cross-sectional study examined risk factors among HIV/TB co-infected individuals in the District. **Methods:** HIV/TB co-infected District residents reported from 1998-2008 to DC's Enhanced AIDS Reporting System (eHARS) were matched to those reported to DC's TB Information Management System (TIMS) using algorithmic programs in SAS version 9.1. Matched cases were reviewed, prevalence odds ratios (POR) calculated, and logistic regression and survival analyses were conducted to examine risk factors for co-infection. **Results:** Matching yielded 127 matches between the two registries. Among matched cases, 22 (17.3%) cases found in eHARS were not reported in TIMS and 64 (50.4%) cases found in TIMS were not reported in eHARS. Among persons with HIV/AIDS, blacks (POR=4.7; 95%CI, 1.1, 19.3), foreign-born persons (POR=7.5; 95%CI, 4.6, 12.4), and persons reporting CD4 counts less than 350 cells/mL at the time of HIV/AIDS diagnosis (POR=3.1; 95%CI, 1.8, 5.5) had the highest odds of HIV/TB coinfection. **Conclusions:** Although the rate of TB infection has been declining in the U.S., TB remains a significant co-morbidity among HIV-infected persons. In the District, the distribution of HIV/TB coinfections among blacks and foreign born persons illustrates continued racial and ethnic disparity. Collaborative reporting of both HIV and TB has the potential to improve understanding of the risk factors for both diseases.

An assessment of the association between frequency of thoughts of race and reports of poor mental health. Shane Lloyd, Annie Gjelsvik, Deborah Pearlman, Brown University Program in Public Health

Purpose: In 2002, Dr. Camara P. Jones of the Center for Disease Control and Prevention, created the Reaction to Race module in order to measure how differential treatment of race relate to health. American racism has resulted in increased levels of poverty, poorer access to health care and higher numbers of mortality for many racial/ethnic minorities. To date, there has been little investigation to determine the effects of racial oppression on mental health. The purpose of this study is to assess the association between increased thoughts of race and reported mental health status. **Methods:** Data from the 2008 Behavioral Risk Factor Surveillance System was used to assess the relationship between frequency of thoughts of race and reports of poor mental health. The comparisons of the outcome of interest were adjusted for self-reported race and emotional support using logistic regression models. **Results:** Eighty-five percent of adults who never/rarely had thoughts of race were White. Individuals who often had thoughts of race have 1.55 odds (95% CI 1.19-1.99) of reporting poor mental health than adults who never/rarely had thoughts of race after adjusting for race and emotional support. **Conclusion:** Adults who think of race often are more likely to report poorer mental health status compared to adults who do not think of race often even after controlling for race.

MEET THE 2010-2012 SAAPHI EXECUTIVE BOARD OF DIRECTORS NOMINEES

Ndidiamaka Amutah-Hardrick is a PhD candidate in Public Health with a focus on Maternal and Child Health at the University of Maryland, College Park School of Public Health. Ndidi has a long standing commitment to public health that span over 10 years of Public Health experience. Her current research interests include health disparities, reproductive health, infant mortality and HIV/AIDS in ethnic minority populations. Ndidi is a member of the American Public Health Association and is currently a senior student fellow for the Maternal and Child Health section. She has been a member of APHA for 7 years, and is new to SAAPHI. Her vision for SAAPHI include assisting in the development and maintenance of databases for African American communities with regards to different health problems such as infant mortality, quality of life indicators, and health disparities. Additionally, she is interested in professional development and the advancement of her research and leadership skills. Her dissertation focuses on infant mortality in Washington, DC and it specifically examines neighborhood level poverty, multiple determinants of health, and access to prenatal care as predictors of infant mortality. In the fall of 2010 she will be a Kellogg Health Scholar at Morgan State University. The Kellogg Health Scholars Program — Community Track (KHSP-CT), a two-year post-doctorate based upon the Community Health Scholars Program, highlights community-based participatory research (CBPR) and relationships between academe, community, policy, and public health practice. Each Scholar in the KHSP-CT is placed at one of four training sites and engages in CBPR and a variety of educational experiences with academic and community mentors possessing expertise in community-based public health. Each of the four sites, Johns Hopkins University Bloomberg School of Public Health, Morgan State University School of Community Health and Policy, the University of Michigan School of Public Health, and the University of North Carolina at Chapel Hill Gillings School of Global Public Health, has faculty and community resources with expertise in CBPR and teaching, and each has a variety of long-term community partnerships and projects which can provide the setting for Scholars' research projects. Over the course of the fellowship, Scholars build skills in working with communities in translating the findings of CBPR into policy.

Cristian Chandler is a master's student at the University of South Florida College of Public Health in the department of Community and Family Health. He has been a peer wellness educator for four years in USF Wellness as well as the Safe Zone Ally program coordinator for two years. Chandler is a member of the American Public Health Association, Association for Teaching Prevention and Research and the Society for the Analysis of African-American Public Health Issues. Also, Chandler has presented his research about LGBT health disparities, LGBT health disparities among people of color, and equitable health care for LGBT persons at national and international conference including the Society for Public Health Education Mid-year Conference, the National African American MSM Leadership Conference on HIV/AIDS and other Health Disparities and the Third Annual International Queer Colloquium *¿Del Otro L'ao?*. Christian looks forward to being able to discuss and make significant changes in the ways in which African Americans view sexuality and sexual identity. Christian also looks to assist SAAPHI in creating a place where there is a concentration on education specific to African Americans and a focus on the praxis of what must be accomplished to reduce health disparities.

Elizabeth Dawes recently completed a Master of Public Health degree at the George Washington University. She concentrated in Health Policy and intends to develop policies that promote health equity by addressing the social, political, environmental, and economic factors that adversely impact health - particularly in minority populations. Her relevant coursework includes Minority Health Policy and Minority Women's Health. Within SAAPHI's mission, Elizabeth hopes to increase the use of scientific evidence in policy development and advocate for effective public policies and interventions. She is new to both SAAPHI and APHA.

Okey Enyia is a second-year medical student at Southern Illinois University School of Medicine. He currently serves on the Health Policy and Legislative Affairs Committee for the Student National Medical Association. In addition to the medical degree, Okey is also looking to attain degrees in public health and business with concentrations in health policy and administration. While it is still early in his medical career, he is considering cardiology as a sub-specialty. Seeing patients will also afford him the opportunity to inform policy and effect long-lasting, positive change, particularly as it relates to the underserved and underrepresented. Okey has been a SAAPHI member for 2 years and served on the Executive Board of Directors. His vision for SAAPHI is to develop and implement diversity and cultural sensitivity training into the curricula for medical schools and throughout the public health educational system. Because a patient of color is more likely to provide critical information to a health care provider who shares a similar background and cultural experience, it stands to reason that every effort should be made to recruit and retain health care providers who reflect the patient population and train majority doctors working in underserved communities. Every effort must be made to level the playing field and minimize adverse health outcomes that lead to health inequities.

Haroun Habib earned a Masters in Public Health, with a concentration in International Health, from the Boston University School of Public Health in 2007. Haroun is currently working as an Analyst at the Association for State and Territorial Health Officials (ASTHO) on their Public Health Preparedness team and serves on their Health Equity workgroup. Haroun is an emerging leader with a passion for global public health, social issues and fostering coalitions that empower others to improve their lives. As a public health professional, he has experience in a diverse range of health policy issues on the local, state and national level, from HIV/AIDS, to health disparities and minority health, to injury prevention and control, to refugee health and human rights. Haroun has served in numerous leadership positions and played various roles in serving a community from helping with research projects in vulnerable populations, volunteering in homeless shelters, handling the administration of a free health clinic for the uninsured and underserved, and educating youth about HIV/AIDS. Specifically, he has served on several boards and non-profit organizations, such as the Long Branch Athletic Association, Lesole's Dance Project and the American Public Health Association Student Assembly. In his various capacities for these organizations as Marketing and Communications Committee Chair, Treasurer and Development Committee Chair, he has written grants, and worked on several fundraising and marketing initiatives. Specifically, while serving as Treasurer and Development Committee Chair for the American Public Health Association Student Assembly (APHA-SA), he wrote grants to many organizations, including the CDC, helping to raise more than \$20,000 toward APHA-SA projects.

Rian Melissa Hasson received her M.D. from the University of Southern California. She is currently a PGY-2 General Surgery Resident at Brigham and Women's Hospital in Boston, Massachusetts. Dr. Hasson is currently an NIH funded Post-Doctoral research fellow at Brigham and Women's Hospital and the Dana Farber Cancer Institute in Alimentary Tract Surgery. She is a new member to SAAPHI but has served in leadership positions in other minority health interest groups including the Student National Medical Association for the past 6 years. Her vision for SAAPHI includes working to equalize the quality of surgical care, specifically in the field of surgical oncology to African-American populations. She also strives to create innovative treatment protocols through research specifically targeted to African-American populations in the fields of hepatopancreaticobilliary and gastrointestinal oncology.

Falil Oritola received his bachelor's degree in Human Development from the University of Texas at Austin, and is currently obtaining his Master's in Public Health degree at the University of North Texas Health

Science Center. Falil recently became a member of SAAPHI, and his vision for SAAPHI is to bring more awareness to health equity issues and help the organization gain more notoriety in activities which fulfill its mission statement.

Candace Sibley is a Master's of Science in Public Health Student and Research Associate in the Departments of Community and Family Health and Community and Behavioral Sciences at the University of South Florida, who performs research on HIV/STI prevention in the porn community and mental health in children and families. She has been a proud member of APHA for 4 years, and is looking forward to becoming a SAAPHI member this year. She also serves on the student assembly board as nominations chair. She hopes to bring her skill in social marketing to improve recruitment and member engagement in SAAPHI, create exciting campaigns that work to improve health behaviors among African Americans, and promote SAAPHI through multiple social media platforms(Blogs, You tube, and Twitter). Lastly, Candace hopes to promote collaboration with SAAPHI and the organizations (Society of Applied Anthropology, Society for Medical Anthropology, American Evaluation Association, and National Association of Ethnic Studies) she is member of to channel the talents and strengths of individuals from multiple disciplines and vantage points to promote prevention and improve the current health status and lives of African Americans.

Dorothy E. Stephens is a Senior Health Insurance Specialist (Commissioned Officer 0-6) for the Survey, Certification and Enforcement Branch for the Centers for Medicare and Medicare Services. Ms. Stephens has been an active member of SAAPHI for the past 6 years and is currently the Immediate Past-President for the organization. Dorothy plans to continue her involvement with SAAPHI as a Board member working to develop SAAPHI-initiated policy statements for APHA.

Hanna Tesfasyone graduated from Johns Hopkins University with a Masters in Public Health in May 2008. Her curriculum focused on understanding the impact of social, cultural, political, and economic conditions have on minorities healthcare needs. Her thesis focused on developing culturally appropriate women, infant and children sponsored Obesity Prevention Programs for African American population. Prior to Graduate School, Hanna worked for three years conducting clinical research, seeking to improve the quality of life for African American Lupus Patients and enhancing her research and analytical skills at Johns Hopkins School of Medicine. After obtaining her master's degree, Hanna landed a position Science Applications International Corporation. The position has allowed her to translate research into practice by assisting with the development of Clinical Guidelines to prevent obesity, type II diabetes, and heart disease in minority populations. Hanna's academic and work experience will be an asset in assisting with the development of policies that are based on sound scientific evidence.

DON'T MISS OTHER SAAPHI MEMBER PRESENTATIONS DURING THE 2010 APHA MEETING!

Opening General Session, Sunday, November 7, 2010 from 12:00 noon to 2:00 pm at the Colorado Convention Center. **Dr. William Carter Jenkins** will share his insights on race, class and social justice and its effect on public health in America. Dr. Jenkins has devoted himself for nearly four decades to the twin



causes of eliminating racial/ethnic health disparities and expanding opportunities for racial/ethnic minorities to enter and succeed in careers in biostatistics and epidemiology. Currently working with the University of North Carolina Institute of African American Research and as co-director of the Minority Health Project, Dr. Jenkins previously worked for 30 years at the Centers for Disease Control and Prevention in Atlanta, where he helped to end the infamous Tuskegee Study of Untreated Syphilis in the Negro Male and to establish numerous initiatives to improve public health, especially for African Americans, American Indians, and others. During his long career, Dr. Jenkins has been instrumental in founding the Institute for African American Health; establishing Project IMHOTEP; the Public Health Sciences Institute at Morehouse College; the **Society for Analysis of African American Public Health Issues**; and the Master of Public Health program at Morehouse College, the first such program at a historically black institution.

Session 2043.0, Sunday, November 7, 2010 at 2:30pm

Session Title: Individual, social, and community aspects of women's health across the lifespan, "Perceptions of breast cancer screening age among young women in generation Y" (Poster 8)

Camonia Long, Ph.D., CHES

Session 2019.0, Sunday, November 7, 2010 at 2:30pm

Session Title: "Missed Prevention Opportunities in Foreign-born and US-born HIV-infected Black Mothers and their infants, United States, 1995-2004" (Poster)

Ranell Myles, MPH, CHES

Session 3126.0, Monday, November 8, 2010 at 10:30am

"Anal intercourse and HIV risk among heterosexual women in Chicago "

Britt Livak, MPH

Session 3160.0, Monday, November 8, 2010 at 12:30pm

Session Title: "Academic Boot Camp (ABC): Step one to developing community members as faculty"

Pluscedia Williams and Loretta Jones

Session 3295.0, Monday, November 8, 2010 at 2:50pm

Session Title: "Skin to Skin: Linguistic analysis of Barebacking MSM in Florida on Craigslist"

Candace Sibley, CRCS, and Cristian Chandler

Session 5019.0, Wednesday, November 10, 2010 at 8:30am

Session Title: "Breast is Best - A breastfeeding intervention program for young minority mothers" (Poster 7)

Mina Rasheed, MPH, Lailaa Ragins, MPH, Ayanna Robinson, MPH and DeBran Jacobs, MPH

Session 5118.0, Wednesday November 10, 2010 at 10:30am

Session title: "Strengthening Maternal and Child Health Services: A Starting Point for Social Justice"

Cynthia Salter, MPH, Irene Frederick, MD and Dara Mendez, MPH, PhD

GET CONNECTED, GET INVOLVED WITH SAAPHI!

Become a SAAPHI Member

Fill out membership application and send dues to SAAPHI treasurer (regular membership \$20, student membership \$10).

Make dues check payable to SAAPHI and send to:

SAAPHI
c/o Dr. Cheryl B. Prince
P.O. Box 360350
Decatur, Georgia 30036

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Add your input at during our monthly conference calls

Monthly conference calls are held on the 4th Friday of each month, except November and December, when it is held the 3rd Friday due to the holidays.

To participate in the call: Dial: 1-218-844-3366 Participant Access Code: 10926741#

Dates are listed below:

Friday, November 19, 2010*
Friday, December 17, 2010*
Friday, January 28, 2011
Friday, February 25, 2011
Friday, March 25, 2011
Friday, April 22, 2011
Friday, May 27, 2011
Friday, June 24, 2011
Friday, July 22, 2011
Friday, August 26, 2011
Friday, September 23, 2011
Friday, October 28, 2011

*NOTE: Special meeting date to accommodate holidays

Time: 2:00 – 3:00 p.m. Eastern

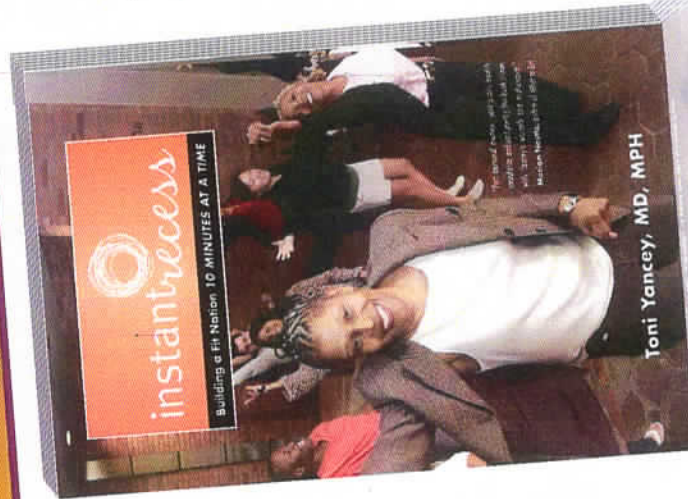
A. Toni YANCEY MD MPH

www.ToniYancey.com

Appearance:
Instant Recess reading
and book signing

When:
Saturday, November 6, 2010
Noon-1 pm

Where:
Centennial Ballroom H
Hyatt Regency
650 15th Street
Denver, Colorado 80202



INSTANT RECESS BOOK

This lively, inspiring, and informative book zeroes in on the state of American fitness—persistently sedentary, plagued by obesity—and issues a clarion call to action that reaches across economic, racial, and educational lines.

Toni Yancey finds that despite our best intentions and repeated resolutions to exercise, as well as a 40-year investment in fitness education and counseling, physical activity in all levels of society continues to plummet. In a warm, reader-friendly narrative that draws on solid scientific research, personal experience, and her own poetry, Yancey calls for a radically different approach: one that respects diversity and is grounded in the cultures of those most at risk.

Instant Recess proposes regular ten-minute exercise breaks that utilize music and dance and are easily incorporated into school, work, and community life. Rather than encouraging unhealthy habits like cigarette breaks or high fat snacks, these “instant recesses” make the active choice the natural one. Here is a new paradigm for fitness and public health that promises vitality, well being, and a greater sense of community—demonstrating, as Yancey argues, that **what's good for the waistline is good for the bottom line!**

- University of California Press

“A very clear, readable and enjoyable book, Instant Recess could get America moving again.”

- David Satcher, MD, PhD, 16th US Surgeon General

“Dr. Yancey provides the tools to get America moving, in a very accessible style with the scientific research to back it up.”

- Senator Tom Harkin (D-IA), Chairman, Senate HELP Committee

“Instant Recess can work equally well in the corporate boardroom, school classroom, or for fans at a sporting event.”

- Dave Winfield, Baseball Hall of Famer and ESPN commentator