

REDUCING HEALTH DISPARITIES AND POOR MEN: *INTERVENTIONS THAT WORK*

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WHY MEN'S HEALTH?

The health status of men and especially poor men of color in the United States is alarming. Poor minority men experience significant disparities in health status as demonstrated by higher rates of morbidity and mortality.^{1,2,3} Multiple factors are associated with these differences including, low socioeconomic status (SES), low educational attainment, precarious employment, and cultural norms and practices, to name a few.^{4,5,6,7}

Disparities in health status are exacerbated by decreased access to health care services. And, lack of health insurance is a primary factor preventing poor men of color from accessing services that could contribute to enhanced health status.^{8,9} More persons without health insurance consider themselves to be in poor or fair health than those with health coverage.¹⁰

Adult men of color have higher rates of uninsurance as compared to their White counterparts. In fact, 46 percent of Latinos and 28 percent of African American men in the US were uninsured, in contrast to 17 percent of White men.¹¹ Additionally, 73 percent of working adult Hispanic and 59 percent of African American men with annual incomes less than 100 percent of the federal poverty level (FPL) were uninsured.¹²

Only a few, limited, options of publicly funded health coverage are available to men. For example, Medicaid only provides coverage to men in cases of disability, or to those serving as a custodial parent.¹³

Consequently, poor men of color receive little-to-no primary health care; they are dying faster than women and white men^{14,15} and when they do get some medical attention, it is far too often in prison.^{16,17}

COMMUNITY VOICES

In 1998 the W.K. Kellogg Foundation invested \$55 million dollars across 13 communities in the United States to improve access to health care for the uninsured and underserved. The Foundation sought to create a community driven process of improved health care access based on the development of best practices and public policies. The initiative known as Community Voices: Health Care for the Underserved continues to work toward these solutions, based now at its headquarters at the National Center for Primary Care at the Morehouse School of Medicine. Much insight has been gained, programs tested, best practices developed, and policies affected throughout the years by the unique learning laboratories and the Initiative as a whole.

One of the key service and policy target areas in which the Community Voices initiative has been working since its inception, is men's health. Initially funding the country's first Men's Health Clinic in Baltimore, Maryland, the work in this area has continued to grow and expand across other sites in the country. Community Voices sites are working, increasingly, to raise awareness of the importance of men's health as it impacts public health of communities. We share some of the lessons learned by Community Voices sites which have been active in this endeavor.

COMMUNITY VOICES MEN'S HEALTH BEST PRACTICES

Baltimore Men's Health Center

The Men's Health Center focuses on primary care and prevention with an emphasis on case management and the integration of specialty services, and linkage to social services. Nearly 8,000 men have called the Men's Health Center their medical home since 2000.

The Men's Health Center seeks to build strong links

between jail and community health services. Despite the competing needs they face, clients newly released from prison sought care at the same rate as the general patient population.¹⁸ These findings reveal that receiving primary health care is a part of community re-entry for many men. For more information, contact Shani Fleming at Shani.Fleming@baltimorecity.gov.

Denver Men's Health Initiative

The goal for Denver Health's Men's Health Initiative is to increase access and affordability, reduce disparity and improve seamlessness of healthcare to underserved men in Denver. Two Community Health Workers conduct outreach and provide basic care management to men in the community and in the City and County jail. Over 5,000 men have received services from the Men's Health Initiative since 2002.

The Men's Health Initiative has demonstrated a return on investment.¹⁹ The initiative has increased access to primary and specialty care for underserved men, while also helping men use safety net services more appropriately. Inpatient, urgent care and behavioral health visits decreased for men participating in the program. For more information, contact Liz Whitley, Ph.D., at lwhitley@dhha.org.

Miami Overtown Men's Health Study

To learn why preventive health care remains elusive for many men in Overtown despite the neighborhood's proximity to the nation's largest public hospital and the county's key safety net provider, Community Voices Miami engaged men directly. The Overtown Men's Health Study provided an opportunity to pose some questions about experience, behaviors, and attitudes to the neighborhood's adult male population.

The study has proven to be a first step toward quantifying the relevance of social, political, and economic realities in the neighborhood to residents' experience. The findings are being used as a tool to inspire discussion and action among adult male residents of Overtown. For more information, contact April Young, Ph.D., at ayoung@collinscenter.org.

North Carolina's Men's Health Report Card

FirstHealth of the Carolinas' Community Voices created a Men's health report card for the purpose of increasing awareness among policy makers, public health officials, providers, media and the general public regarding health disparities that exist for North Carolina men. The methodology used was adopted from the North Carolina's Women's Health report card.

Significant health disparities were revealed, such as, when compared to U.S. men, North Carolina men have higher rates of mortality related to stroke, prostate cancer, lung cancer and respiratory disease. For more information, contact Barbara Bennett at bbennet@firsthealth.org

Endnotes

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