



# **BUFFALO CENTER FOR HEALTH EQUITY**

**Building a Culture of Health & Ending  
African American Health Disparities**

**2019 REPORT**

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## Building Momentum

Dear Friend,

Once again I found myself counseling another family as their loved one came to the end of their earthly journey. As a pastor it is my calling to provide comfort and care for families as those close to them encounter the reality of mortality. This can be a time of great sadness but also a time of great joy, when it is a long life filled with memories longevity can bring. However, the tone is entirely different when it is a family facing a life cut too short because of premature death caused by chronic disease. Sadly, this reality occurs all too often in the African-American community in our region.

The truth is, African-Americans residing in their own communities within the City of Good Neighbors are more susceptible to chronic disease causing 10-12 lost years of life. I truly believe, out of despair, there is always hope. Hope realized comes through the efforts of people of good faith who are willing to come together to help those who need it the most. The African-American Health Equity Task Force was birthed to identify why there are such distinct race-based health disparities in our region. In addition the task force resolved to create a path forward to eliminate these health disparities. First, we knew we had to change the narrative that African-Americans are so sick because of poor lifestyle choices. We needed to enlighten the broader community: poor health outcomes for African-Americans are driven by the social determinants of health. As long as we have inequality in education, wealth, housing, criminal justice and access to prosperity, this community will always have poor health outcomes.

The African-American Health Equity Task Force is a growing group of concerned citizens who have come together across, racial, professional and educational backgrounds to invest our gifts in bringing change. This report documents the work we have done, the bridges we have built and our vision moving forward. Thank you for taking the time to read this document as we look forward to you joining us as we take up this righteous cause to bring health equity to our region. WNY will truly be in a season of revival and renaissance when all members of our community can equally enjoy a quality of life free from the prevalence of debilitating disease and premature death. This hope will become a reality as we all work together to bring health equity for all in our region.

Peace,



Pastor George F. Nicholas  
Convener, African-American Health Equity Task Force



## Background

### The African American Health Equity Task Force

**Who we are:** The African American Health Equity Task Force will eliminate race, economic, and geographic-based health inequities among African Americans in Western New York by changing the social and economic conditions that cause illness and shorten lives.

The African American Health Equity Task Force will use policy analysis, research, assessment, and evaluation, advocacy, community engagement and education, and program development and implementation to eliminate African American health inequities in Western New York. It will work collaboratively with community members and organizations as well as the public and faith-based sectors to advance this multi-level agenda.

**What we do:** The goal of the African American Health Equity Task Force is to eliminate health inequities primarily in the 14204, 14206, 14211, 14212, 14215 zip codes where African Americans are dying at

**“Citizens of Erie County should not have their life expectancy determined by ZIP code.”**

Buffalo News Editorial, *A force for good*, October 5, 2019

three times the rate as their white counterparts. The health inequities affecting African Americans in Buffalo, like in many American cities are the downstream effect of failing schools, high unemployment, low property values, poor access to public transportation, absence of grocery stores, lead contamination in homes, highway pollution, brownfields, and poor access to healthcare. These social and economic conditions are known to be the primary drivers of health.

### We’re Making Progress

The Task Force has worked diligently to meet several goals since the 2018 Igniting Hope Conference. We would like to share our progress in the areas we reported on last spring, 2018.

#### ***The Buffalo Center for Health Equity has been established.***

Our mission remains the same, to be the epicenter for research, community engagement, policy development, advocacy and neighborhood development, as well as programmatic initiatives that empower the community to achieve goals of ending health disparities in African American communities. Specifically, [Erie County Medical Center has provided \\$372,000 in funds to establish the Center](#). See page 9 for more information.

The African American Health Equity Task Force continued to grow in membership and scope of work over the last year. Task Force membership is listed in a following section of this report. With the in-kind commitments of many of the members of the Task Force, we have been able to solidify plans to open a brick and mortar office space at 60 Hedley Place that will serve as a home-base location for the newly established Buffalo Center for Health Equity. The Task Force is also in active pursuit of nonprofit status for the Buffalo Center for Health Equity, which will further our ability to seek partnerships, engage the community, and advocate for the policies and practices that must change in order for Buffalo residents to experience better health outcomes.

## Racial and Ethnic Approaches to Community Health (REACH) Grant Awarded

The Task Force and Cicitelli Associates Inc. (“CAI”), a mission-driven nonprofit dedicated to improving the quality of health care and social services delivered to vulnerable populations worldwide, have received a \$790,000 grant from the Centers for Disease Control and Prevention (CDC) to improve health outcomes and reduce high rates of chronic disease among African Americans living along Ferry Street in Buffalo. The five-year initiative will focus on the promotion of tobacco-free living, improved nutrition and community support for breastfeeding, and increased access to health care. For more information, continue reading in [UB Now](#).



## Creation of the University at Buffalo Community Health Equity Research Institute

We are working with our partners at the University at Buffalo, to help the university create the [UB Community Health Equity Research Institute](#) in response to this health disparity crisis with a goal to perform research to advance understanding of the root causes and develop and test innovative solutions to eliminate health inequities in the region. The UB Institute is founded on the principles of community-based participatory research (CBPR), an approach that engages the community as true partners in research, including driving the research agenda, participating in the design and conduct of research and benefiting from the results.

Because health disparities research spans multiple disciplines and schools, no single decanal unit includes a critical mass of faculty to form the multidisciplinary research teams that will be required to perform state-of-the-art science and successfully compete for major funding. The Institute will include faculty from at least nine UB

schools and focus on three important goals. It will 1) facilitate multidisciplinary collaborations and provide expertise and support in designing and winning extramural funding from diverse funding sources; 2) partner with UB schools to

develop training programs in the relatively new area of health disparities research; and 3) partner with the community to develop and implement approaches to solving the problem of health disparities, informed by the results of our research. The Institute’s sustainability plan relies on winning funding from diverse sources by multiple groups. The work of the Institute will be highly responsive to NIH funding priorities, university goals and the needs of the Buffalo community.

**“For too long, African American communities in Buffalo and elsewhere have endured the consequences of health disparities. The University at Buffalo and its partners are committed to reversing this trend and helping to ensure that race is no longer a predictive factor in someone’s overall health and life expectancy,” said Michael Cain, MD, Vice President for Health Sciences and Dean of the Jacobs School.**

***We will give the community the language to explain health disparities through the lens of social determinants as opposed to only “behavior” as a strategy for narrative change.***

Not only does work on the CDC R.E.A.C.H. award, a partnership with HOPE Buffalo, continue to address the health of community members along the Ferry St. corridor, but the Task Force has been an

important contributor to elevating the awareness of health disparities for African Americans in Buffalo across various community efforts. Many of the Task Force members have been asked to serve on steering or strategic planning committees, advisory boards, and other councils where they can provide education and training on these topics to be included across health agendas in Buffalo.

***Creating space for community conversations around social determinants.***

On February 28<sup>th</sup> the Task Force held the 2019 Reimagining Forum: Health, Education, Social Justice at the Buffalo Academy for Visual and Performing Arts. It was a community forum on the health impacts of exploitative ticketing and avoidable school suspensions of African Americans living in Buffalo. The event featured presentations from Shaun Nelms, Ed.D, Associate Professor, Warner School of Education, University of Rochester and Joanna Weiss, JD Co-Director, The Fines and Fees Justice Center. As a result of the forum, the Task Force participated in significant efforts on [the Fair Fines and Fees Coalition](#) that has resulted in a bill passed in the NY State Senate and awaits a vote in the Assembly to create more equitable policies for paying driving tickets and avoiding license suspensions.

The Task Force partnered with AARP to initiate these conversations with communities of older adults living on the east and west sides of Buffalo. The priorities from the [community conversations](#) were shared at a working summit of government, nonprofit, human service, and other community organizations at the University at Buffalo. City and County representatives at the event recognized and committed to addressing issues of health disparity among older adults in future planning. Members of the Task Force played an integral role in the planning process of the Erie County's new [Live Well Erie vision](#), which prioritizes closing health gaps across the lifespan for residents in Erie County.

***We will develop a marketing and communication strategy to keep the community informed.***

The communications committee of the Task Force has played an integral role in elevating the voices of the community advocating for various focal efforts during the last year. Knowledge about the task force has become more widespread as evidenced by increased participation in the Task Force, increased representation in the media, and increased opportunities for engagement with the Task Force. This committee will continue to support the Task Force as we transition to the Buffalo Center for Health Equity and establish a brand identity. Extensive media coverage in 2019 is shared in Appendix B.

***We will push for the evaluation of regional renaissance based on our ability to address the social determinants of health that drive race-based health disparities.***

The Task Force has secured several meetings with local and state elected officials who are committed to learning about the health needs of African Americans in Buffalo. These meetings have led to support and representation on the Task Force from the Senator, Assemblywoman and Mayor's offices.

*Hon. Timothy Kennedy, Senator, NYS Senate District 63*

*Hon. Crystal People-Stokes, Majority Leader NYS Assembly, District 141*

*Hon. Byron W. Brown, Mayor, City of Buffalo*

*Hon. Gustavo Rivera, Chair of the New York State Senate's Health Committee*

*Denard Cummings, Director, New York State Bureau of Social Determinants of Health*

***We will continue to document solutions you share with us to help develop a path forward.***

Evaluations and feedback from the 2018 conference informed and influenced the plans for the 2019 conference. We expanded the length, included more discussion topics, and invited more content experts to share best practices with our energetic community. In fact, many topics discussed at the 2018



conference informed our working agenda throughout the last year. *We will not give up until we have health equity for all.*

It's incredible to look back on all of the work of the past year! Significant strides have been made toward realizing the Buffalo Center for Health Equity, including the successful second annual Igniting Hope Conference. And while hard work and visioning has been occurring for decades, the Task Force is thrilled to seize the opportunity to establish concrete community action priorities, engage in strategic public-private partnerships, and influence policy development so that we may, in our lifetimes, see positive changes in health outcomes for African American families in Buffalo. As the Buffalo Center for Health Equity, we will continue the work of moving the dial, reframing the African American narrative and building this movement.

***None of the work or momentum we have built would be possible without the passion and commitment of volunteers and residents who have contributed countless hours, talents, and assets to the movement. For that, we are humbled and have gratitude.***

### Igniting Hope Conferences

In response to the crisis of health inequities in Buffalo, our aim is to explore the underlying root causes of these disparities, examine, discuss and initiate action plans to help solve these complex health and social issues and create a culture of wellness. As we have for the past two years, we will convene annually, bringing together residents, community partners, and our academic partners to elevate priorities in policy and practice that will help eliminate these health disparities. The planning committee for this conference is comprised of faith community, local community members, law enforcement, and labor unions, as well as faculty from the University at Buffalo Schools of Medicine, Nursing, Management, Education, Law, Architecture and Planning, and Public Health and Health Professions.

**DISCRIMINATION MAKES US SICK**

African American health in crisis.  
In Erie County, African Americans are nearly 2 times as likely to die before the age of 75 than Whites.  
Let's find out more about the causes of this health crisis.

**Buffalo, NY**  
261,000  
37.6% Black/African American

**EDUCATION**  
Men with a college degree live 10 years longer than those with a just a high school education and Women live 5 years longer.  
In Buffalo, approximately 1 out of 8 African American people go on to get their Bachelor's degree or higher, compared to 1 out of 3 Whites.

**UNEMPLOYMENT**  
In the Buffalo-Niagara region, the unemployment rate for African Americans is 17.3% that of Whites: 17.3% of African Americans are unemployed compared to 6.4% of Whites.  
6.4% of Whites Unemployed | 17.3% of African Americans Unemployed

**SECURITY**  
43% of defendants of color serve time in prison compared to 26% of Whites.  
43% | 26%

**BE PART OF THE SOLUTION!**

Join the Igniting Hope Conference on April 28, 2018 at the Jacobs School of Medicine.


- Learn about the causes of the health crisis among African Americans in Buffalo
- Learn how other communities are solving the problem
- Meet others like yourself who want to create a healthier Buffalo

THE AFRICAN AMERICAN HEALTH DISPARITIES TASK FORCE PRESENTS  
**2019 IGNITING HOPE CONFERENCE:**  
BUILDING A CULTURE OF HEALTH & ENDING AFRICAN AMERICAN HEALTH DISPARITIES


**AUGUST 16TH-17TH  
BUFFALO, NY**

**YOUR INPUT IN BUILDING THIS MOVEMENT IS VITAL  
SO THERE IS NO COST TO YOU TO ATTEND THIS CONFERENCE**


**REGISTER TODAY: [bit.ly/ignitehope2019](http://bit.ly/ignitehope2019)**



**John Ruffin, PhD**  
Founding Director National Institute on Minority Health and Health Disparities



**Moro Salifu, MD MPH MBA**  
Director of the Brooklyn Health Disparities Center  
SUNY Downstate Medical Center



**Lisa Nicholas, MD**  
Clinical Assistant Professor of Obstetrics and Gynecology,  
University of California Los Angeles Ronald Reagan Medical Center

For more information or sponsorship opportunities contact us at [ignitehope2018@gmail.com](mailto:ignitehope2018@gmail.com)

## Igniting Hope 2019 Highlights

The 2019 Conference kicked off with a Friday evening program where Dr. Moro Salifu, MD, MPH, MBA, the Director of the Brooklyn Health Disparities Center at SUNY Downstate Medical Center, inspired participants to continue the focus of our equity work on the social determinants of health. Saturday's activities opened with the exciting announcement of the creation of the Buffalo Center for Health Equity. Saturday also included an opening keynote presentation by Dr. John Ruffin, PhD, the founding Director of the National Institute on Minority Health and Health Disparities and a lunch keynote presentation on maternal health inequities by Dr. Lisa Nicholas, MD Clinical Assistant Professor of Obstetrics and Gynecology at the University of California Los Angeles Ronald Reagan Medical Center. Learn more about the conference speakers in Appendix A. The conference participants also had the opportunity to meet in breakout groups and form coalitions for action across eight different topics related to health equity issues for residents in Buffalo and Western New York.



Clockwise from left: **Al Hammonds**, CSSBB, Executive Director, Millennium Collaborative Care and **Dr. John Ruffin**, PhD, founding Director of the National Institute on Minority Health and Health Disparities. **Dr. Lisa Nicholas**, MD Clinical Assistant Professor of Obstetrics and Gynecology at the University of California Los Angeles Ronald Reagan Medical Center. **Dr. Moro Salifu**, MD, MPH, MBA, the Director of the Brooklyn Health Disparities Center at SUNY Downstate Medical Center.

*“This conference is an unprecedented event for Buffalo. It brings to the city of Buffalo three major black physicians, among our nation’s most prominent leaders in addressing health disparities, who will be speaking specifically about health issues in Buffalo’s black community. Bringing this level of black expertise and black excellence – both national and local – together is unprecedented in Buffalo and a reflection of the commitment that all of us have made to reversing the disparities that have so damaged our community for too long.”* [Learn more](#) from Pastor George Nicholas, MDiv, Senior Pastor, Lincoln Memorial United Methodist; and Convener, African American Health Equity Task Force.



## The Buffalo Center for Health Equity



**Kinzer M. Pointer**, MCM, Pastor, Agape Fellowship Baptist Church, and Chair of the Board of Managers, Millennium Collaborative Care; **Rita Hubbard-Robinson**, JD, CEO NeuWater & Associates, LLC; **Pastor George Nicholas**, MDiv, Senior Pastor, Lincoln Memorial United Methodist; and, co-convener African American Health Equity Task Force; **Charles F. Zukoski**, PhD – Provost and Executive Vice President for Academic Affairs, University at Buffalo; **Thomas J. Quatroche Jr.**, Ph.D., President and CEO, ECMC Corp.; **Ellen E. Grant**, Deputy Mayor, City of Buffalo; **John Ruffin**, PhD – Founding Director of the NIH on Minority Health and Health Disparities, President and CEO of ConsulStart, Inc.; **Al Hammonds**, CSSBB, Executive Director, Millennium Collaborative Care; **Michele Mercer**, RN, MSHSA, Chief Clinical Integration Officer, Millennium Collaborative Care

During the Igniting Hope 2019 conference, **Thomas J. Quatroche, Jr., PhD, President and Chief Executive Officer, Erie County Medical Center Corporation**, announced that Erie County Medical Center Corporation will provide major support for the creation of the new Buffalo Center for Health Equity by allocating \$372,000 in funds to support the initial launch of the new entity focusing on health issues affecting residents of Buffalo’s East Side. [Watch the announcement!](#) [Read more](#) about the award. This collaboration demonstrates a commitment by ECMC to further their efforts to increase health outcomes for their neighbors and surrounding communities.

The Buffalo Center for Health Equity is building momentum and increasing outreach across various topics of social determinants of health in African American communities. Engaging task force partners and building from the collective community work completed at the 2019 Igniting Hope conference, the new Center will focus on building capacity and advancing a strategic plan.

Dr. Willie Underwood III, a prominent local urologist, has been appointed as executive director of the Buffalo Center for Health Equity. Dr. Underwood will lead Buffalo Center’s mission and multi-sector task force to continue to elevate the priority of improving health outcomes for Erie County residents in the five targeted zip codes (14204, 14206, 14211, 14212, 14215).



**Willie Underwood III, MD, MSc, MPH**

## Participant Wisdom

Participant evaluations of the Igniting Hope 2019 conference elucidate some of the most important learning outcomes and value of the convening. Below is some of the wisdom shared by participants when asked, "What was the most important thing you learned during the conference?":

*There are MANY people interested, willing and capable of facilitating change.*

*All sessions were very useful and informative. There were no least useful or informative sessions. The most important thing I gleaned from this conference was the willingness and excitement the community has to collaborate. Very well done!!*

*Equity needs more radical attention.*

*The importance of Social Determinants of Health and how they impact not only the*

*African-American community but also how they affect our economy.*

*That I'm not alone.*

*Just how powerful knowledge is- we really are dying due to lack of knowledge.*

*The legacy of slavery is ubiquitous in the lives of African Americans.*

*How black communities are suffering because of the laws made in government.*



## Breakout Session Topics & Presenters

The conference offered participants extensive learning opportunities and powerful discussions across eight areas of current focus for the Buffalo Center for Health Equity. Each of the breakout sessions was focused on making change in an important area of concern that influences the health of African Americans in Buffalo.



### Historic Trauma: Honest Talk, Deep Listening, Real Healing

This informational session will focus on the scholarship of Dr. Joy DeGruy's groundbreaking book "Post Traumatic Slave Syndrome: America's Legacy of Enduring Injury and Healing". Gain a greater understanding of how enslavement and oppression has impacted the well-being and health of people of African descent in America. This workshop is designed to begin a journey that explores the attitudes, assumptions and behaviors that have left us less than whole.

*Presenters: Gail V. Wells, Theresa Harris Tigg, PhD., Holly Bewley, and Otilie Woodruff*



### Maternal Health Disparities: The Health of a Black Woman

Black women are 243% more likely to die from pregnancy or childbirth-related causes. This disparity occurs across socio-economic and educational attainment. This workshop will evaluate and explore options to begin to address the infant and maternal health disparities that affect the WNY African American community.

*Presenter: Kenyani Davis, MD., Community Health Center of Buffalo*



### Mental Health: The Impact of Mental Health on African American Young Males

Young African American males have faced significant challenges dating back to the Middle Passage. In the years since, issues such as slavery, discrimination, and the school to prison pipeline have all affected the collective mental health of generations of black men. One factor, the stigma attached to mental illness, has negatively impacted our youth thereby preventing them from getting the support they need to break the cycle of despair. This workshop and subsequent discussion will explore these topics as well as looking at possible solutions to address these concerns.

*Presenter: Karl Shallowhorn - Education Program Coordinator, Community Health Center of Buffalo*



### Nutrition: Planning Communities as if People Eat

Simply described, food equity is the opposite of food disparity. In this workshop, presenters from the University at Buffalo Food Systems Planning and Healthy Communities Lab will present brief case examples of how communities from around the United States are promoting food equity. Workshop participants will also engage in hands-on activities to explore how planning and policy can promote food equity in Buffalo.

*Presenters: Samina Raja, PhD, Professor, School of Urban and Regional Planning and the UB Food Lab*





**Policing: Disparate Enforcement for Minor Violations & Its Health Effects**

Over policing in low-income communities, especially communities of color, results in disproportionate ticketing of black and brown people for minor traffic violations -- broken taillights or tinted windows, for example -- that are typically punished with significant fines. This workshop will work to develop strategies to take action to address high rates of traffic ticketing in low-income neighborhoods, multiple high fees associated with minor violations, and their consequent health effects.

*Presenters: India Walton, RN., and Katie Adamides, Esq., NYS Director, Fines and Fees Justice Center*



**Restorative Justice: The Impact of Restorative Practice on the Health of Communities of Color**

The health and well-being of our students of color and students with disabilities are being greatly impacted by the disproportionality of suspension and expulsion of these students. In this workshop we will examine how restorative practices can help address these issues and reduce disparities in our local schools. Restorative Practice has been proven as a useful alternative to punitive responses to behaviors thus keeping students in school and providing necessary resources to address the whole child.

*Presenters: Dina Thompson, Diane Elze, PhD., and Scott Orrange*



**Tobacco: Building Alliances to Reduce Tobacco Use in Communities of Color**

Training will equip attendees with the knowledge, skills and attitudes needed to build partnerships with youth, community residents, organizations, businesses and service providers to address tobacco use disparities amongst low-income populations. We will examine social determinants of health, as well as discuss strategies to counter deceptive marketing tactics of the tobacco industry; reduce exposure to secondhand smoke and promote tobacco free outdoors and parks.

*Presenters: Stan Martin, Project Director at CAI, Terry Alford, Program Manager at CAI, Jaqueline Clemons, Community Wellness Champion*



**Wealth Building: A Community Wealth Building Strategy**

In the United States, the focus on creating community wealth always focuses on individual wealth rather than community wealth. This individual wealth creation model has not changed the realities facing Black America. For example, a recent Pew Trust Research report identified African American families possessing less than 5% of the wealth of White American families. We need to develop a community wealth model to complement the individual wealth paradigm. There are multiple models of community wealth production, including community land trusts, cooperatives, worker-owner corporations, along with faith-base housing and economic development strategies. This workshop explores strategies for developing institutional and community wealth and will brainstorm and plan for the implementation of such approaches in Buffalo.

*Presenters: Kinzer Pointer, MCM, Pastor, Agape Fellowship Baptist Church and Henry Taylor, PhD, Professor, School of Architecture*

## Participant-Generated Goals from Breakout Sessions

Participants learned about current trends and practices in each breakout session, and in the afternoon, they were tasked with sharing ideas about policy, advocacy, and programming across these topics. The breakout group participants included members of the community and professionals working in relevant fields to the session topics. The groups developed goals for short-, medium-, and long-term action. These goals, voiced by the community, will inform the future directions of the Center.



### *Historical Trauma: Honest Talk, Deep Listening, Real Healing*

	Policy	Advocacy	Service/Program
Short-term goals	Evidence-based policy; Community engagement/inclusion	Dispelling information around Afro-American history; Program at churches and police offices about Afro-American history; Include suburbs	Community members included in asking decisions for their community
Medium-term goals	Education/training of health care officials	Commissions on how history is being taught in schools; Cultural humility; Teaching teams	Training health care providers; accountability amongst health care providers
Long-term goals	“Best practices”/Cultural competency – need to talk to both groups involved	K-12 education – restorative justice instead of suspension, standardized testing update, integration of STEM and social sciences; Updating of board exams (ex. MCAT) teaching what they tests (i.e., on historical trauma)	Bridging cultural divide between black and immigrant communities

### *Maternal Health Disparities: The Health of a Black Woman*

	Policy/Advocacy	Service/Program
Short-term goals	Implicit bias training; Transportation program; Training program; Communicate with churches	Data consolidation-link data from community health groups, education/health literacy, meeting with Rochester for how they collect data
Medium-term goals	Corporations (McDonalds, etc.)	Toolkits standardize protocol, marking (existing community programs), implicit bias training
Long-term goals	Maternal review board; Grants – CBD Ed; Peer support for fathers; WIC program; \$ coverage post-partum care > 6 weeks	Advocates such as doulas present in hospital setting; Bringing community health workers in the system

***Mental Health: Impact of Mental Health on African American Young Males Young African***

	Policy	Advocacy	Service/Program
Short-term goals	What policies are on table to be voted on; Local legislative stance – disseminate info similar to Indivisible	Create multi-media social media engagement on black male mental health – FB, Instagram; Speak with health insurance companies to shift mental health to preventative policy; Attend health and wellness fairs as task force; Send information to churches and youth ministries	Mental Health Café for African American males; Marketing to increase caring – Just Tell One campaign, commercials; Send information to churches, youth ministries
Medium-term goals	Reach out to nurses, other providers; policy; Reclassify mental health as preventative; Increase funding for social workers of color, shadowing	Teach African American males self-advocacy with mental health; Work with National Medical Association and other providers of color, collect contact information; Information/training on VBP	Youth Mental Health First Aid training in schools and faith-based organizations; Programming professionals on how to do billable assessments; Patient advocacy training
Long-term goals	Billable assessments; Livable wages for mental health workers; Profiles of senators; Notify members on upcoming budget	Educate public teachers for trauma-informed teaching	Advocacy training; Health ministries; Educating on billables

***Nutrition: Planning Communities as if People Eat***

	Policy	Advocacy	Service/Program
Short-term goals	Develop a council of community food advocacy	Addressing the intentional marketing/mis-marketing of food; by larger unhealthy food companies; healthy eating visual marketing	Education campaign for nutrition using smartphones, technology, and apps
Medium-term goals	Educating residents on growing and incentivize people to become farmers	Establishing mandatory nutrition advocates for youth	Expand MAP services for broader community to engage in food truck and mobile market; host programs at schools (i.e., cooking classes and nutrition counseling for parents)
Long-term goals	Passing public policy to support community interests and priorities	Restricting marketing in school zones (of unhealthy foods)	Campaign - annual city-wide campaign for lifetime health called “Lifetime of Healthy Eating”



***Policing: Disparate Enforcement for Minor Violations & Its Health Effects***

	Policy	Advocacy	Service/Program
Short-term goals	1199 free rides for HCWs; Rsch – who controls what; no boots at BTVA – police discretion; notification when towed/signs/locator services (text/email program)	Streamline complaints process- establish trusted community contact CAC); follow FF & FC on FB and Twitter; let people know about citizens data classes; code for Buffalo	Parking vouchers at BTVA; staff available to deboot; make YouTube video on how to complain; focus item for council meeting; DA ask: don't prosecute AUOs
Medium-term goals	Eliminate local fee retention; State: notice by email or text when towed; Pass DBJ bill: suspensions for traffic debt; do away with charge for DMV abstract/accord online	Escalating complaints; Include frequency of police oversight and accessibility; move BTVA parking lot	County education on filing items, complaints, open data; stop receiving; state forfeiture data; Rsch current police practices
Long-term goals	Eliminate local fee retention; eliminate mandatory surcharge; free phone calls from jail/prison; cut funds for police on certain creds.		

***Restorative Justice: Impact of Restorative Practice on the Health of Communities of Color***

	Policy	Advocacy
Short-term goals	Familiarize/enhance knowledge around existing policies related to restorative justice; education	Recruit participants to engage in action by meeting people where they're at Access existing programs and services to collaborate
Medium-term goals	Recruitment of representative population to inform policies	Gain an understanding on how restorative practices keep youth in school for better long term outcomes
Long-term goals	Enhance accountability within stakeholder groups; mentoring opportunities between policy makers and organizations	Breaking down barriers through establishing action steps for implementation at the individual, organizational, and community levels

**Restorative justice includes breaking down barriers, meeting people where they're at /their authentic selves**

***Tobacco: Building Alliances to Reduce Tobacco Use in Communities of Color***

	Policy	Advocacy
Short-term goals	Identify and enhance cultural competence related to tobacco use across stakeholders	Mobilizing the community to make cases for change
Medium-term goals	Promote smoke-free activities including movies; denormalize tobacco use by reducing tobacco marketing targeting youth; reduce prevalence of e-cigarettes	Innovation – create incentives for healthy workers – bottom line for companies is more money
Long-term goals	Increase tobacco free workplace and workplace policies; increase tobacco free outdoor areas; eliminate second-hand smoke exposure in multi-unit housing; not enforcing laws regarding sign size, location, and retailers	Collaborate with tobacco companies to feature African Americans in a positive light

***Wealth Building: A Community Wealth Building Strategy***

	Policy	Advocacy	Service/Program
Short-term goals	Appeal to all; Expect success	Educate; Target development at every step; Explore partnerships in community	Win easy victories – prioritize; Realize actions today affect intentional goals
Medium-term goals	Intentionality to empower people to hope	Intentionality; Reignite hope for development through generations	Building charge
Long-term goals	Crossing generations; Include partnerships; Intentional	Be purposeful; Forge partnerships (BMH) – Section 8	50 continuous projects to avoid learned helplessness
Overall long-term: <b>building cooperative economy</b>			

***Active coalitions have been created to address each of these topics. If you would like more information about how to get involved, please reach out to [info@buffalohealthequity.org](mailto:info@buffalohealthequity.org).***



## Conference Evaluation Summary

The Igniting Hope 2019 Conference sparked meaningful conversation and empowered participants to act across the eight coalition missions. Evaluations for the conference were completed by 102 people.

- 91% rated the conference as “excellent” or “very good”
- Participants reported overwhelmingly (82%) that the conference gave ample time for networking
  - 24% of participants made 5+ new connections about equity work
  - 38% made 3-5 new connections
  - 35% made 1-2 new connections
- 85% of participants are “extremely confident” or “very confident” that the conference will lead to successful initiatives to reduce health disparities
- 95% of participants said they were “extremely likely” or “very likely” to attend future Igniting Hope conferences
- Participants reported learning a variety of important topics at the conference. From those responses, a word cloud was generated to learn about the most common themes discussed:



- Participants would like to see some of the following changes at future conferences:
  - More options for breakout sessions; the opportunity to attend more than one breakout topic
  - More clarity in the scheduling
  - Options for more in-depth discussions
  - More even representation in breakout sessions
  - A longer conference
  - Participation from a broader array of sectors (e.g., teachers, younger people, older people, administrators, community organizers, etc.)
  - Better communication about the venue (i.e. parking/transportation, food, etc.)
  - Healthier refreshments

For more detailed information about the conference evaluation, please contact **Heather Orom, PhD** Assistant Dean for Equity, Diversity and Inclusion, Associate Professor, School of Public Health and Health Professions, University at Buffalo ([horom@buffalo.edu](mailto:horom@buffalo.edu)).

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## Task Force Partner Organizations

**Concerned Clergy of WNY** – A coalition of African American pastors serving congregations in Buffalo, Niagara Falls and Lackawanna whose focus is improving the quality of life for African Americans in those communities.

**Erie County Medical Center** – The ECMC Corporation includes an advanced academic medical center (ECMC) with 573 inpatient beds, on- and off-campus health centers, more than 30 outpatient specialty care services and Terrace View, a 390-bed long-term care facility. ECMC is a Level 1 Adult Trauma Center, a regional center for burn care, behavioral health services, transplantation, medical oncology and head & neck cancer care, rehabilitation and a major teaching facility for the University at Buffalo. Most ECMC physicians, dentists and pharmacists are dedicated faculty members of the university and/or members of a private practice plan.

**HOPE Buffalo** – A project of CAI, a diverse, mission-driven non-profit organization dedicated to improving the quality of health care and social services delivered to vulnerable populations worldwide. CAI functions as a strategic convener of a diverse group of key stakeholders, including residents within the city of Buffalo who are engaged and empowered to address health equity and improve the health and wellness of disparity populations in the WNY region.

**Millennium Collaborative Care** – A Performing Provider System (PPS) in the New York State Delivery System Reform Incentive Payment (DSRIP) Program dedicated to igniting healthcare change in Western New York, by partnering with physicians, healthcare providers and community-based organizations to improve the delivery of health care for over 270,00 Medicaid clients.

**NeuWater & Associates, LLC** – A consulting agency that focuses on improving population health in urban centers by improving SDOH outcomes.

**Population Health Collaborative of WNY** – a collaboration of organizations working to build capacity to improve community health, helping to improve quality of healthcare and spearheading reforms that drive down the costs of healthcare.

### University at Buffalo:

- Center for Successful Aging
- Center Medical Humanities
- Center for Urban Studies, School of Architecture and Planning
- Center for Inclusive Design & Environmental Access, School of Architecture and Planning
- Clinical and Translational Science Institute (CTSI)
- Graduate School of Education
- Jacobs School of Medicine and Biomedical Sciences
- School of Law
- School of Management
- School of Nursing
- School of Public Health and Health Professions



## Appendix A: Igniting Hope 2019 Keynote Speakers

### **Moro Salifu, MD, MPH, MBA**

**Director of the Brooklyn Health Disparities Center  
SUNY Downstate Medical Center**

Ghanaian-born Dr. Moro Salifu received his medical degree from Dokuz Eylul University in Turkey. He completed his residency in medicine and fellowship training in kidney disease, kidney transplantation and interventional nephrology at SUNY Downstate Medical Center. He has directed the nephrology fellowship training program and served the roles of Chief of Nephrology and Director of the Transplant Program, roles that were crucial to the restructuring of the kidney dialysis and transplant programs at Downstate. He is currently Professor and Chair of the Department of Medicine, and also the Edwin C. and Anne K. Weiskopf Endowed Chair in Nephrology and Transplantation at Downstate.

Dr. Salifu has received numerous awards, including the prestigious Master recognition from the American College of Physicians. He serves on numerous institutional and national professional committees and has published extensively in journals nationally and internationally. Dr. Salifu is recognized nationally and globally for his work in kidney transplant outcomes as well as his role in the discovery of the human platelet F11 receptor and its involvement in the development of atherosclerosis and thrombosis in the vascular bed.

Dr. Salifu is a national leader in the area of minority health and health disparities. He is founding Director of the Brooklyn Health Disparities Center, a partnership between SUNY Downstate Medical Center, the Arthur Ashe Institute for Urban Health, and the Office of the Brooklyn Borough President. This is a unique community, academic, government partnership, supported by a multi-million dollar award from the National Institute of Health, has a goal to eliminate health disparities by bringing the assets of new and diverse partners, to a strategic table focused on solutions. The overarching goal of the center is to eradicate health disparities plaguing minority communities.

### **John Ruffin, PhD**

**Founding Director, National Institute on Minority Health and Health Disparities**

Dr. Ruffin earned a B.S. in Biology from Dillard University, an M.S. in Biology from Atlanta University, a Ph.D. in Systematic and Developmental Biology from Kansas State University, and completed postdoctoral studies in biology at Harvard University. His track record of dedication to leadership and career advancement for individuals from racial and ethnic minority populations was nurtured through his experience as instructor of biology at Southern University, Baton Rouge, Louisiana; Assistant Professor of Biology at Atlanta University; Associate Professor of Biology at Alabama A&M University, Huntsville, Alabama; Cabot Teaching Fellow at Harvard University; and Professor Biology, Chair of the Department of Biology, and Dean of the College of Arts & Sciences at North Carolina Central University.

Dr. Ruffin is the founding Director of the National Center on Minority Health and Health Disparities (NIMHD). He oversaw the NIMHD budget of approximately \$276 million, and provided leadership for the NIH minority health and health disparities research activities which constituted an annual budget of approximately \$2.8 billion. Under his leadership, NIMHD established a robust research portfolio that integrates multiple disciplines and offers opportunities for once marginalized groups and communities to be a part of the research process and the elimination of health disparities.

Dr. Ruffin is a highly-respected leader and visionary in the field of minority health and health disparities. The hallmark of his career has been his success in institutionalizing minority health and health disparities research within the organizational structure of the NIH. His leadership consequently transformed the national discourse around minority health and health disparities, resulting in health disparities research becoming a recognized scientific discipline.

**Lisa Nicholas, MD**

**Clinical Assistant Professor of Obstetrics and Gynecology**

**University of California Los Angeles Ronald Reagan Medical Center**

Dr. Nicholas earned her M.D. from Boston University and completed internship and residency in obstetrics and gynecology at Martin Luther King Jr. - Drew Medical Center in Los Angeles. Following her residency training, she practiced obstetrics and gynecology in the Los Angeles area for nine years before she came to Buffalo. Here she served as Medical Director and staff physician at the Geneva Scruggs Community Health Center as well as worked at the Community Health Center of Buffalo and the Buffalo VA Medical Center.

Dr. Nicholas is currently Health Sciences Assistant Clinical Professor in the Department of Obstetrics and Gynecology at UCLA and has an active Ob/Gyn practice. She pursued her passion in education through completing a three-year Medical Education Fellowship at UCLA. She now plays an influential leadership role in medical education at UCLA as Clerkship and Course Curriculum Chair in Obstetrics & Gynecology.

Dr. Nicholas has received numerous awards including Outstanding Service Recognition in Medicine and Community Education by The New York State Senate & Assembly, and City of Buffalo; the Association of Professors of Gynecology and Obstetrics "Excellence in Teaching" Award; the Outstanding Buffalo Black Achievers from the Buffalo State College Exhibition; the "Teaching in Humanism" Award from UCLA among others.

Dr. Nicholas has focused her life's work on bringing about positive change to assure the delivery of quality healthcare for women and children in medically underserved communities. She has extensive experience working with women who experience health disparities and is a strong advocate for improving the pipeline of healthcare professionals with culturally diverse backgrounds.

## Appendix B: The Buffalo Center for Health Equity in the Media

### Igniting Hope 2019

- [Editorial: A force for good](#)
- [New center will address race-based disparities in health care](#)
- [Erie County Medical Center Announces Support for Buffalo Center for Health Equity](#)
- ['Igniting Hope' conference addresses health disparities](#)
- [ECMC provides funding for launch of new African American health center](#)
- [ECMC providing \\$372,000 to focus on East Side residents' health issues](#)

### Related News

- [New UB institute to address health disparities in Buffalo](#)
- [UB collaborative to take on Buffalo's health disparities between races](#)
- [African American Health Disparities Task Force to Host Community Forum on the Health of African Americans Living in Buffalo](#)
- [Poverty, tobacco, unhealthy eating combined to shorten lives in WNY](#)
- [In Erie County, stark racial disparities in life expectancy, child mortality](#)
- [Health fair reaches out to minority communities](#)
- [Large Life Expectancy Gaps in U.S. Cities Linked to Racial & Ethnic Segregation by Neighborhood](#)
- [Population health programs expand care, while cutting costs](#)
- [Poverty rates exceed 35% in eight WNY neighborhoods, but fall below 5% in seven others](#)
- [WNY groups receive \\$790,000 grant to improve health of residents of Buffalo's East Side](#)
- [Editorial: Buffalo's public health crisis](#)

