

**CAB Meeting
January 18, 2008**

Present: Ila Tittelbaugh, Kerstin Reinschmidt, Flor Redondo, Carol Huddleston, Lourdes Fernandez, Rosie Stewart, Virginia Warren, Robert Guerrero, Rich Polheber, Lisa Staten, Ginger Ryan, Ken Schachter, Patty Molina, Susan Kunz, Gail Bradford, Denise Roe, Leah Dodge, Gwen Gallegos, Robin Falconer, Maia Ingram, Frances Herrera, Kikey Prieto, Rebecca Drummond, Scott Carvajal, Anne Hill, Christy Trimmer, Lori Navarrete

Agenda Items	Discussion	Action
Welcome & Introductions (Ila Tittelbaugh)	Looked over minutes from last meeting	Minutes were motion & passed
Diabetes Core Intervention Project Presentation	<p>Intro: Lisa Staten Patient: Ken Schachter</p> <ul style="list-style-type: none"> - CRCPHP handout was given to the group - Recruitment has been an issue for this component. Miscalculation on our part for numbers available @ Chiricahua. Recruiting from the waiting room was a suggestion, but may not be optimal. - Chiricahua records indicate 900 patients actually at clinic not all patients acknowledge they have diabetes <p>Family: Kerstin</p> <ul style="list-style-type: none"> - Larger groups hard but more interactive - Randomization making recruitment difficult because of the low number of people recruited into patient component. - New methods to increase participant numbers. Kids (otherwise known as small promotoras) very excited to be involved. - Recruitment really depends on location (Yuma families were recruited from the diabetes outreach in community) word of mouth really helps recruitment, hard to control – get measures with open enrollment in community critical mass is important 	

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	<ul style="list-style-type: none"> - Douglas is very small (15,000 though 17,000 with prison) - Research staff is now considering recruiting from identified people with diabetes or diabetic family members from the community component. <p>Community: Rosie Stewart</p> <ul style="list-style-type: none"> - Cochise County Health Department has hired a male promotor to implement in Naco - Participants female dominated so far, though males are welcome - Male participants tend to be older (retired) - Decrease from 3 to 2 classes per year to focus efforts on family & patient this next year <p>Descriptive Statistics: Gail Bradford</p> <p>Findings: Denise</p> <ul style="list-style-type: none"> - significant reductions in waist circumference and body mass index, other analyses still to be done - research questions: tabled for now 	
<p>New Trends & Areas of Concern in Border Health (Dr. Scott Carvajal)</p>	<ul style="list-style-type: none"> - Border population is growing exponentially. 1/3 of Hispanics are under 18 - Latinos have among highest rates of under-insurance for children even among those eligible. - Disparities greater in border regions and for Latinos than nationally – education, telephone access - Disproportionally high death rates in diabetes for Hispanics <p>Migration & acculturation not “one-way”</p> <ul style="list-style-type: none"> - Social class acculturation and health research - Low cultural orientation may relate to physical health outcomes - Cultural change & social class predict different 	

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	<p>health status variables</p> <p>Border Enforcement & Discrimination</p> <ul style="list-style-type: none"> - Tucson has most active sector for border crossing & US enforcement efforts - Overall climate of suspicion to have negative health outcomes <p>Preliminary Findings (N=110) in Sunnyside & Elvira Neighborhoods</p> <ul style="list-style-type: none"> - 80% Hispanic descent or Latino status - predominantly married women (household survey) - 20% no health coverage; 20% getting care in Mexico - 21% needed a doctor but did not see one due to financial concerns within past 12 months - lots of refusals hard to do community surveys – fear of status <p>Stressors & Discrimination</p> <ul style="list-style-type: none"> - perceived discrimination in seeking healthcare - worry about family healthcare - hearing prejudiced comments <p>Stress linked to health disparities</p> <ul style="list-style-type: none"> - CVD, Mental Health, problematic for diabetes health outcomes & management - access to health care, impact of proposition 200 (proof of citizenship to vote or receive public benefits) - under utilization of Medicaid by eligible Latinos - need to better understand barriers - many families have mixed documentation - not good data available for undocumented - lots of available data for documented residents - access to health services - delay in access and treatment for diabetes - diabetes doesn't hurt until it is too late so people 	<p></p> <p>We brought Scott in to bring in discussion about migration and health CAB focus on chronic disease</p> <p>A sister study is being carried out in Yuma</p>

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	<p>come in for appt too late</p> <ul style="list-style-type: none"> - “Little Health Window” (Ventanillas de Salud) help families figure out what they qualify for house these services in the consulate - Tucson branch linked to El Rio System - does not exist in Nogales <p>Interesting research to follow the people who use these services and see if they follow it; also helps people to realize what their options are sliding fee scale</p>	<p>Tucson Branch more costly Yuma Branch more grassroots</p>
<p>School Based Health (Rebecca Drummond)</p>	<ul style="list-style-type: none"> - Reported on a meeting she attended with Ila and Nina Coe regarding school based health - Speakers included Phil Lopes and Edmundo Hidalgo (President/CEO, Chicanos por la Causa) - Based on an interview with their contacts (Chicanos por la Causa) 13% of clients planned to leave AZ after January 1, 2008 due to implementation of employer sanctions - school based health centers - what is going to happen to schools and other organization s when so many kids/families leave? - 50% of survey afraid to call police in an emergency - no definitive answers for impact on health-need for advocacy - In process are some small business lawsuits – working with chamber of commerce - AZ council for school-based healthcare linked to NIH - National Center focusing on refugee & immigrant children - Is ADHS being affected in terms of eligibility? - ADHS reviewed programs immediately following Prop 200 and determined that all their programs are exempt; minimal changes since January 1st 	<p>(www.azsbhc.org) (www.healthinschools.org) Handouts: Latinos Policy Institute 2007 Chicanos Por La Causa, Inc., 2006 Annual Report Report Children of Immigrants & Refugees</p>

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	<ul style="list-style-type: none"> - WIC has been impacted - Well-women no change in ethnic mix (reported to CDC twice a year) - impact of drop in attendance - schools 100th day attendance is recorded for funding throughout next year 	
<p>Global Health Alliance Presentation (Lori Navarrete, Christy Trimmer, Anne Hill)</p>	<ul style="list-style-type: none"> - handout: Chronology of Border Death Position Statement - Students, Academic Professionals, and Staff at MEZCOPH voted to adopt policy statement - MEZCOPH faculty worried it would be viewed as a political statement and the majority voted not to take a position. - would like to develop a council/group/committee on this issue within the CAB - Governor of Sonora interested in tool kit (Lori) – interested in media tool kit and idea??? - Governor Napalitano very interested (Robert) <p>Impact of CAB’s decision:</p> <ul style="list-style-type: none"> - CRCPHP - CDC - Some felt they needed to take back to individual organizations before a vote - Others felt not taking a stance was an ethical issue/humanitarian issue public health issue - The intent is advocacy not lobbying - Adopting the position statement means taking action towards fulfilling it - any one interested in being part of a sub-committee? <p>We will look more into this if position is adopted. We need to take a stand and propose actions rather than be too cautious</p> <ul style="list-style-type: none"> - Individuals of the CAB would sign on their own behalf. 	<p>lnavarre@email.arizona.edu ctrimmer@email.arizona.edu abhill@email.arizona.edu</p> <p>Need further discussion on whether individuals would sign on or how it is presented.</p>

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	<ul style="list-style-type: none"> - What if our “action” is the educations about deaths - educating public in general - commitment to education and creating forums <p>Pima County Medical Examiner has slides of pictures of recovered bodies could use already existing presentations from GHA members</p> <ul style="list-style-type: none"> - Impact on communities - overwhelming to health center - health & death (risk for general public) (dangers) <p>Maps on website for No More Deaths</p> <ul style="list-style-type: none"> - describe how far you can travel in a day - where deaths have occurred - Mexico had to pull maps from dissemination - US government upset since maps showed water stations 	<p>Motion – “Deaths at the border are a serious public health concern and are unacceptable and preventable and therefore CAB will create a committee to bring forward recommendations for our future agenda of action</p> <ul style="list-style-type: none"> - Motion was seconded - Motion passes <p>Lori & Christy will be happy to field questions and concerns. No website currently can e-mail Lori & Christy for additional information</p>
<p>Draft of ideas for proposals for next meeting</p>	<ul style="list-style-type: none"> - what would it look like? - timeline - internal push for RFP’s out this summer - PRC steering committee is suggesting we apply for 1.2 million, where our budget is now 700,000 - we have 3 more CAB meetings before application due - need to show strong relationship with CAB members - want research to be beneficial for everyone - want everyone to be engaged - we need to have a research project that will last the 5 years project can change and mold as needed 	<p>Center staff will create some draft research models to share with CAB at next meeting</p>

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March Meeting in Atlanta for NCC	<ul style="list-style-type: none"> - March 25-28, 2008 - our PRC is presenting at this meeting - this is the time to work on generating interest in projects we are interested in through the SIP mechanism which matches the funding cycle for center - Volunteers to attend: Ila, Susan Kunz, Gwen Gallegos 	Lisa will identify funds to cover travel.
Sub Committee Reports	<ul style="list-style-type: none"> - CAB guiding principles (handouts) - Membership subcommittee Minutes (handout) - read both handouts and be ready to act upon them - be ready to vote/action decisions & recommendations - need people to serve as chair who is willing? - we want members fired up about meetings - want focus to be on participatory - how do we pick people? - Representation from organizations for all cities involved need consistency in representation of agencies 	<p>CAB members will review minutes and revised Guiding Principles prior to April meeting.</p> <p>Nominations for chair should be submitted prior to April meeting. Feel free to nominate yourself or others.</p>
Next Meetings	<ul style="list-style-type: none"> - 4th Friday 9:30-3:30 Room TBA - April 25, 2008 - July 25, 2008 - September 26, 2008 (moved up one month as Information for Action will be in Hermosillo) 	
Agenda for next meeting	<ul style="list-style-type: none"> - guiding principles – membership discussion - defining the research framework - Follow up on GHA position statement and subcommittee - Report from NCC 	

Border Wide Research Projects (Break out Discussions)

Ken's Group

- diabetes self management – impact of migration
- access to care
- effect on new laws on chronic disease “anti immigrant”
- impact on migration on school health
- increase utilization of preventive services by male individuals
- rising depression in border communities
- reverse migration
- stress
- chronic disease
- impact of economics

Virginia's Group

- longitudinal impact of behavior change
- model to increase participation and reach for programs
- how do you motivate people to act on their health?
- Diabetes
- eligibility
- effectiveness of ventanillas
- targeting mates
- separate classes/married couples
- through employers
- driving forces for OTC drug abuse
- prescription drug abuse

Gwen's Group

- history of food scarcity on obesity
- life stressors on prevalence of diabetes
- identify target and provide services to population at risk
- long term follow-up on intervention
- explore effectiveness of community and family interventions
- role of community in healthy behaviors
- community health
- CHW important for all interventions
- evidence based medical care standards
- send same message

Kerstin's Group

- mental health
- children of farm workers
- aging population
- access & affordability
- healthcare and social care
- impact of immigration status and prop 200
- cost of deportation on family
- support groups
- higher life expectancy
- increased disease management through social support