

AROUND NYU LANGONE HEALTH SCIENCE & RESEARCH

Coming Together to Address Health Disparities, at First Annual Conference

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Across NYU Langone Medical Center, clinicians, researchers, and staff are working here and around New York City to make it easier to improve health outcomes in racial and ethnic minority populations who suffer disproportionately greater burden of chronic diseases. Many find that this goes beyond providing medical treatment or improving access to care for these populations.

“We have to target the structural factors of our patients’ environments,” said Gbenga Ogedegbe, MD, MS, MPH, (*pictured below right*), professor of Population Health and director of the Center for Healthful Behavior Change, the keynote speaker at NYU Langone Medical Center’s first annual Health Disparities Conference on October 9. Dr. Ogedegbe sounded a theme that came through over the course of the event, which was hosted by the NYU Health & Hospitals Corporation Clinical and Translational Science

Institute, the Department of Population Health, and the Office of Diversity Affairs.



Panelists explored topics including health challenges and the role of stigma and discrimination on access to health services for young gay and bisexual men and women with physical disabilities. Other topics included the role of government in promoting health, and whether warning labels on unhealthy food reach the populations most at risk for obesity and related heart and endocrine diseases.



Focusing on a timely subject that has landed frequently in the news, Ross MacDonald, MD, medical director of Correctional Health Services at the New York City

Health and Hospitals Corporation, gave a talk about how prisons have inadvertently become the frontlines for addressing mental health and substance-abuse problems.

Toward Health Equity for All

Between panels, attendees viewed posters featuring the work of faculty, students, and staff, many of them working in the field to improve support for health in the environments where patients live, or using electronic health record data to understand and measure health inequities. In one such poster, Lianne Smith, MD, MA, clinical assistant professor of psychiatry, and Kristel Carrington, MD, and Leila Vaez-Azizi MD, both psychiatry residents, presented their efforts to identify resources and connect organizations to serve the mental health needs of the low-income and predominantly black neighborhood of Brownsville, in Brooklyn.



Other posters focused on racial differences in the quality of doctor-patient communications about medications; the barriers to recruiting underrepresented populations into clinical trials; and obstacles among various populations to accessing care for conditions such as diabetes and thyroid cancer.

Closing the day, Chau Trinh-Shevrin, DrPH, associate professor in the Department of Population Health and director of the Section for Health Equity, encouraged the audience to go beyond focusing on the ways in which disparities are experienced and limiting to people, and instead focus on achieving “health equity.”



“This moves away from focusing on differences towards a collective vision of achieving the highest attainment of health for all,” Dr. Trinh-Shevrin said. “Health equity challenges us to move towards an understanding of how structural factors influence health and health disparities, and how we might engage in active dialogue and advocacy to promote health for all.”

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