

African-American Outreach

Pine Bluff Pilot Project and Survey Results





Our mission is to enhance the quality of life for those facing serious illness and loss by Why African Americans? surrounding them with love and embracing them with the best in physical, emotional, and spiritual care.

Our mission is to enhance the quality of life for those facing serious illness and loss by "It's all about the mission." surround Michael Aureli embracing them with the best in physical, emotional, and spiritual care.

"African Americans and other minorities How is this our mission, specifically?" are at greater risk of not dying well."

Duke Divinity School Professor Richard Payne



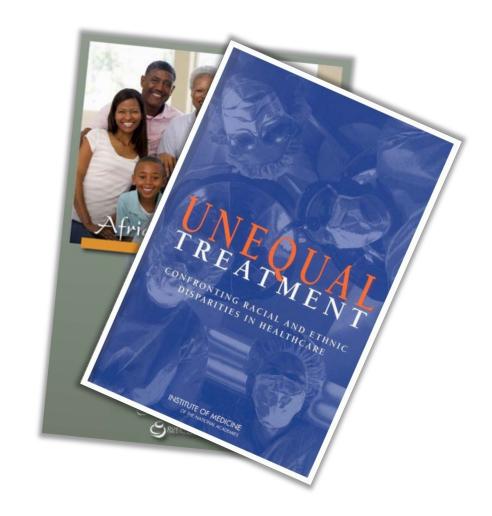
"African Americans and other minorities are at greater risk of not dying well."

Duke Divinity School Professor Richard Payne



Institute of Medicine Study

- Race alone accounts for disparate rates of medical treatment.
- African Americans are dying from treatable and preventable illnesses with more frequency than other ethnic groups.
- Show higher rates of disease and more likely to die.
- Countless examples of African American patients experiencing discrimination.



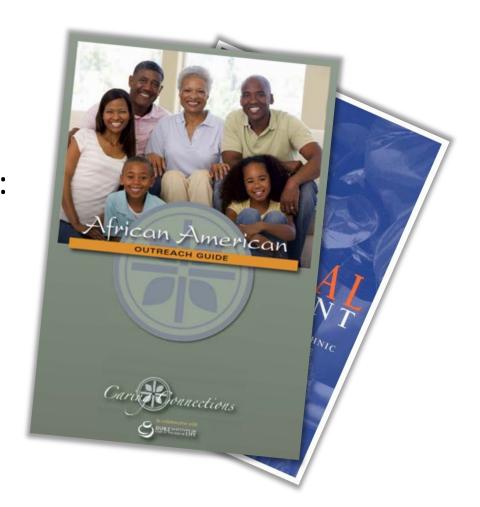




NHPCO Outreach Guide

African Americans are a vulnerable population:

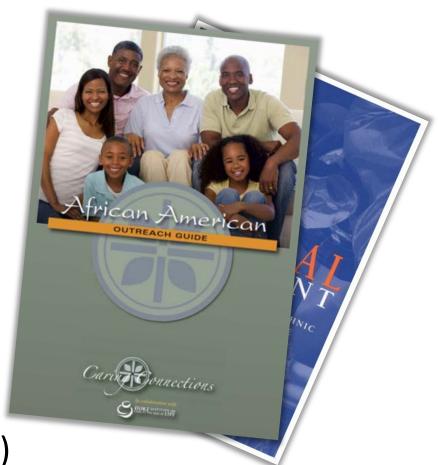
- Lower incomes and educational attainment.
- Higher poverty and unemployment.
- Less likely to be married and more likely women head-of-households, and caring for grandchildren.
- Less health insurance, lower life expectancy,
 & higher infant mortality.
- Largest concentration (55%) in the South.





NHPCO – History Matters

- Just three generations from slavery.
- Many still remember segregation, Jim Crow, and violence against them.
- Deeply distrustful of government and health care system.
- 2003 study showed ~50% of African American respondents believed AIDS was a plot to exterminate blacks. (See Tuskegee Experiment)
- Regarding health care, especially at the end of life, "it is little wonder that many worry that hospice is just another way to hasten death."





NHPCO Outreach Guide

"Black people still don't believe in the political process, because the process has never served us. We've been betrayed by the political process, betrayed by the medical process, betrayed by each and every process in America, and it's all based on racism. That distrust affects our entire personality in a great many ways."

African American Focus Group Member



NHPCO Outreach Guide

"Among African Americans, non-acceptance of advance directives appears to be part of a much broader pattern of values regarding quality of life, as well as a historical legacy of segregation. Do Not Resuscitate (DNR) orders may be viewed as a way of limiting expensive healthcare or as cutting costs by ceasing care prematurely. Historically, this perspective may stem from a long history of distrust of the white-dominated healthcare system."

Searight & Gafford, American Family Physician 2005



Duke University Study

- AH Participants, 2015 Linda Bateman, Dena Duckworth, Amy Thomason, and John Yarbrough.
- Why African Americans use hospice less barriers:
 - Knowledge less exposed to information, more misconceptions, like hospice is a place to die or means giving up.
 - 2. More likely to want life sustaining therapies.
 - More spiritual beliefs only God can decide, even suffering part of God's plan, advance care planning not needed.
 - 4. Legacy of mistrust.





Kimberly S. Johnson, MD, MHS Associate Professor of Medicine Senior Fellow, Center for Study of Aging and Human Development

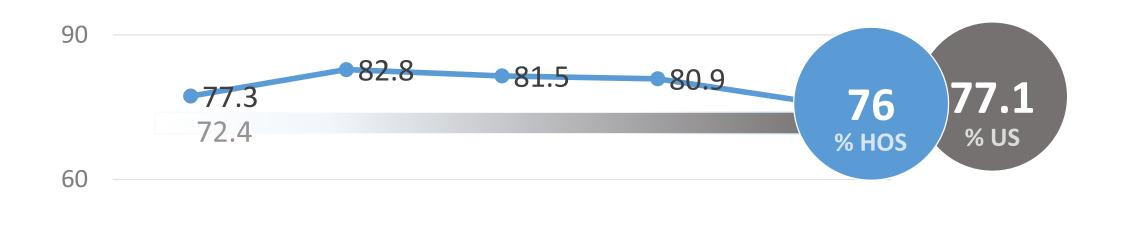


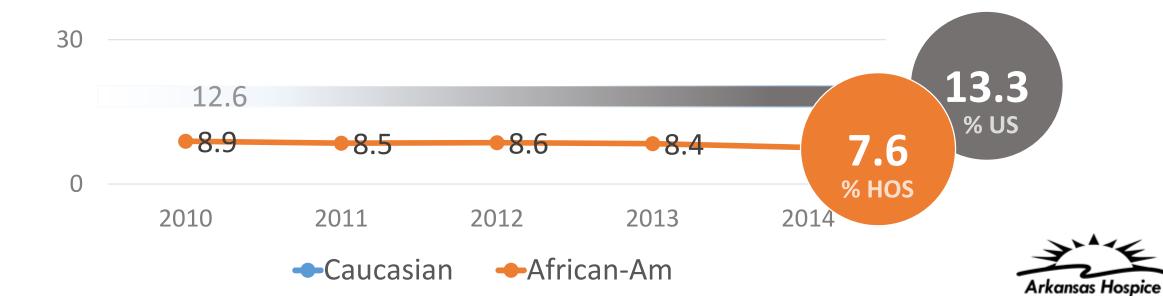
How underserved nationally?

Unlike other minority groups, African Americans' numbers have gone in the wrong direction since 2010.



Percent of United States Patients Served

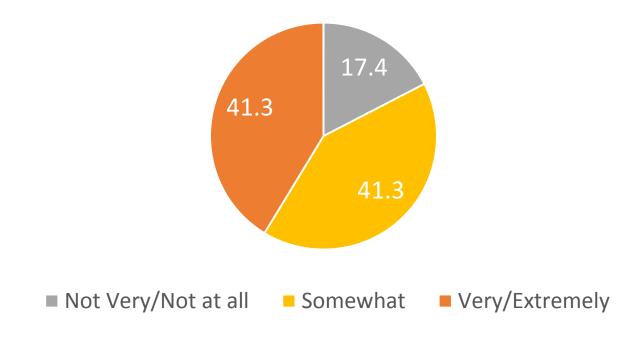






Are hospices concerned? (Duke Study)

How concerned are you about the % of African Americans served by your hospice?







What are hospices doing?

Duke survey results (April 2017):

- 78% are setting goals...
 but only 48% are measurable or reviewed.
- 83% have developed strategies...
 but only 20% assessed if they were effective.
- Only 29% had participation from senior leadership.



"Getting started is the hardest part."

Duke survey recommendations (April 2017):

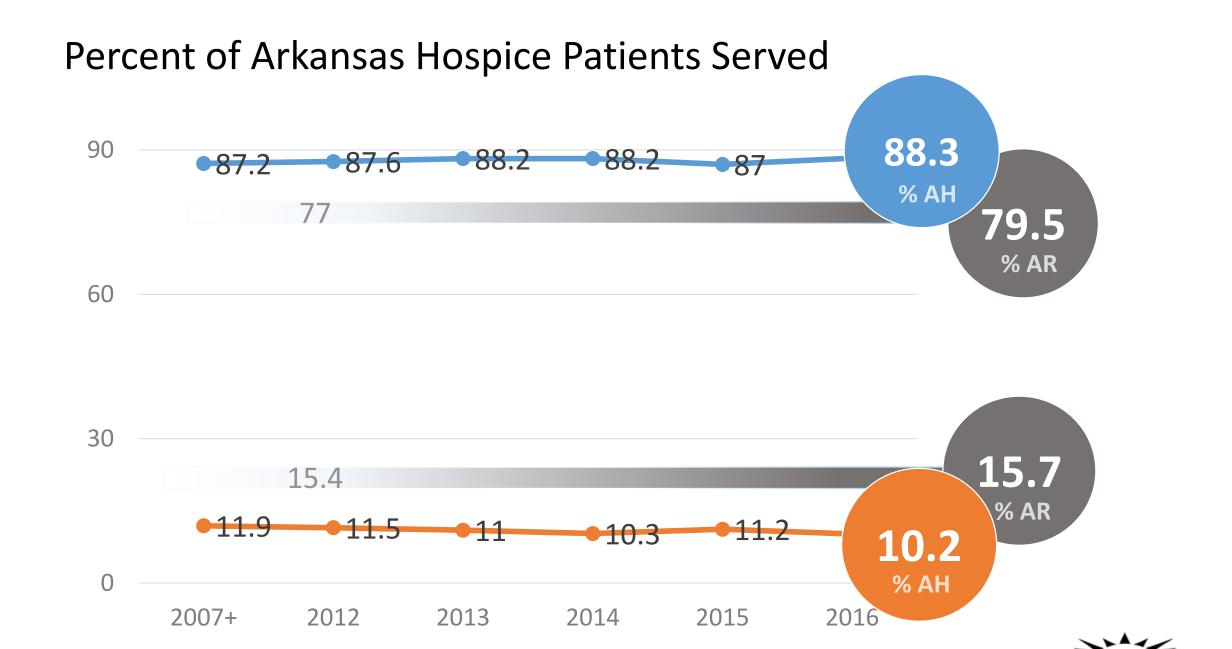
- Do some research. Assess your hospice's service to African Americans, consider local demographics.
- Learn about the needs of your community.
- Gather support and form a team: senior leadership, volunteers, community leaders.
- Set measurable goals.
- Develop a strategy to accomplish those goals.
- Measure the impact of your work, short & long term.



What about Arkansas Hospice?

Also low and trending in the wrong direction, our percentage of African American families is at its lowest point in 10 years.





African-Am

Arkansas Hospice

Caucasian



Our Strategy (begun 2015)

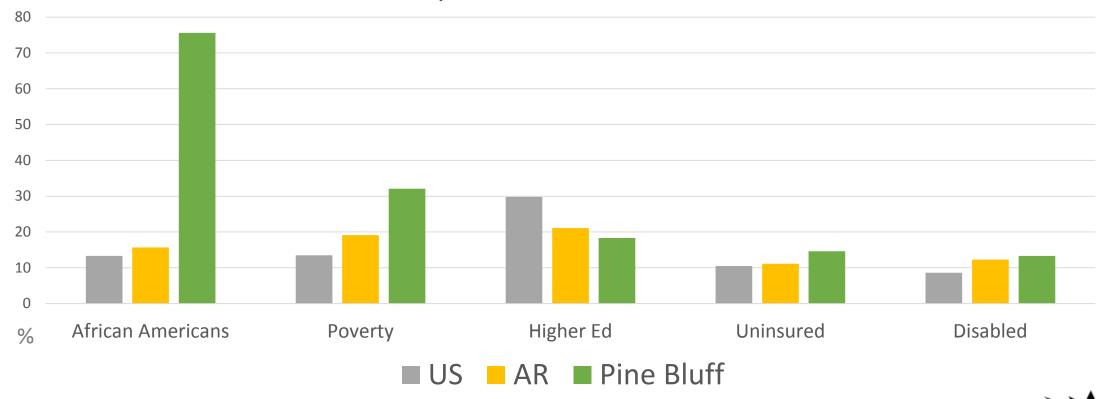
- Research issues & data for AH, AR, and US.
- Develop plan & propose idea to Linda Bateman:
 - Program buy-in critical.
 - No pilot without local program support. (No Linda, no pilot. She was our linchpin.)
- Approvals & vetting Judy, Dr. Allen, Donald, and Sherry Collins.
 - Executive & management buy-in not optional.
 - Corey & Communications' involvement also important a big component.
- Prospect grantors & develop proposals:
 - Local groups key relevant, credible, trusted.
 - Perfect partners: ARCF-PB, AR Black Hall of Fame Fdn, Ben J. Altheimer Fdn.
- Develop materials & relationships, coordinate releases, launch, monitor, adjust, and report.

Our Plan

- 1. Identify pilot area.
- 2. Meet with staff and coordinate responsibilities and objectives.
- 3. Create project plan to gather information from the community, including focus groups and surveys.
- 4. Identify community groups, members, and leaders to participate.
- 5. Finalize survey, engage appropriate groups or members.
- 6. Inform, create, or revise outreach methods and materials.
- 7. Attend community and church events to build trust, learn needs, and educate about hospice services.

Why Pine Bluff?







Why Pine Bluff?

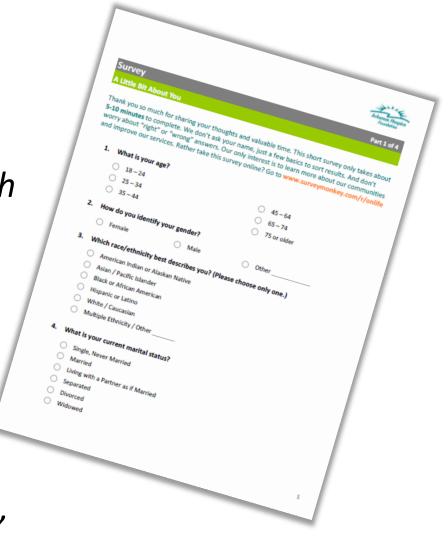
- Majority African American population.
- Rich cultural heritage.
- Active community and philanthropic groups.
- Active business-, educational-, and medical institutions.
- Arkansas Hospice part of the community for 12 years.
- Linda Bateman, Linda Bateman, Linda Bateman.
- John Yarbrough's program development experience in PB & Delta.



Our Survey

The survey helped me initiate conversation with African Americans about the term, "hospice." More people I visited did not understand the term than those who did. "Hospice" meant death and death only to them. People went from being uncomfortable to comfortable having the discussion and asking questions. After the surveys and meetings, I am receiving calls from people looking for more information, saying they are more open to using hospice.

Linda Bateman





Local Outreach by Linda Bateman

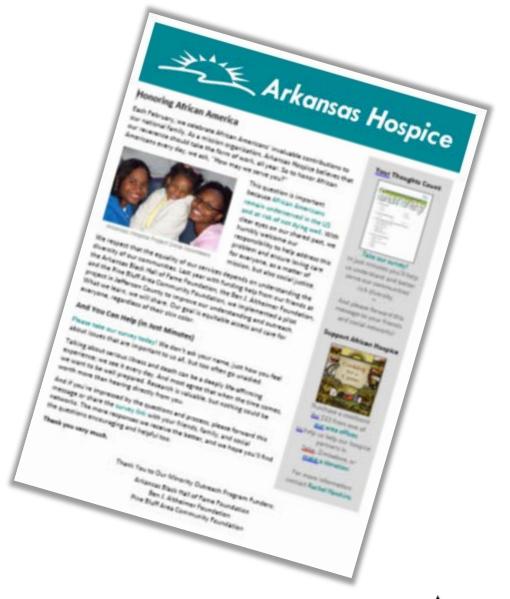
- Distributed 250 surveys and received 100. (Corey's later Facebook boost brought in over 200 more.)
- Visited groups & events, including: RSVP; Area Agency on Aging of Southeast Arkansas; Caregiver's/Alzheimer's Support Group; the Retired Teachers Association; SEARK College Resource Fair; UAPB Social Work Students; the LINKS; Circle of Friends Group; Parents from the Ivy Center for Education; Parents from Project Smile; National Association of University Women; Whispering Knoll's 2016 Resident's Care Day Event; the Jefferson County Emotional Wellness Summit, Taking Action to Build Healthier African American Communities.
- Visited many churches, including: First Presbyterian, First United Methodist Church, Mt. Calvary Baptist Church, Pilgrim Missionary Baptist Church, First Baptist Church, and Kings Highway Baptist Church.
- Personal network.





Email Outreach

- Celebrating Diversity, Equality, and Community.
- On the occasion of Black History Month.
- Recognizing the issue of underserved African Americans.
- Accepting responsibility for our role as a blessing to serve. This is mission.
- Pledging not just to *teach*, but to *listen*, to *learn*. Promoting the survey.





Website Outreach

- Article addresses issues and embraces our role.
- Linked to our survey and shared initial results.
- Multi-media presentation.
- Shared internally & externally.
- Audience prospective patients & participants, but also partners and funders.
- Recognized pilot partners/funders.



From Foundation site, go to: **Learn/Our Purpose/Underserved Communities**



Magazine Article

- A "special publication" of the Arkansas Times.
- Focused on minority populations where there are higher rates of:
 - Food deserts
 - Life-threatening diseases
 - Social distress & challenges
- Our article was double-sized & dual language.
- Great job, Communications Team.



Did you know that hospice care is an option for patients facing serious illness or end-of-life decisions? That specialized care, aimed at providing comfort while allowing a patient to retain their dignity, is available to anyone on Medicaid, Medicare, and most private insurances.

There's a conception that hospice care only happens in hospice care facilities. However, about 60 percent of all hospice patients are cared for at home or in a residential facility, places that provide the comfort of familiarity in the final days.

Going into hospice doesn't mean you give up your doctor. Instead, other team members are added to your care, including a chaplain, social worker, nurse, certified nursing assistant and other professionals who excel in end-oflife care. Hospice care is not reserved for the elderly. It's an endof-life service for anyone. Arkansas Hospice, a community-based not-for-profit organization, even has a pediatric unit to assist children and their families.

That care doesn't end after a patient's death. Bereavement services are made available to patient families and any member of the community for a minimum of 13 months after the patient has passed away.

A recent study by the Icahn School of Medicine at Mt. Sinai shows higher quality services and better outcomes for patients and family with hospice.

If you would like more information on hospice care, contact Arkansas Hospice at (877) 713-2348 or by visiting arkansashospice.org.



Magazine Ad

Communications also developed ads addressing two destructive myths persisting in African American communities about hospice:

- 1. Does *not* mean "giving up" on loved ones.
- 2. Not a place where patients are left care is most often at patient's home, surrounded by family, loved ones, community and church leaders...





Radio Ads

- Aired on stations popular in the local community.
- Aired four months in 2015 & 2016, including the holiday season.
- Spoke directly to common misconceptions:
 - Not a place to die, can stay at home with all loved ones
 - Covered by Medicare, Medicaid, VA, private insurance







Social Media



Blacks less likely than whites to use hospice care Tanika Nabrit had always thought hospice was a place where people wen Even after her mother, Josephine Bell, a bighearted woman who cared for everyone as if they were family, learned in September 2014 that she had...

DISPATCH.COM

939 people reached



Published by Corey Gilmore (?) - September 15, 2015 - €

Hospice care is on the rise in the U.S., as half of white Medicare reci enroll in hospice care before death. But black Americans are signing much lower numbers. HuffPost Live takes an in-depth look at why th racial divide in hospice care.



Why Don't Black Americans Trust Hospice Care? -HuffPost Live

Hospice care is on the rise in the US as half of white Medicare recipients en hospice care before death. But black Americans are signing up in much low

LIVE.HUFFINGTONPOST.COM I BY NANCY REDD

338 people reached

A Racial Gap in Attitudes Toward Hospice Care

Suspicions about end-of-life options remain strong among many African-Americans. Some doctors and clergy members are going to church to reshape

NYTIMES.COM I BY SARAH VARNEY

Arkansas Hospice

Published by Corey Gilmore [?] - August 31, 2015 - @

nationally and in Arkansas, hospice services to minorities are

http://www.nytimes.com/.../a-racial-gap-in-attitudes-toward-h...

What does it mean that "African Americans and other minorities are at

greater risk of not dying well," as Duke Divinity School Professor Richard

Payne says? Since our mission is to provide end-of-life care to everyone

disproportionately low. Stories like this one help to illustrate the problem,

about our work to address this problem? Or do you have something to

share that would help us learn more about it? Please leave feedback or

raise awareness, and point toward solutions. Would you like to learn more

absolutely equally, it means that we have work to do, because it's true:

169 people reached

contact us today.

Boost Post

A Matter Of Faith And Trust: Why African-Americans Don't Use Hospice

Even as end-of-life planning gains favor with more Americans, African-Americans, research shows, remain very skeptical of options like hospice and advance.

1,211 people reached

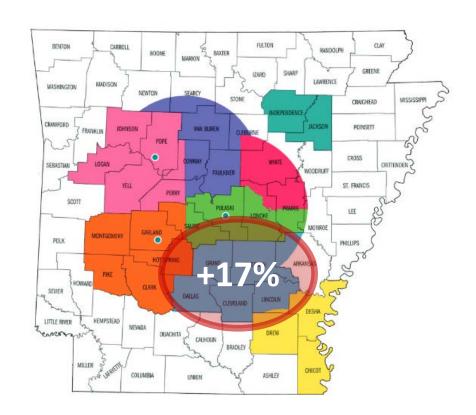
Boost Post





Did it work?

- In 2016 Arkansas Hospice dropped a full percentage point in service to African Americans, a 10-year low.
- Percentage change from 2015 was -9%.
- Site-by-site, percentage change from 2015 was **-26**%.
- One of the few sites with an *increase* in the percentage of African American patients served in 2016 and the largest by far was... **Pine Bluff at +17%**.







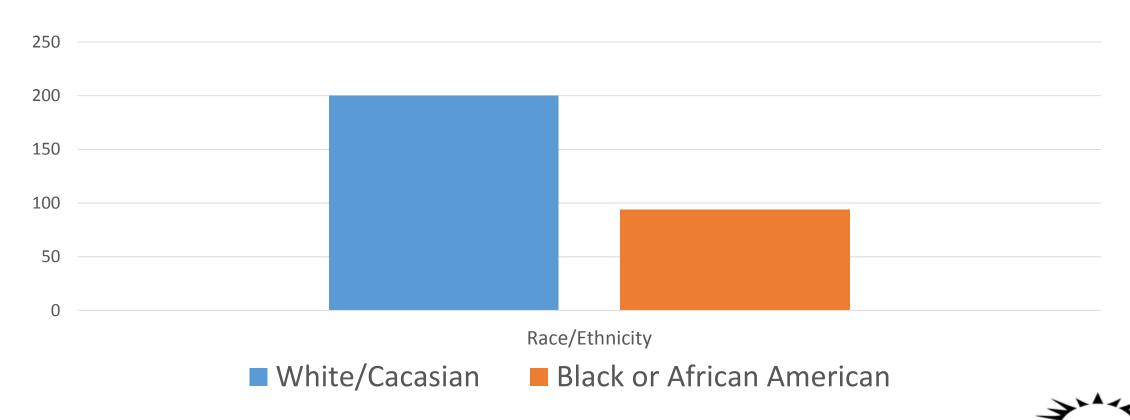
Survey Results

Areas of significant difference between our African American and Caucasian respondents.



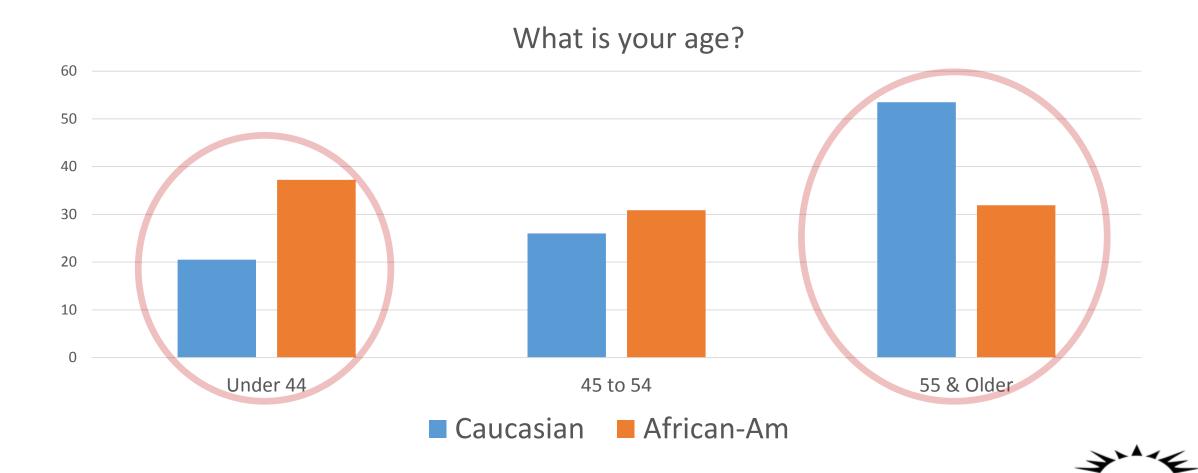
Our Respondents

Which race/ethnicity best describes you?



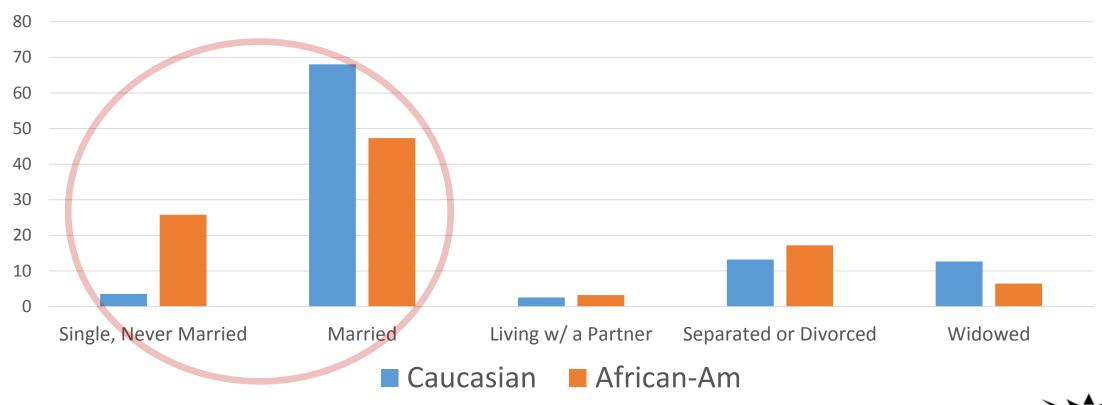


Significant Age Difference



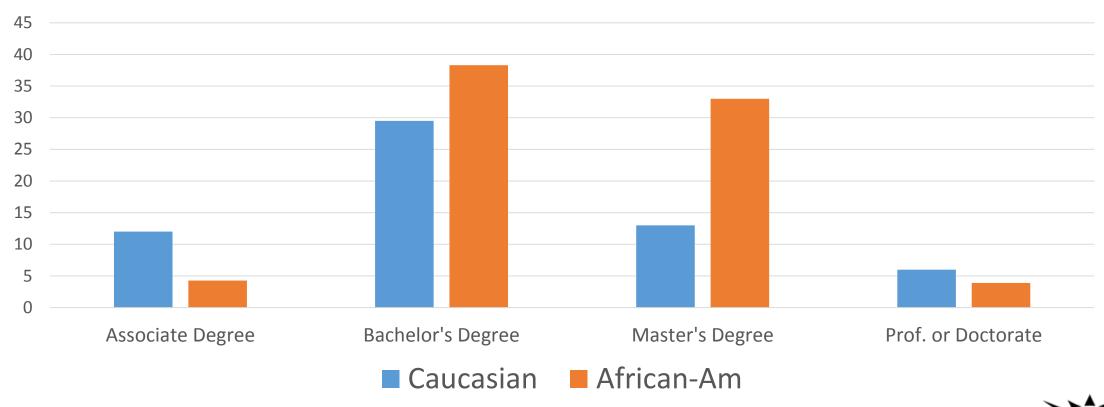
Significantly More Single African Americans





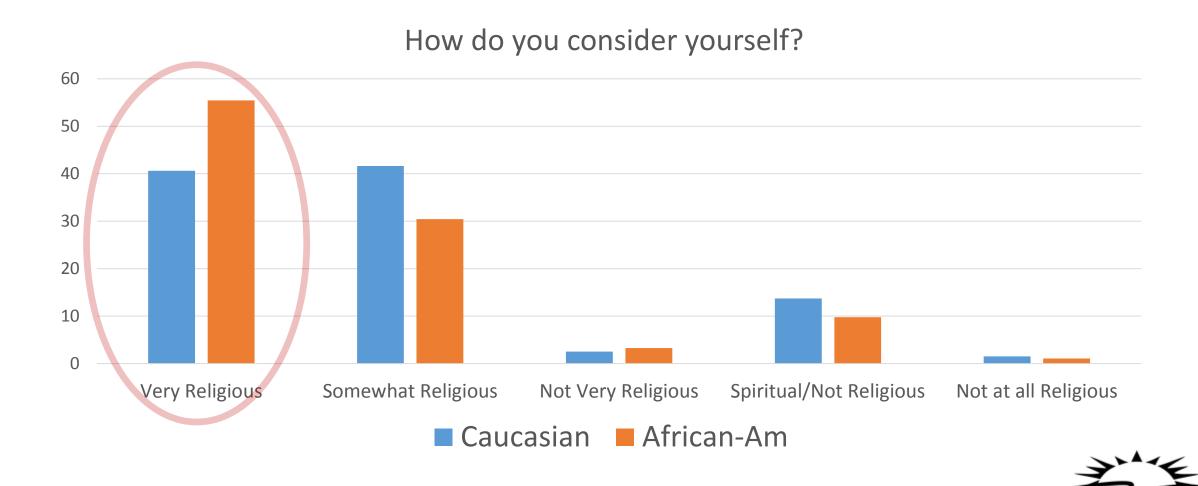
African Americans More Highly Educated

What is the highest level of education that you completed?



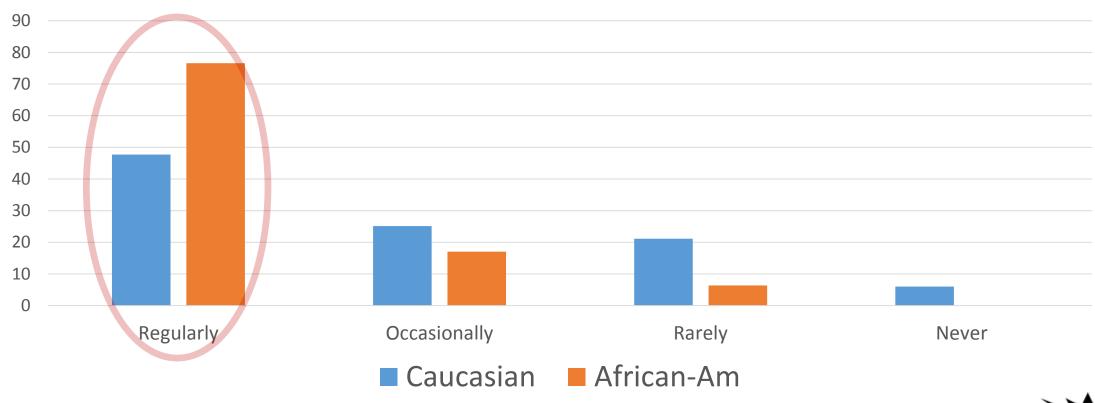


African Americans More Religious



African Americans More Church-Going

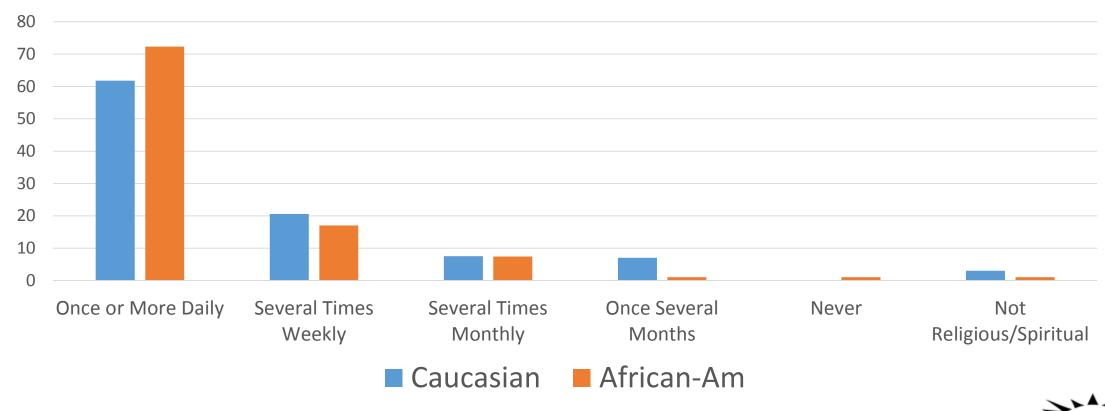
How often do you attend religious or spiritual services?





Strength from Spirituality Similar

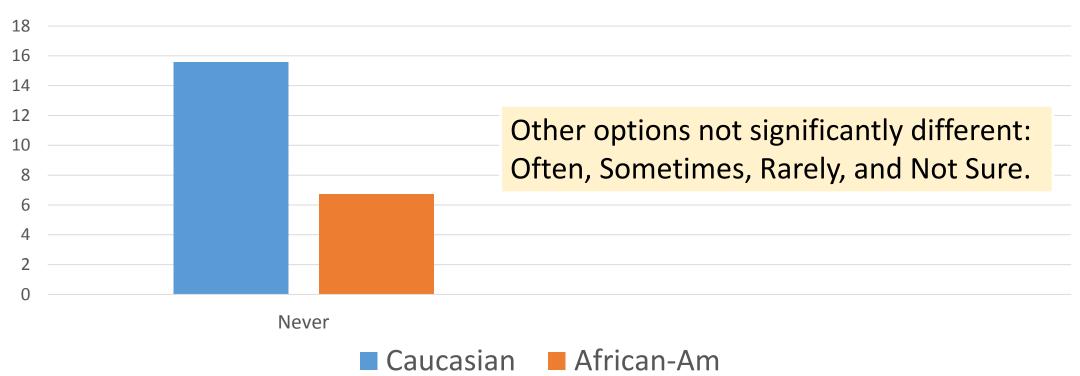
How often do you find strength in your religion or spirituality?





More Caucasians Never Talked about Death

Growing up, how often did your family talk about death or dying?

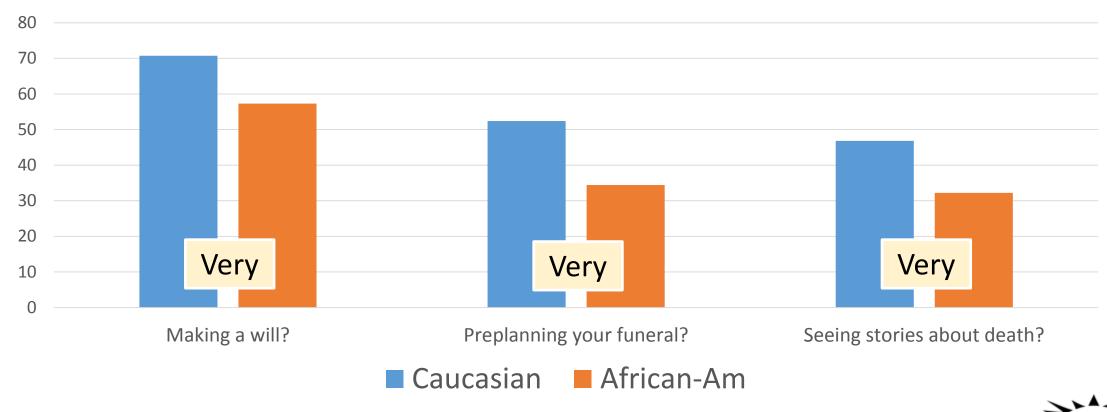






Advanced Planning Favors Caucasians

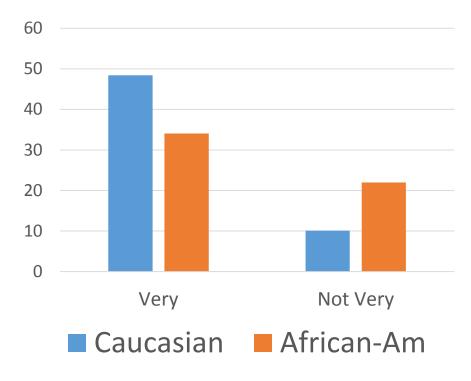




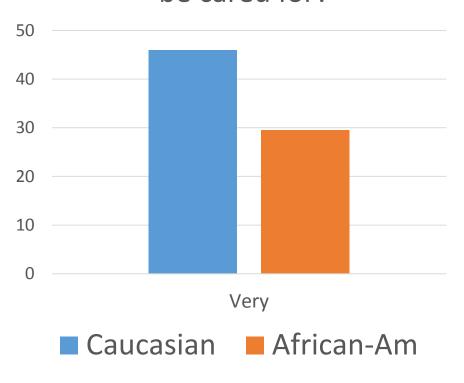


Caucasians Significantly More Confident

... that loved ones know how you would want to be cared for?



... that you know how your loved ones would want to be cared for?

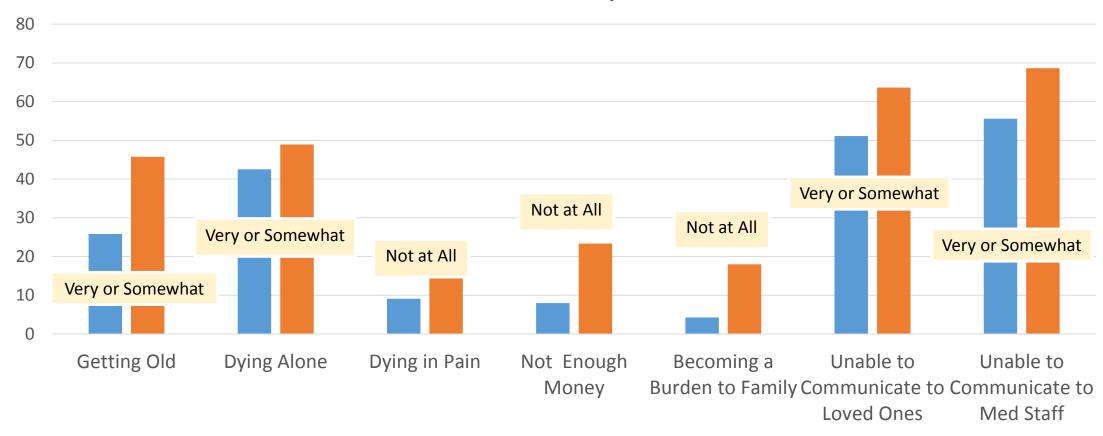






End-of-Life Fears

How afraid are you of...



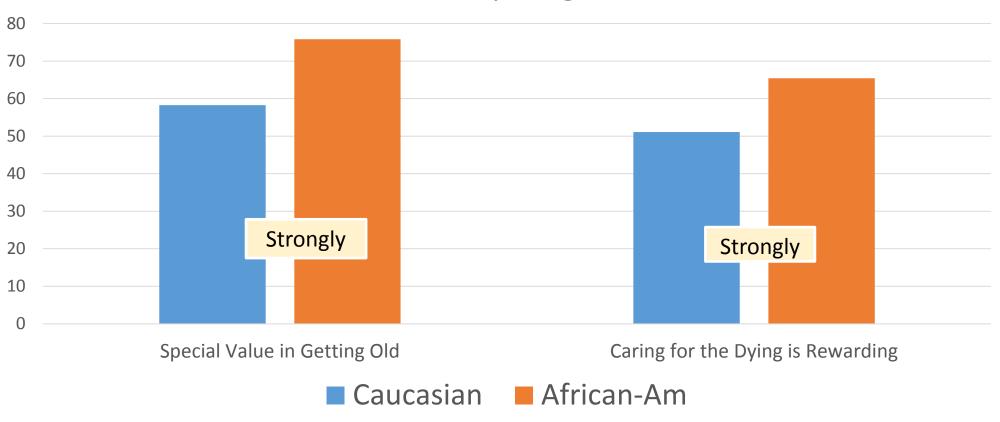






Aging and Dying, Differences

How much do you agree that...







Aging and Dying, Similarities

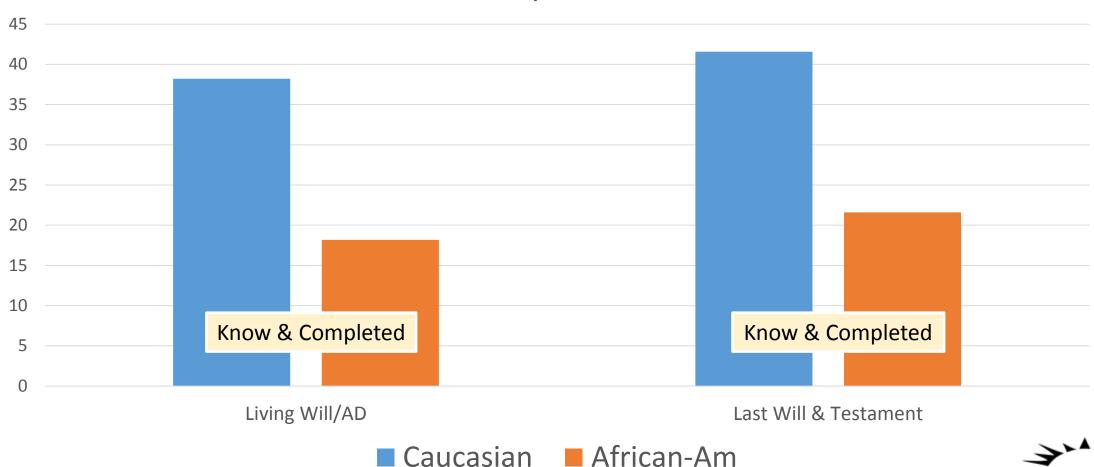
African Americans and Caucasians are much agreed that...

- Dying is an important part of life.
- You would want to know when you're going to die.
- Making peace with yourself and loved ones before you die is important.



Wills and Advance Directives

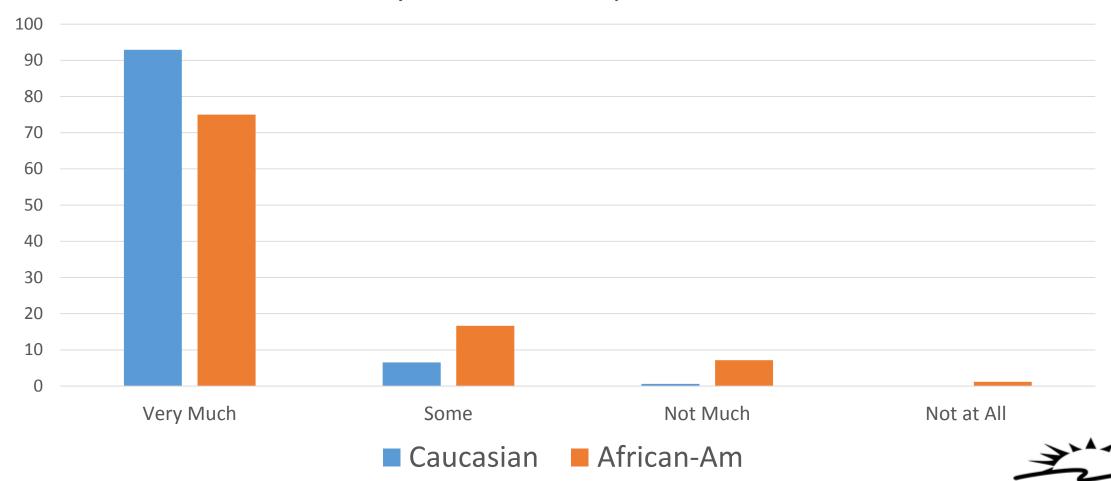
How much do you know about...





The Big One, Part 1

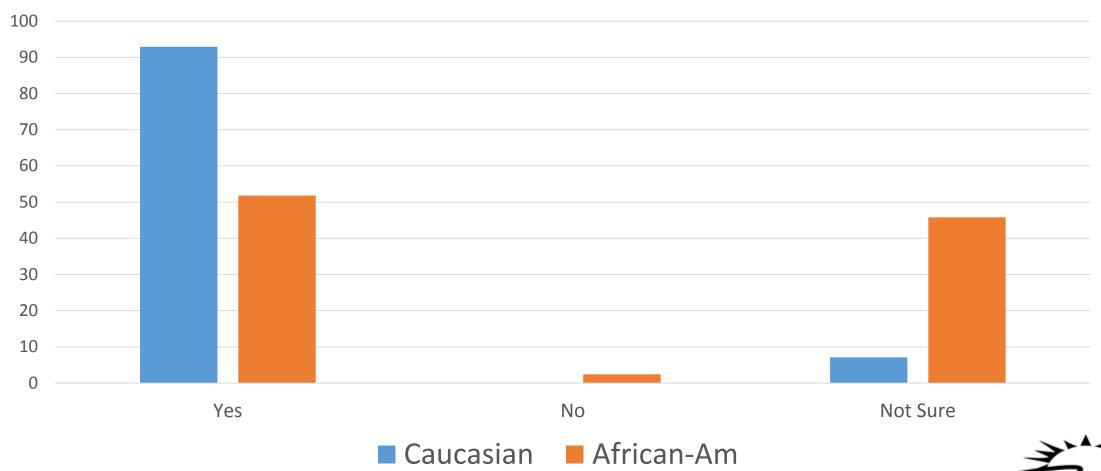
Have you heard of hospice services?





The Big One, Part 2

If you were dying, would you want hospice services?





Recommendations

Possible Next Steps



Recommendations

- Do research
- Evaluate data
- Get program and executive buy-in on proposal
- Create plan, assign responsibilities, and set goals
- Prospect funders and develop community partners
- Implement plan
- Report results
- Evaluate and strategize







Recommendations, Next Steps

- Continue what we started.
 - Do what works.
 - Develop toolkit.
- Expand effort:
 - Iteratively? Repeat model in next area.
 - Broadly? Assume entire service area is next goal & go for scale.
 - Funding should realize program plans.
- Train:
 - Use remaining funds to begin training with Just Communities of Arkansas.
 - Start with Leadership Team, then plan growth.
 - "If you can't hire diversely, then train for diversity."
- Increase staff diversity.
- Increase board diversity.



From NHPCO's *Inclusion and Access Toolbox:*Assess, Engage, Educate, Evaluate, *Repeat*

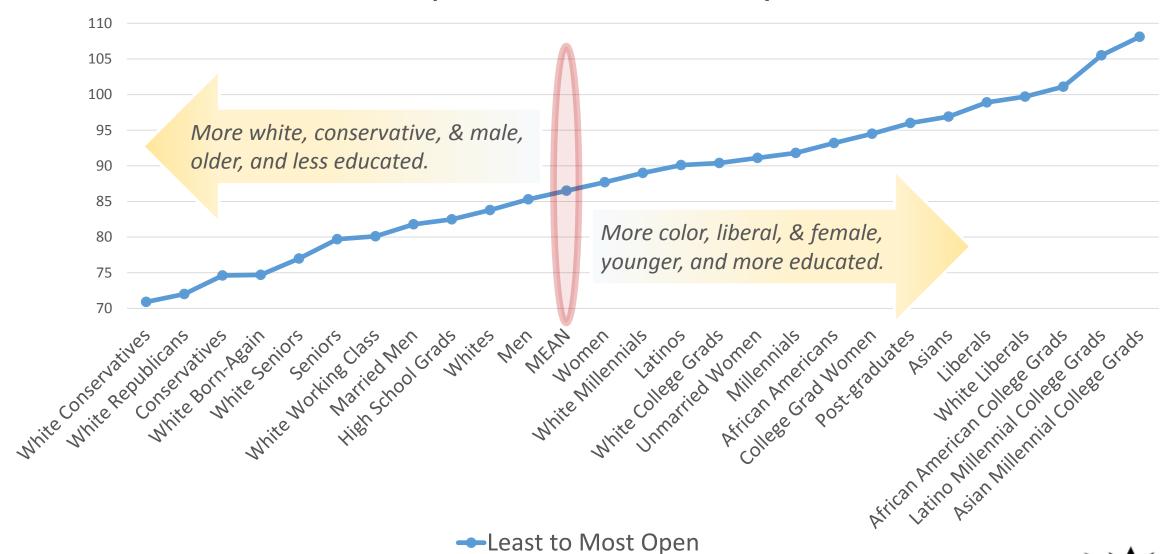


Arkansas Hospice's Organizational Diversity

	% Staff	% Boards	% State	% Nation
Caucasian	74.9	93.5	79.5	77.1
African American	12.4	6.5	15.7	13.3
Asian	0.5	0	1.6	5.6
Latino	0.9	0	7.2	17.6
Unknown	11.3	0	0	0



Openness to Diversity



More Recommendations

Maintain & grow partnerships, including:

- Michelle R. Smith, director of Office of Minority Health & Health Disparities
- Michael Knox, former director of Arkansas Minority Health Commission
- Donald Wood, executive director of Just Communities of Arkansas
- Arkansas Black Hall of Fame Foundation and our other funders, including Komen Arkansas
- Health Care Community and Arkansas Dept. of Health
- Area Agencies, Community Organizations, Churches, etc.
- Many Regional, National, & Governmental Organizations



Michelle R. Smith, PhD, MPH





Thank You

Linda Bateman & Sherry Collins in Pine Bluff
Judy, Andy, and Donald
Dan Marchetti
Corey, Scott, and Tim
Our Boards
Our Funders
Our Community Partners
Our Survey Respondents

Most importantly, our patients and their loved ones and our staff who serve them every day. Specific thanks to our African American patients and families.

We recognize that social justice doesn't just happen, and it's not just our responsibility, it's our privilege to serve the cause. It's our mission.

