



National Minority Health Month



The Office of Integrated Health invites you to join us in celebrating of **National Minority Health Month!**

Throughout April, the nation will focus on health disparities faced by minority populations in the U.S. The purpose is to increase knowledge related to wellness by promoting regular screening practices for early identification of disease and its complications.

Booker T. Washington is credited with starting the movement, which was aimed at focusing on minority health disparities with the establishment of National Negro Health Month in 1915. As a result, and more than 87 years later, the U.S. Congress passed the House Concurrent Resolution Bill 388 in 2002, which states:

“A National Minority Health and Health Disparities Month should be established to promote educational efforts on the health problems currently facing minorities and other health disparity populations.”

This bill encourages -

“All health organizations and Americans to conduct appropriate programs and activities to promote healthfulness in minority and other health disparity communities” (3).

What is Health Equity?

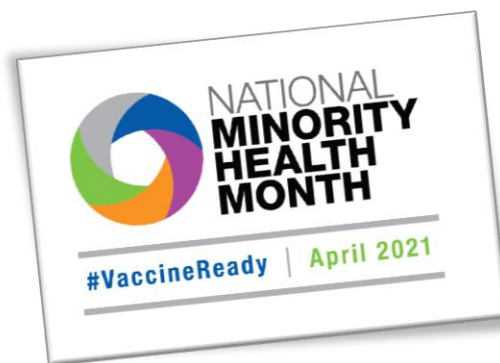
- Health equity is achieved when everyone has a fair and just opportunity to be healthier.
- This is when all people, no matter what their gender, sexual orientation, gender identity, disability status, social class or socioeconomic status, religion, culture, immigration status, education, or health conditions have a fair and just opportunity to reach their best health (1).
- Equality means giving everyone the same thing, whereas **equity** means giving people what they need.

What is a Health Disparity?

- A disparity exists when there is a preventable difference among groups of people relating to disease, injury, violence, or opportunity to achieve health.
- Examples: More African American children die from asthma compared to children who are non-Hispanic white (1). More African American and Hispanic adults died from COVID-19 than did non-Hispanic white adults.

The Importance of Health Equity

- Good health is an essential part of life for everyone.
- Health quality is directly impacted by where a person lives, their educational opportunities, available employment and recreational activities.
- The health quality of any country's citizens is a reflection of the well-being of the country itself, and its economy (1).



2021 HHS National Minority Health Month Focus

- The U.S. Department of Health and Human Services (HHS) theme for 2021 is **#VaccineReady**.
- Vaccine awareness empowers minority communities to:
 - ✓ Get the facts about COVID-19 vaccines.
 - ✓ Share correct vaccine information.
 - ✓ Participate in clinical trials.
 - ✓ Get vaccinated when their time comes.
 - ✓ Practice COVID-19 safety measures, such as social distancing, wearing a mask when in public spaces, and regular hand washing or hand sanitizing (2).

App of the Month



"The Safe Place" is a Minority Mental Health App geared towards the Black Community. This Free App features Black Mental Health Statistics, Inspirational Black Quotes, Self-care Tips on How to Cope after Police brutality, Mental Health in the Black Church, How to talk to black family members who may not want to understand mental illness, Breathing techniques, Meditation, Exercise, Mental Health Videos and Podcast, Mental Health Articles, Open Forum Discussions, And More! (App of the Month is not endorsed by DBHDS Office of Integrated Health. User accepts full responsibility for utilization of app).

References

- (1) Minority Health and Health Equity. (2019, April). Get Active and Healthy this National Minority Health Month. The Centers for Disease Control and Prevention (CDC). <https://www.cdc.gov/healthequity/features/minority-health-month/index.html>
- (2) Office of Minority Health. (2021, March). National Minority Health Month. <https://minorityhealth.hhs.gov/omh/Content.aspx?ID=21522&lvl=2&lvlid=12>
- (3) The National Institute on Minority Health and Health Disparities. (2021, March). National Minority Health Month. U.S. National Institute of Health (NIH). <https://www.nimhd.nih.gov/programs/edu-training/hmhm/>



ABA Snippets ...

Scope of practice v. scope of competence

Scope of practice refers to activities that credentialed or licensed professionals are authorized to engage in, whereas scope of competence consists of the professional activities that the individual practitioner is able to perform at an acceptable criterion level (3). A scope of practice for a profession is governed and regulated by credentialing bodies or licensure boards, while scope of competence derives from the individual practitioner's relevant higher education, prior and/or ongoing supervised direct experience with skilled supervisors, engagement in continuing education and professional development, and contact with the pertinent professional literature (3) (2) (4). To offer an analogy, it should not be expected that a non-verbal individual with a limited imitative repertoire would be able to quickly master and fluently emit complex ASL signs, just as it should not be expected that a behaviorist with no experience working with neurodegenerative diseases would be able to adequately implement a language and memory program for an individual with Alzheimer's disease. Ethical codes outline boundaries of competence requirements (e.g. (1), (5) and behaviorists must be able to detect their own professional limitations and be aware of the risks associated with practicing outside of one's scope of competence, including but not limited to adverse outcomes for the consumer, as well as potential negative professional impacts for both the individual behavioral practitioner and the larger field of behavioral services (3).

References

- (1) Behavior Analyst Certification Board. (2014). Professional and ethical compliance code for behavior analysts. Littleton, CO: Author.
- (2) Behavior Analyst Certification Board. (2020). Recommendations for respecializing in a new ABA practice area. Littleton, CO: Author.
- (3) Brodhead, M. T., Quigley, S. P., & Wilczynski, S. M. (2018). A call for discussion about scope of competence in behavior analysis. *Behavior Analysis in Practice*, 11(4), 424-435.
- (4) Shook, G. L., & Van Houten, R. (1993). Ensuring the competence of behavior analysts. In R. Van Houten & S. Axelrod (Eds.), *Behavior analysis and treatment* (pp. 171-181). Boston: Springer
- (5) Virginia Positive Behavior Supports (2016). Code of ethics. Richmond, VA.

Oral Health Pearls of Wisdom

The Importance of Good Oral Health on Overall Health

This groundbreaking report confirmed the importance of oral health surveillance. Focused attention to changes in your oral health, is an important first step in maintaining your general health. For example, bad breath *may not* be related solely to what you ate for lunch. Bad breath *may* indicate a throat infection. Similarly, tooth decay *may* progress and form an abscess (a pocket of infection/bacteria). When the bacteria from the abscess moves into the bloodstream, it *may* lead to sepsis, which can be fatal.

Consider this: bacteria-laden air from your mouth (due to tooth decay), which is then inhaled into your lungs, has the potential to start or exacerbate a respiratory infection (1). By the same token, chronic health conditions (such as diabetes), may prevent oral infections or periodontal disease from healing properly. Additionally, oral infections can also impact blood sugar levels and cause instability (2). Recently, researchers have discovered more severe cases of COVID-19 among those individuals who have periodontal disease (5). Now we have one more important reason to maintain good oral health!

Always remember, when any part of the body is infected or diseased, (including the mouth), there is a corresponding negative effect on the entire body. While maintaining a healthy mouth will not completely prevent or cure another health condition from occurring, it may help prevent a further decline in health or a life-threatening health situation, such as sepsis (1). Daily brushing of the teeth and tongue, flossing, and routine professional dental care is vital to a healthier mouth and a healthier body!

References:

- (1) Kane, S. F. (2017). The effects of oral health on systemic health. *Gen Dent*, 65(6), 30-34.
- (2) Kanjirath, P. P., Kim, S. E., & Inglehart, M. R. (2011). Diabetes and oral health: The importance of oral health-related behavior. *American Dental Hygienists' Association*, 85(4), 264-272.
- (3) Shmerling, R. (2018, April). Gum disease and the connection to heart disease. <https://www.health.harvard.edu/diseases-and-conditions/gum-disease-and-the-connection-to-heart-disease>.
- (4) United States, Public Health Service, Office of the Surgeon General, National Institute of Dental & Craniofacial Research (2000). Oral health in America: A report of the surgeon general. US Public Health Service, Department of Health and Human Services.
- (5) Zachary, B. D., & Weintraub, J. A. (2020). Oral Health and COVID-19: Increasing the Need for Prevention and Access. *Preventing Chronic Disease*, 17.

Up Coming OIH Caregiver Training Sessions:

“When to Call 911” and Choking - Thursday April 22, 2021 between 1:00 p.m. – 3:30 p.m.

Register in advance for this training session: <https://dbhds.zoomgov.com/meeting/register/vJltd-6oqzliGYjGgFTfDgKKCUWbXBNMkb4>

The Fatal Seven -Tuesday May 11, 2021 between 1:00 p.m. – 3:30 p.m.

Register in advance for this training session: <https://dbhds.zoomgov.com/meeting/register/vJltcuivqDwtE2-rV8v5axLNYx1y4AS4kjo>

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