

**15th Annual Summer Public Health Research Institute and
Videoconference on Minority Health**

*Breaking the Cycle: Investigating the Intersection of
Educational Inequities and Health Disparities*

www.minority.unc.edu/institute/2009/

Report to the American College of Epidemiology

Presenters: Reginald Weaver, Dina Castro, Nicholas Freudenberg, Lillian Sparks (titles and biographies are at www.minority.unc.edu/institute/2009/)

Moderator: Howard Lee, MSW – first African American (since Reconstruction) to be elected mayor of a predominantly white southern town, first African American to serve in the governor's cabinet in North Carolina, two-term state senator, first African American chair of the NC State Board of Education, Executive Director of the Governor's Education Cabinet.

Conference Location and Date: Satellite and Internet broadcast from the UNC School of Social Work Tate-Turner-Kuralt Building Auditorium, Tuesday, June 9, 2009

Presented by: UNC Diversity and Multicultural Affairs
UNC Gillings School of Global Public Health Minority Health Project
(UNC Program on Ethnicity, Culture, and Health Outcomes, ECHO)

Cosponsors: 21 financial, 4 in-kind, plus 7 endorsements (see list at www.minority.unc.edu/institute/2009/cosponsors.cfm)

Websites: 40 non-UNC websites listed the 15th Annual Videoconference as of 7/8/2009. The program was carried live on blackradionetwork.com

Estimated live viewing audience: 1,000

Archived webcast visitors: 160 visitors to the archived webcast page as of 10/8/2009 (about 40/month). Half submitted a registration form. Of these:

- came from 26 states plus Canada
- were affiliated with educational organizations (53%), health departments (17%), community/consumer groups (10%)
- half asked to receive email announcements.

There were also 60+ visitors who registered to view a previous Videoconference.

Selected comments (see end for more):

- "Excellent panel of speakers. They all shared information relevant to our current efforts in addressing health disparities.
- "This presentation solidified my commitment to school based health programming and highlighted the need to advocate for new funding formula's if we are to truly achieve educational and health equity."
- "The videoconference was a real learning experience for me as a graduate student...."
- "I have shared content with members of the NC School Community Health Alliance, and the State Leadership Network through the National Assembly on School-Based Health Care. I have also recommended that they look for the webcast online...."

Registration statistics summary

Group viewing sites

92 group viewing sites registered, from 28 states (North Carolina and New York each had 10 sites). Primary locations for sites (Table 1) were educational/ research organizations (32), local health departments (24), and other government and municipal agency (17).

Table 1. Group viewing sites, by category

	N	%
Educational, / Research organizations	32	35
Health Department	24	26
Other govt, Municipal Agency	17	18
Hospital, Medical Practice if Nursing Home	6	7
Community Organizations	4	4
Other	9	10

Registered participants

928 registrants (onsite plus webcast), from all 50 U.S. states (especially North Carolina [255], California [52], Texas [38], and FL, GA, MD [36 each]) and 10 countries (includes 15 from Canada, and 1-2 each from Africa, Argentina, Barbados, Guatemala, India, Singapore, U.K.). Registrations came from health care professionals (32%), faculty/administrator (17%), students (12%), and researchers (8%) (Table 2).

Table 2. Videoconference participant professions

	N	%
Health care professional	297	32
Faculty/Administrator	161	17
Student	113	12
Researcher	76	8
Social Scientist	53	6
Public Health Professional	40	4
Health Educator	14	2
Other	167	18

Evaluation response summary

Site facilitators

Online evaluation forms were received from 40 site facilitators. Just over half of these received the broadcast (Table 3) and reported a total of 218 participants (about 10 participants per site excluding the two sites that were just taping). DVD copies of the

broadcast were mailed to several of the sites that were unable to view the live broadcast. Projecting the reported participants to all 92 sites suggests that there may have been 500 participants at group viewing sites.

Table 3. Group viewing site facilitator reports

	N
Received (two were only taping, several had audio difficulties or Internet delays)	23
Could not view – scheduling problem, power outage, "IT problem", firewall, could not install Flash, ...)	17
No response	52
Total	92

The 20 site facilitators who provided ratings gave very favorable ones: 80% said participants seemed engaged, 90% said participants found the material interesting and important, 74% said the time for presentations was about right, 63% said participants felt able to ask questions [63%], 100% said the website was well-organized, convenient, informative [100%], and 95% said that compared to others this broadcast was well organized and run. 90% said they would recommend this broadcast to other organizations.

Participants

Online evaluations were submitted by 321 participants (166 on a PC, 68 at a group viewing site, 27 in the studio audience; 60 left the question unanswered). About 50 respondents were unable to view the broadcast, because of time conflicts that arose or technical problems.

The overwhelming majority of participants who viewed the broadcast gave it favorable ratings (Table 4). Large percentages said that the "Videoconference increased my understanding of this subject and its relation to public health" (87% "strongly agree" or "agree"), "topics covered were important and relevant to the issue of health disparities" (96%), the Videoconference was "very valuable for me" (83%), and that they would "highly recommend the Videoconference" (84%).

Sample participant comments

"Excellent webcast; very worthwhile!"

"All speakers were excellent and very well versed in the subject matter"

"Amazing that I can "attend" a conference in North Carolina from my office in Davis, California. The videoconference made it possible for me to listen to very interesting presentations, particularly in an area that I have a great interest in, health disparities."

"I was very impressed by the information presented about the Native Children's Agenda."

"This is an excellent forum for dissemination of research results documenting disparities across disciplines. I greatly appreciate the opportunity for off-site learning made possible through the webcast."

"Very interesting information. Webcasts provide the option to stay abreast of public health information during a restricted travel period."

"The speakers were excellent and I appreciated the diversity in experience and background which really spoke to the intergenerational viewers of the videoconference and particularly, those in our communities who are underserved and underrepresented whom are faced with the reality of health and racial disparities on a day-to-day basis. This conference is integral to helping bridge these gaps by encouraging and facilitating 'TRUE' dialogue about the disparaging outcomes of certain racial, ethnic groups in our communities in an effort to develop solutions that are not just profitable, but that actually work."

"All four of the speakers presented valuable statistics and information that I had not been aware of before the conference regarding health disparities and education. I really enjoyed listening to the speaker who spoke about Native American Health challenges since that is a minority group that I feel is neglected much too often in health care in the general news."

"The speakers were well informed and their information was timely/helpful for me. As a white RN joyfully working in an African American Church located in a diverse urban setting, I need current information /solutions to assist clients with inequities / disparities.... "

"It was a thrilling experience for me. I have never attended a videoconference before, and it was liked I was there in the real conference. The information from every single speaker definitely related to and helped my work as a pediatric nurse at Public Health clinic...."

"I thought each presenter did an extremely good job in their presentation. The utilization of representatives from each "ethnic" group discussed was effective and provided the perspective of that particular group was made clear and understandable...."

To view all comments except the 67 not authorized for public dissemination, visit:
<http://www.minority.unc.edu/institute/2009/eval/comments.cfm>

To view 67 comments not authorized for public dissemination, please communicate with Victor Schoenbach,
vjs@unc.edu.

Table 4. Participant ratings (preliminary tabulation of 269 able to view)

The Videoconference increased my understanding of this subject and its relation to public health.

Strongly agree	86	35%
Agree	128	52%
Neutral	21	8%
Disagree (or Strongly)	13	5%

The topics covered today were important and relevant to the issue of health disparities.

Strongly agree	145	58%
Agree	93	38%
Neutral	8	3%
Strongly Disagree	2	1%

I could see and hear clearly.

Strongly agree	104	41%
Agree	96	38%
Neutral	22	8%
Disagree	19	8%
Strongly Disagree	11	4%

I was able to ask questions easily.

Strongly agree	31	13%
Agree	65	27%
Neutral	129	54%
Disagree	9	4%
Strongly Disagree	4	2%

Overall, the Videoconference was very valuable for me.

Strongly agree	89	36%
Agree	117	47%
Neutral	27	11%
Disagree	11	5%
Strongly Disagree	3	1%

I will highly recommend the Videoconference.

Strongly agree	102	41%
Agree	107	43%
Neutral	31	12%
Disagree	6	2%
Strongly Disagree	3	1%