BLACK SUICIDE
THE NEW BLACK HEALTH IMPERATIVE!

A rise in suicides among Black youths has Milwaukee counselors and psychologists working hard to raise awareness and prevent more deaths.

In Wisconsin, about one in 10 Black youths have reported attempting suicide, according to a brief from the Wisconsin Office of Children’s Mental Health. From 2016 to 2019, national suicide rates among Black males ages 15 to 24 increased by 47%.

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Dr. Lia Knox sits inside of Nō Studios, which hosts ‘Black Space,’ a program that provides group therapy for Black and brown residents. (Photo by Matt Martinez)
Adults younger than age 60 whose days are filled with sedentary leisure time (which includes using the computer, TV, or reading) and little physical activity have a higher stroke risk than people who are more physically active, according to a new research published today in Stroke, a journal of the American Stroke Association, a division of the American Heart Association. According to American Heart Association statistics, U.S. adults spend an average of 10.5 hours a day connected to media such as smartphones, computers or television watching, and adults ages 50 to 64 spend the most time of any age group connected to media. Data also indicate that stroke-related deaths decreased in 2010 among adults 65 years and older. However, death from stroke appears to be on the rise among younger adults, ages 35 to 64 years – increasing from 14.7 in every 100,000 adults in 2010 to 15.4 per 100,000 in 2016.

Previous research suggests the more time adults spend sedentary, the greater their risk of cardiovascular disease and increased stroke risk from prolonged sedentary time. Public health efforts to increase physical activity and reduce sedentary time in adults younger than age 60 could help to lower their long-term stroke risk.

RESEARCH HIGHLIGHTS:
• Adults younger than age 60 who spent eight or more hours a day during their free time using a computer, watching TV or reading and participated in little physical activity had an increased risk of stroke.
• Boosting physical activity may reduce or eliminate the increased stroke risk from prolonged sedentary time.
• Public health efforts to increase physical activity and reduce sedentary time in adults younger than age 60 could help to lower their long-term stroke risk.

To 64 years – increasing from 14.7 in every 100,000 adults in 2010 to 15.4 per 100,000 in 2016.

Simple CPR steps can save a loved one’s life

1. Call 911 if you see a teen or adult suddenly collapse
2. Push hard and fast in the center of the chest to the beat of a familiar song that has 100 to 120 beats per minute. Song examples include: “Stayin’ Alive” by the Bee Gees, “Crazy in Love” by Beyonce featuring Jay-Z, or “Hips Don’t Lie” by Shakira
3. Take 90 Seconds to Learn
   Visit heart.org/handsonlycpr to watch the Hands-Only CPR instructional video and share it with the important people in your life. Hands-Only CPR is a natural introduction to CPR, and the American Heart Association encourages everyone to learn conventional CPR as a next step. You can find local CPR classes, here in Milwaukee at heart.org/findacourse.

NOTE: The AHA still recommends CPR with compressions and breaths for infants and children, as well as victims of drowning, drug overdose, or people who collapse due to breathing problems.

Sedentary time is increasing in the United States and Canada,” said study author Raed A. Joundi, M.D., D.Phil., a stroke fellow in the department of clinical neurosciences at the Cumming School of Medicine at the University of Calgary in Canada. “Sedentary time is the duration of awake activities that are done sitting or lying down. Leisure sedentary time is specific to the sedentary activities done while not at work.

It is important to understand whether high amounts of sedentary time can lead to stroke in young individuals, as a stroke can cause premature death or significantly impair function and quality of life.”

In this study, researchers reviewed health and lifestyle information for 143,000 adults with no prior stroke, heart disease or cancer who participated in the Canadian Community Health Survey in years 2000, 2003, 2005, 2007-2012.

Researchers followed the participants for an average of 9.4 years and identified strokes through linkages with hospital discharge data.
Research Study Focused on Uncovering Impact of Racial Segregation on Breast Cancer Survivors

Participants still being sought for Breast Cancer Race and Place project

An ongoing research study being conducted by the Medical College of Wisconsin is interviewing breast cancer survivors in Milwaukee and southeast Wisconsin to help determine how someone’s neighborhood, home life, access to care, and other factors impact health outcomes.

The Breast Cancer Race and Place project is interviewing more than 100 women from Black, Hispanic, and non-Hispanic White populations who have survived breast cancer. The interviews are part of a broader study that is seeking to better understand how racial segregation impacts the ability of women to access care and recover from breast cancer.

The interviews and related research efforts have been taking place for several years with individuals in Milwaukee, Racine, Kenosha, Ozaukee, Washington, and Walworth counties. The project is funded by the National Cancer Institute. Additional breast cancer survivors are being sought to complete that part of the research study.

While the research and interviews are continuing, Dr. Young has noticed some early trends from the information gathered so far. These include:

- The need for support at the family level or from within the community, which could include support groups or organizations.
- The need for health information to be clearly and thoroughly explained by the physician or caregiver, both when the diagnosis is made and during treatment.
- The importance of advocacy, meaning a patient advocating for themselves or having a family member or friend with them when getting a diagnosis or receiving care.

Being an advocate means speaking up and asking questions if someone doesn’t understand what a physician is saying or doesn’t agree with the care plan.

It’s been a very interesting process. We have found that people are open to talking about their diagnosis and their own personal journeys. It’s been humbling for me to have individuals so willing to talk about their life, Dr. Young said.

The majority of the interview process itself consists of a conversation about the individual’s life and their experience when receiving the breast cancer diagnosis and how they carried on during treatment, Dr. Young said.

Interview questions also pertain to the type of care a person received, how well they were able to access the care, support they received (or didn’t receive) from family members and friends, and where they lived when receiving treatment, including the home or apartment where they resided and the neighborhood in general.

Participants have ranged in age from people in their 30s to those in their 80s.

Staci A. Young, PhD, is associate professor and director, Center for Healthy Communities and Research in the Department of Family and Community Medicine at the Medical College of Wisconsin, is helping lead the research efforts related to collecting information from breast cancer survivors.

“Many of the participants say they are doing this so they can hopefully help someone else, or help raise awareness about screening, or encourage someone else to seek needed support or share their experience with others.”

The Breast Cancer Race and Place project is still taking new participants. Those interested in learning more can call 414 955-8325 or breastcancer@mcw.edu.

Information from the interviews being conducted by Dr. Young and others is part of a broader study looking at what drives disparities in breast cancer survivorship in different parts of the region.

Kirsten Beyer, PhD, MPH, MS, who is an MCW faculty member in the Division of Epidemiology in the Institute for Health & Equity, is overseeing research focused on mapping where the disparities in survivorship exist in the community.

Dr. Beyer’s data-driven research will be supported with the personal experiences that Dr. Young and others are collecting with a goal of identifying ways to develop community-based interventions and policies to reduce health disparities.

Anyone who is a breast cancer survivor, or knows someone who is a survivor and may be willing to tell their story, is encouraged to call or email Carolina Cueva or Courtney Jankowski at 414 955-8325 or breastcancer@mcw.edu.

Additional information can be found at mcw.edu/bcrp.
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**BLACK SUICIDE**

(continued from front page)

In Black females, the increase was 59%.

Dr. Steven Dykstra, director of Milwaukee County’s Children’s Mobile Crisis Team, said the numbers were likely higher than they would have been a decade ago.

“For every kid that does kill themselves, there are dozens, if not hundreds, who have tried to kill themselves,” Dykstra said.

“For every attempt, there are dozens, if not hundreds, who are in distress thinking about it. We need to be thinking about those kids.”

Since 2011, 50 Black youths at or below the age of 24 have died by suicide, according to data from the Milwaukee County Medical Examiner’s Office.

Twelve were teenagers and two were younger.

While the Black and Latinx populations have historically had lower suicide rates than the white population, the groups have started to pull even in recent years. Suicide rates among Black youth are increasing faster than any other racial group, according to a 2019 congressional report.

A difficult conversation

Dr. Lia Knox, a behavioral health consultant and psychologist in Milwaukee and contributor to Black Space, a mental health space for people of color, said stigma and shame make suicide a hard topic to discuss.

“It was not spoken about in our Black communities. It was swept under the rug,” Knox said.

Another challenge comes when kids don’t feel comfortable sharing their feelings with family because they need parent permission to get counseling or seek therapy, she said.

Knox added some children also may not feel comfortable expressing themselves because they often are punished for acting out or misbehaving, which may actually be cries for help.

Last, living in an environment where youths don’t feel safe, lack stable housing can make these issues even worse, she said.

Dr. R. Kweku Smith, president of BLAQUESMITH, a psychological consulting firm, said such conditions lead many youths to believe they won’t be able to achieve their goals in life.

“Suicide is always the result of hopelessness,” Smith said, “when someone says ‘tomorrow can’t be a better day’ and ‘today was the worst day.’”

Eddie Cannedy, a community health advocate who uses the pronoun they, knows firsthand how that feels. They contemplated suicide when they were young.

Growing up in Harambee, Carri-

Kan said they were exposed to poverty, food insecurity, the criminal justice system and isolation.

“I felt like I was never going to be able to claw my way out of any of this,” Cannedy said.

Cannedy said they now practice radical autonomy—the act of sur-

viving despite these barriers.

“You can’t let it destroy you,” Cannedy said. “You can’t let it win. I can’t prove it right. I decided I have a right to exist.”

Now 26 and living in the Amani neighborhood, Cannedy said those struggling have more power than they think, particularly members of the LGBTQ+ community.

“It’s enough to just stand in your existence,” Cannedy said. “Some other person might just need to see a trans person just existing. Living their life. It might inspire them to keep going.”

A call to action

Smith said addressing the root causes of income inequality and social injustice is one way to com-

bat suicide. He issued a call to ac-

tion for everyone in the community.

“This is a conversation we need to be having 24/7, 365,” Smith said.

And he has a message for struggling.

“I invite them to believe in those dreams,” Smith said. “If things were better, what would you be? Where would you go?”

Knox stressed the importance of adults paying attention to young people and earning their trust.

“Let them know you see them,” Knox said. “They feel so invisible. That’s the way our society has been treating our Black youth—as though they’re invisible.”

Resources you can use

For the national suicide hotline, call 800-273-8255, or 800-273-TALK for the County Cri-

sis Line is 414-257-7222.

For a text-based resource, you can text Hopeline to 741-741. For the Trevor Project, a suicide pre-

vention resource for LGBTQ+ youth call 866-488-7360.

For a full list of mental health services for kids, check out our previous NNS reporting.

*Article courtesy of Neighborhood News Service*

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Where to find mental health resources in Milwaukee as students return to in-person classes

By Matt Martinez—courtesy of Milwau-

kee Neighborhood News Service (NNS)

It’s a new school year, and kids might need access to mental health professionals as the pandemic has created more chal-

lenges for some.

Editor’s note: This story has been updated to correct the spelling of the last name of Charlie Bauernfeind, school coordinator for the School Community Partnership for Men-

tal Health.

As students return to in-person instruction after enduring a pandemic school year, they might need help from mental health professionals to navigate the next chapter of COVID-19.

Here are some resources:

- Mental Health America of Wisconsin has a searchable resource directory for Milwaukee organizations. Results can be filtered for children’s services and insurance status.
- Resources can also be found by calling or texting Impact 2-1-1. To text, send your ZIP code to 888-211.
- Shine Through, an initiative from the Children’s Hospital of Wisconsin, Sebastian Family Psychology Practice, Children’s Hospital of Wisconsin, Lutheran Social Services of Wisconsin and Upper Michigan, AMRI Counseling Services and Sixteenth Street Community Health Centers.
- What is a School Community Partnership for Mental Health? The program gets clinicians from six community providers: Mental Health America of Wisconsin, Sebastian Family Psychology Practice, Children’s Hospital of Wisconsin, Lutheran Social Services of Wisconsin and Upper Michigan, AMRI Counseling Services and Sixteenth Street Community Health Centers.

Bauernfeind, school coordinator for the School Community Partnership for Mental Health, said the program was expand-

ing this year to cover 37 schools.

Bauernfeind said all students have to do to get involved with the program is speak with support staff at their schools. Students will be able to access the services regardless of their ability to pay for them, Bauernfeind said.

Students at the following schools can par-

ticipate in the partnership:

- Audubon Technology & Communication Center Middle School – 3300 S. 39th
- Bay View High School – 2751 S. Lenox St.
- E. Burdick School – 4348 S. Griffin Ave.
- Benjamin Franklin School – 3008 N. W. Nash St.
- Mary McLeod Bethune Academy – 1036 N. 39th
- Samuel Clemens School – 3600 W. Hope Ave.
- Anna F. Doerfler School – 3014 W. Scott St.
- Andrew S. Douglas Middle School – 3620 N. 18th
- Engleburg Public School – 5100 N. 91st
- Martin Luther King, Jr. School – 3275 N. 3rd St.
- Forest Home Avenue School – 1516 W. Forest Home Ave.
- Godda Mar School – 1555 N. Dr. Martin Luther King, Jr. Drive
- Grantee Drive School – 4850 N. 88th
- Hopkins Lloyd Community School – 1503 W. Hopkins St.
- Humboldt Park K-8 School – 3230 S. 39th
- Auer Avenue School – 2319 W. Auer
- Green T. Jackson School – 2121 W. Hadley Ave.
- James Madison Academic Campus – 8135 W. Florist Ave.
- Albert E. Kaelg School – 1210 W. Mineral St.
- Keefe Avenue School – 1618 W. Keefe Ave.
- LaFollette Public School – 3239 N. 39th
- Lincoln Avenue Elementary School – 1817 W. Lincoln Ave.
- Milwaukee College Prep – Lloyd Street – 1228 W. Lloyd St.
- Milwaukee High School of the Arts – 2300 W. Highland Ave.
- Milwaukee School of Languages – 8400 W. Burleigh St.
- Next Door – 2545 N. 29th
- North Division High School – 1011 W. Center St.
- Oliver Wendell Holmes School – 2463 N. Butler St.
- Marvin E. Pratt School – 5131 N. Green Bay Ave.
- Ronald Reagan High School – 4985 S. 20th
- Riverwest Elementary School – 2765 N. Fratney St.
- Shalom High School – 1749 N. 16th
- Sherman Multicultural Arts School – 5110 W. Locust St.
- Henry David Thoreau Elementary School – 7878 N. 60th
- Westlawn Academy – 1945 N. 31st
- Zablocki Public School – 1016 W. Oklahoma Ave.
- Zilber Third Street School – 3618 N. 53rd

“The expansion schools on this list are expected to get full approval from the Board of School Directors in September. Services are already being offered at schools that were previously in the program, which can be found here.

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Adams Ave.
- Milwaukee College Prep – Lloyd Street – 1228 W. Lloyd St.
- Milwaukee High School of the Arts – 2300 W. Highland Ave.
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Life is not about limitations. It's about what is possible.

More breakthroughs and unmatched care mean more possibilities for you.

At the Froedtert & the Medical College of Wisconsin health network, everything we do revolves around you. Your needs, Your schedule, Your comfort, Your safety. Like offering virtual visits in minutes with our app. Delivering world-class cancer innovations close to home. Assuring that safety is a top priority – always. And restoring lives and hope with our adult Level I Trauma Center. Because by listening more closely and caring more deeply, we can make more humanly possible for you.

To find a provider close to you, call 1-800-DOCTORS or visit froedtert.com
MADISON - The Democratic members of the Assembly Mental Health Committee — State Representative Robyn Vining (D-Wauwatosa), Rep. Jonathan Brostoff (D-Milwaukee), Rep. Dave Considine (D-Baraboo), and Rep. Supreme Moore Omokunde (D-Milwaukee) — introduced a legislative package with five bills to support mental health care access for K-12 students, UW students, and veterans.


"Ensuring adequate mental healthcare for kids is critical not only for the wellbeing of our students, but also their academic success. Now more than ever, students need access to quality mental health resources and support.

In order for schools to meet their students' mental health needs, they need access to mental health providers and we need to better equip teachers with training on social and emotional learning. "The stresses of being a college student can weigh heavily on individuals who often have to balance a full academic load along with a job, internship, volunteer work, social life, and self care. These factors, along with..."
THE FLU SHOT

A Shot in the Arm for Protection
by Eric S. Quivers, MD FAAP, FACC

The winter 2020 influenza season was a very strange one. Influenza infections were down dramatically all over the world. In the United States, we had a test positivity rate of less than one percent, meaning less than one percent of the people who thought they had the flu tested positive for it.

The rate is usually between 20 and 30%. Deaths and hospitalizations from the flu were way down too.

Public health experts believe that the efforts to control the spread of COVID-19 infections through wearing masks, social distancing, and handwashing greatly reduced the spread of flu viruses.

That was last year; this year is likely to be different. We are not social distancing or wearing masks as we were globally last year. This is in part due to the effective COVID-19 vaccines that are available and have allowed reopening of the country.

As such, it’s strongly recommended that you get your flu shot to protect you from the illness because the risk of exposure appears to be greater this year. Also, we are still experiencing COVID-19 outbreaks across the country, so the ability to get care at a hospital may be affected. Many people with medical problems other than COVID-19 infections are experiencing difficulties in getting timely care.

The flu shot will protect you from getting sick and possibly needing to go to a hospital. If you are 65+, there’s a higher dose vaccine with four times the flu antigen targeted for the immune systems of older individuals. Those 65+ should make sure to ask for this shot.

Let’s stay healthy this flu season by getting our flu shots!
Pregnancy in the midst of a pandemic!

Latest CDC data reveals one-third of fully vaccinated pregnant U.S. women most vulnerable to deadly virus; Black and Hispanic pregnant women especially vulnerable

The latest data from the U.S. Centers for Disease Control and Prevention (CDC) indicates that only a third of all pregnant women in the U.S. are fully vaccinated against COVID-19, yet they are among the most vulnerable who are likely to experience severe complications from the deadly virus.

Black and Hispanic women who are pregnant could be at even higher risk, according to Michelle Albert, M.D., M.P.H., FAHA, volunteer president-elect of the American Heart Association and current president of the Association of Black Cardiologists.

"The CDC reports that only 33% of pregnant women have gotten the vaccine. Among those, only 18% are Black women and 28% are Hispanic women," said Albert, a professor of medicine at the University of California at San Francisco (UCSF), Associate Dean for Admissions for UCSF Medical School and a newly elected member of the National Academy of Medicine.

"People need to know the complications of the virus are much worse than risks of the vaccine. You need to be vaccinated to protect yourself, your unborn child, your family and your community."

As a clinician-scientist, Albert has devoted her career to researching health disparities among historically excluded people. She is currently studying the impact of the COVID-19 pandemic among Black women through a research grant funded by the American Heart Association's COVID-19 Rapid Response initiative. She said it's important to set the record straight on the health impacts of COVID-19 vaccinations for pregnant women and people of color at a time when misinformation is increasingly seen as a problem among Americans.

"Please use your trusted sources. You should trust your doctors and your other health care professionals to provide you with appropriate information around COVID-19," Albert said.

The American Heart Association, the world's leading nonprofit organization focused on heart and brain health for all, is supporting vaccination efforts and believes that following science-driven guidance is critically important.

"As a pregnant woman, should I get the vaccine?" Research shows COVID-19 can increase complications for pregnant women - significantly raising their risk of needing ICU care, premature birth and death, especially when compared to pregnant women without COVID-19.

Studies have shown that the vaccine is safe for women who are pregnant and they are no more likely to experience miscarriages than women who are not vaccinated.

Albert not only encourages those who are pregnant to get vaccinated, but also women who are wanting to become pregnant.

"The COVID-19 vaccine has not been shown to result in fertility problems in women or in men. The vaccine is safe," noted Albert.

The CDC issued an urgent health advisory urging more vaccinations of pregnant people to protect the lives of those who are or may become pregnant, and to keep their fetuses safe and healthy, too.

"Why are people of color at higher risk for severe cases of COVID-19?" Research has found that people with a history of cardiovascular disease and cardiovascular disease risk factors are more likely to experience more severe complications if they get COVID-19 — that includes people who have had a heart attack, stroke or those with heart failure, or among those who smoke or have high blood pressure or obesity.

According to the American Heart Association's Heart Disease and Stroke Statistics 2021 Update:

• 10 times more likely to die from complications related to the virus.
• "COVID-19 is an inflammatory condition, so likely what is happening is that the inflammatory environment built up by the virus propels medical conditions that can result in death," Albert said.

The American Heart Association aligns with the CDC's recommendations that everyone eligible, ages 12 and older, be vaccinated as soon as possible. The goal is to protect as many people as possible from severe COVID-19 infection, hospitalization and death — especially younger children who are not yet eligible for COVID-19 vaccination and people who have compromised immune systems due to other serious health conditions.

The COVID-19 vaccines are safe, effective and available to everyone (currently 12 and above) at no cost.
Healthy Start receives grant to purchase and provide car seats to pregnant moms

The Milwaukee County Healthy Start program has received a $1,500 grant from Independent Care Health Plan (iCare) to purchase and provide car seats to pregnant moms enrolled in the program. Healthy Start provides resources and support to reduce maternal child health disparities and improve birth outcomes for African American women, newborns and fathers in Milwaukee County. iCare grants community investment sponsorships to further the work of organizations like Healthy Start that serve vulnerable populations.

“We are thrilled to be able to extend our services to offer a limited number of car seats to our participants,” said Meagan Bella, prevention supervisor, Milwaukee County Healthy Start. “By purchasing the proper car seats, we are ensuring our participants have a safe way to transport their babies.”

Car seats will be available to Healthy Start participants on a first-come, first-served basis. Participants must be enrolled in the Healthy Start program and can enroll by completing the sign-up form on milwaukeehealthystart.org or by calling (414) 292-4243.

Healthy Start provides resources and support free-of-charge to African American women, infants ages 0-18 months and fathers/partners in Milwaukee County.

Services include pregnancy support and education, baby care basics, new parent education, mental and behavioral health support and access to safety, housing, transportation and employment.

“The work Milwaukee County Healthy Start is doing to improve birth outcomes and address health equity is important,” said Tony Mollica, iCare CEO/President.

“The Healthy Start program is all about supporting healthy babies, so making car seats available is an important step for new parents. We’re glad to be able to offer our support.”

—Tony Mollica, iCare CEO/President.

About Milwaukee County Healthy Start

The purpose of Milwaukee County Healthy Start (milwaukeehealthystart.org) is to reduce maternal child health disparities and improve birth outcomes before, during and after pregnancy for African American women, infants and fathers in Milwaukee County.

Healthy Start is a partnership between the City of Milwaukee Health Department, Black Child Development Institute, Easter Seals of Southeastern Wisconsin, MyNP Professional LLC and Children’s Wisconsin.

Eric Conley Named 2022 Heart & Stroke Walk Chair

American Heart Association appoints leadership for 2021-22 campaign

The American Heart Association (AHA) is pleased to announce that Eric Conley, Executive Vice President of Froedtert Health and President of Froedtert Hospital, will serve as chair of the organization’s 2021-2022 Heart & Stroke Walk campaign.

Conley will be leading a year-round campaign that aims to bring Southeastern Wisconsin together, to raise funds and awareness about cardiovascular disease, our community’s greatest health threat.

It will culminate at the SE WI Heart & Stroke Walk/5K Run on Saturday, September 24, 2022, as companies, volunteers and community members unite, to celebrate and honor those who have been impacted by heart disease and stroke.

“I am honored to chair this year’s Southeastern Wisconsin Heart & Stroke Walk,” said Conley.

“As a husband and father of three daughters, my dedication to the Heart Walk goes beyond raising funds for this event. “Heart disease remains the leading cause of death for women in the United States and my goal is to continue to work side by side with the American Heart Association to ensure a healthier future for our community and my family. Our shared missions of improving the health of the diverse communities that we serve and ensuring longer, healthier lives for everyone who calls Wisconsin home, provides a solid foundation for moving this collective goal forward.”

For more information on the Southeastern Wisconsin Heart & Stroke Walk/5K Run, please visit: www.se-wiheartwalk.org.

About the American Heart Association:

The American Heart Association is a leading force for a world of longer, healthier lives. With nearly a century of lifesaving work, the Dallas-based association is dedicated to ensuring equitable health for all. We are a trustworthy source empowering people to improve their heart health, brain health and well-being.

We collaborate with numerous organizations and millions of volunteers to fund innovative research, advocate for stronger public health policies and share lifesaving resources and information. Connect with us on heart.org, Facebook, Twitter or by calling 1-800-AHA-USAC.

Wisconsinites who are #CaliSober may be masking hidden addictions, warn experts!

A recent topic on the rise across social media and news platforms is the idea of sobriety as a wellness trend, instead of a recovery journey.

Terms like ‘sober lite’, ‘Cali sober’ and ‘sober curious’ are part of a spectrum of semi-sobriety, referring to those who adopt this lifestyle as a way to cut down on the intoxicating substances they consume, whether it be alcohol and/or drugs.

After experiencing a near-fatal overdose, singer Demi Lovato has recently shared that they identify as ‘Cali Sober’, which has been met with criticism by many, as total abstinence is typically the traditional recovery norm for those with substance use disorders. Additionally, Canadian singer, The Weekend has reported he is now ‘Sober Lite’.

損害"

It should be noted that some people who choose to adopt these sober habits based off social media influence posts may not be doing so because they have an issue with alcohol. In fact, there have been countless articles written about these new variations of sobriety, showing the rise in people wearing off the boozie for the sake of their health – not because they have an alcohol-related problem. So, where do these trends and recovery strategies intersect?

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Vice President Kamala Harris recently announced a historic $1.5 billion investment to help grow and diversify the nation's health care workforce, and bolster equitable health care in the communities that need it most during the COVID-19 pandemic and in the years to come.

These awards are supporting the National Health Service Corps, Nurse Corps, and Substance Use Disorder Treatment and Recovery programs. These programs address workforce shortages and health disparities by providing scholarship and loan repayment funding for health care students and professionals, in exchange for a service commitment in hard-hit and high-risk communities.

Thanks to the American Rescue Plan, this funding will support over 22,700 providers—the largest field strength in history for these programs and a record number of skilled doctors, dentists, nurses, and behavioral health providers committed to working in underserved communities during a moment when we need it most during the COVID-19 pandemic and in the years to come.

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As we reflect on the horrific toll of menthol on Black lives, the 1.5 million life years lost, the 1.5 million new smokers, and the 157,000 deaths, it's fair to wonder what, if anything, will end menthol's deadly scourage?

The FDA continues to work towards issuing product standards to ban menthol, according to a press release issued last month. Unfortunately, any final decision by the FDA is sure to be met with and debated by litigation. In reality, our best hope to save Black lives from menthol is ourselves. We must continue to sound the alarm bells, galvanize residents to take a stand against menthol, and engage them as leaders in advocacy efforts. We need to end the false narrative about a menthol ban being used as a profiling tool by law enforcement and yet another attack on the Black community.

Here in Milwaukee, the Wisconsin African American Tobacco Prevention Network and Wisconsin Tobacco Prevention and Poverty Network have mobilized residents to lead the call for action and promote events like No Menthol Sunday, a national day of advocacy for the faith community, to support those who have been impacted by tobacco.

As we work to engage local and state leaders, the faith community, residents, and even tobacco retailers in our tobacco prevention movement, we still need your help. Visit https://www.dhs.wisconsin.gov/tobaccoischanging/menthol.htm to learn more about menthol tobacco products or get connected with local prevention efforts. If you or a family member is ready to quit, call 1-800-QUIT NOW. Together, we can help to create a tobacco-free generation and prevent another 157,000 Black lives from being lost to menthol.
New N’COBRA Study Finds Genetic Damage from Historical Racism Linked to Poor Health and Transgenerational Trauma in Black Americans

CHICAGO – When the wounds are caused by generations of racism, it takes a group like the National Coalition of Blacks for Reparations in America (N’COBRA) to do the necessary deep cleaning.

Since 1987, N’COBRA has been the leading mass coalition dedicated to obtaining Reparations for African descendants in America.

Most recently, their work has been recognized by the MacArthur Foundation for their cutting-edge efforts.

Congresswoman Sheila Jackson Lee is the lead House sponsor for H.R. 40, legislation that would put Reparations on the agenda of the full House of Representatives for the first time since its introduction in 1989.

The Congresswoman is a long-time supporter of Reparations.

Now, N’COBRA is releasing its 2021 report “The Harm Is to Our Genes: Transgenerational Epigenetic Inheritance and Systemic Racism in America.”

The research team was headed by Dr. Joan Kaufman of Kennedy Krieger Institute at Johns Hopkins Medical Institutions.

Citing current scientific research, the seven-section report persuasively documents the ongoing impact of historical trauma, starting with the TransAtlantic Slave “Trade”, and includes racial segregation, mass incarceration, police brutality, and economic exploitation.

These, and other harms, reveal that “ancestral adversities can negatively impact descendants across multiple generations through epigenetic (chemical) changes in the DNA.”

Yes, trauma that happened to past generations can and is reflected by the current generation.

The same can be expected to occur in future generations, if the report’s recommendations are not adopted.

“Our report emphatically attests that if the Black community is ever going to heal from the consequences of systemic racism, in addition to established medical protocols, we must not hesitate, but be inclusive of African-
Vaccinations Look to Serve as Further Protection for Children and Their Future: What We’ve Learned So Far!

By Josephine Reid

We’ve heard it before, and we’ll likely hear it again. The pandemic is far from over, and we’re looking for the best ways to protect ourselves and our children. One way to do this is by getting vaccinated.

Dr. Nina Ford, a pediatrician at the Children’s Hospital of Alabama, has been caring for children during the pandemic. She says, “We’re seeing a lot of them. Some of the problems we’re seeing in the unvaccinated children are that they’re spreading the illness to parents and grandparents.”

Parents want to get their children vaccinated as well. Dr. Ford says, “Whether a parent, teacher, or family friend, you have seen at least one effect that this pandemic has had on children, including developmental issues, the widening education gap, and fewer wellness visits.”

In the United States, more than 5 million children have gotten COVID-19 and more than 763 have died from the disease.

Since Delta, 1 in 5 new COVID-19 cases have been in children. Vaccinating children who are ages 5 and older can help protect kids and slow the spread of COVID-19 and is another step in getting this pandemic under control.

Parents, teachers, and friends play a crucial role in getting kids back on track and giving them a real chance to experience childhood in its true sense.

With all of these jarring numbers and heartbreaking stories on the toll the pandemic has taken on children, one may ask who to turn to as a medically sound voice that can provide factual, science-based information.

As COVID-19 vaccines are now available to kids ages 5 and older, we spoke with Black pediatricians who serve as trusted advisors for their patients’ parents, and as advocates for every child that steps into their offices.

We asked these local trusted messengers to comment on expected changes if all children who are eligible are vaccinated.

We spoke with Dr. Nina Ford Johnson, MD FAAP, who has worked in infancy pediatrics for eight years and serves as the President of the Medical Society of Mobile County, Alabama. “Some of the problems we’re seeing in the unvaccinated children is that they’re spreading the illness to parents and grandparents.”

“We’re seeing a lot of them miss school because of it. And not just the child, but their siblings also miss out. Children that [do become vaccinated], I think it’s going to turn [things] around. We need to be able to keep kids in school. Our school system here in Mobile was already far behind.”

Also, [vaccinations] will decrease the amount of infectivity among the adults and grandparents. It takes a village to raise our children, and this virus has become a village virus.”

We also spoke to Dr. Antwan Johnson, MD who gave his thoughts on vaccinations for children.

“I have seen some hesitancy – even in myself, I questioned whether or not I would vaccinate my own children. The more I dove into the studies and research that support getting the vaccine, without hesitation, when my children are of age, and when the guidelines support my kids getting the vaccine, I won’t hesitate to do so. It’s crucial that we get as many kids vaccinated as we possibly can to get this pandemic under control.”

The effects of the COVID-19 pandemic on this generation can be lessened if we can protect our most at-risk populations and encourage everyone who is eligible to get vaccinated.

We spoke with pediatrician Dr. Felicia Wilson, who shared impactful stories about patients she has truly cared for from birth to present day and described some of her young patients looking to her as another parental source.

“I have seen hesitancy in parents, in fact some of those parents are parents that themselves got vaccinated. But they sort of felt like I lived a good life, I’ve had my children, I don’t plan to have anymore – but I’m worried about the fertility of my children or some unforeseen thing that may come up years later.”

I’ve also seen parents that want to get their children vaccinated because they’ve been through COVID-19 themselves. I take care of a fragile population of kids who have blood disorders and cancer, so many parts of this new way of life including masks and isolation is already a part of their lives.

So, a number of those parents want to get their children vaccinated.

But I’m worried about the fertility of my children or some unforeseen thing that may come up years later.”

Josephine Reid is a member of Creative Marketing Resources, a strategic marketing agency in Milwaukee and a partner of the CCBB Institute.

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Navigating the Holiday in Pandemic, Again!

Holiday season 2021 is upon us. Unlike this time a year ago, more than 195 million people in the United States are now fully vaccinated against COVID-19, and 28 million 5- to 11-year-olds can now receive the shots.

Despite these steps, the pandemic is still with us. ‘We’re not able to completely eliminate COVID-19,’ says Hillary Nelson, director of education for the University of Pennsylvania’s Center for Public Health Communication. ‘But, we want to reduce its impact. In public health, the most important facet is reducing harm.’

That pertains to physical health, to shaking the virus from one that turns the world on its head to one that exists mostly in the background, that we can protect against with a vaccine. That also pertains to mental health, says James Pawelski, director of education at Penn’s Positive Psychology Center.

Last year at this time, we were looking forward to the vaccine. There was some sense of a light at the end of the tunnel. Unfortunately, that worldview doesn’t seem quite so accurate anymore,’ he says. ‘We’re in this for the long haul. We’ve moved from the light at the end of the tunnel to thinking about the tunnel as a black hole. That backdrop can make the holidays—often already fraught with expectation—feel even more challenging. But they don’t have to be. Nelson and Pawelski offer six tips for making them joyful, fun, and safe.

1. Understand your risk tolerance

However you define what the pandemic is, this will differ from person to person and family to family. ‘Because there are unvaccinated children in my household, I’m very cautious when I eat out,’ explains Jennifer toasting with a family member. ‘Sometimes I might take off my mask inside to eat. I wear an N95 mask whenever I’m inside in a public place, and I don’t do anything that’s considered a high-risk activity.’

‘Others who don’t have vulnerable people in their life may have a different risk calculation.’

2. Be open and frank

Families often put pressure on one big moment—Thanksgiving dinner. ‘What if you made a small mistake, the brief encounters with a family member and can do so safely, go to an art museum. Just don’t let that dinner ruin the whole experience? To avoid that, Pawelski says, ‘If you just get caught in your own inner world vortex and forget there’s an external meaning, purpose, and a sense of belonging.’

Based on this research, I would say make time for arts and culture. Listen to music. Sing. You don’t have to give up your favorite holiday traditions. Pull out your old piano books,’ Pawelski says. ‘Memorize a poem. It’s a kind of lost art, and it can be super calming. Make it a tradition to pair those with a moment of joy with others at a site like seeing Happy. If you feel like it and can do so safely, go to an art museum. Just make time for something.’

3. Reframe what makes the holidays ‘special’

Families often put pressure on one big moment—the Thanksgiving meal, for instance—without valuing the small moments that can help you cope with the pandemic. From this nationally representative survey, he and colleagues deduced that those who do engage in small moments so were most satisfied with their degrees of greater meaning, purpose, and a sense of belonging.

‘Based on this research, I would say make time for arts and culture. Listen to music. Sing. You don’t have to give up your favorite holiday traditions. Pull out your old piano books,’ Pawelski says. ‘Memorize a poem. It’s a kind of lost art, and it can be super calming. Make it a tradition to pair those with a moment of joy with others at a site like seeing Happy. If you feel like it and can do so safely, go to an art museum. Just make time for something.’

4. Think beyond yourself

Volunteering is a great example, says Nelson. Who has worked at several COVID vaccination clinics and who Penn Medicine colleagues have put on, including one at an elementary school that vaccinated more than 300 children. ‘If you just get caught in your own inner world vortex and forget there’s an external meaning, purpose, and a sense of belonging.’

Based on this research, I would say make time for arts and culture. Listen to music. Sing. You don’t have to give up your favorite holiday traditions. Pull out your old piano books,’ Pawelski says. ‘Memorize a poem. It’s a kind of lost art, and it can be super calming. Make it a tradition to pair those with a moment of joy with others at a site like seeing Happy. If you feel like it and can do so safely, go to an art museum. Just make time for something.’

5. Embrace arts and music

Recently, Pawelski conducted research analyzing why people feel better when they engage with art during the pandemic.

‘These findings demand that every conversation about the health inequities and health problems confronting Black Americans should include historical trauma and its effects,’ says Kamm Howard, N’COBRA National co-chair.

‘The National Coalition of Blacks for Reparations in Abolitionism at Penn’s Positive Psychology Center.

For more information about N’COBRA, visit http://www.NCOBRAonline.org.

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Genetic Damage from Historical Racism Linked to Poor Health and Transgenerational Trauma in Black Americans

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centered health and wellness modalities,” explains Lisa Davis, N’COBRA Health Commission co-chair.

“These findings demand that every conversation about the health inequities and health problems confronting Black Americans should include historical trauma and its effects,” says Kamm Howard, N’COBRA National co-chair.

A key report released earlier this year concluded, “Racism is embedded in the structures of our society.”

While police brutality, the wealth gap, and other issues grace the headlines – health disparities detailed in this report. H.R. 40 must pass!” H.R. 40 was voted out of committee by the House of Representatives this past April. There are currently 200 members in favor of passage. Why it has taken more than 30 years for the U.S. Congress to even entertain a conversation about Reparations is hard to digest.

The National Coalition of Blacks for Reparations in America’s report, Transgenerational Epigenetic Inheritance and Systemic Racism in America, provides us with a singular, significant, historic and scientific explanation of the extended devastation of the impacts of slavery on the descendants of enslaved Africans and all of America.

Over the years, we have witnessed the impacts of systemic racism,” says Congresswoman Jackson Lee. “This report now details how systemic racism has flowed through the centuries and through the communities of African Americans.

The right answer to this report is for Congress to pass H.R. 40, The Commission to Study Slavery and Develop Reparations Proposals. H.R. 40 will provide a studied analysis and research for the best pathway forward to heal America and to end forever the stigma of systemic racism and its varied social, political, economic, and environmental impacts as detailed in this report.

This is the right time in America’s history to pass H.R. 40 and to establish this important Commission!”

For more information about N’COBRA, visit http://www.NCOBRAonline.org.
On November 12, 2021 County Executive David Crowley signed the 2022 adopted budget which expands the County’s Office on African American Affairs (OAAA) to the Office of Equity.

The budget reimagines the work of OAAA, repurposes OAAA’s executive director to the role of Chief Equity Officer, the first in the County’s history, and creates all new staff positions.

The County OAAA office was created in 2016 by a resolution championed by then County Board supervisor turned Milwaukee alderman, Khalif Rainey, and was stood up as a cabinet level department under former County Executive Chris Abele.

The department’s mission was to ‘serve an integral role in recognizing and resolving the County’s racial inequities for the benefit of all citizens and for the region to achieve its full potential.’

Abele appointed Nicole Brookshire as the first OAAA director in 2017.

Since that time, OAAA has trained more than 3,800 county employees on racial equity and implicit bias, launched a Racial Equity Ambassador program to elevate employees across county departments to promote equity and justice, established the County’s membership in the Government Alliance on Race and Equity (GARE), and was the force behind Milwaukee County becoming the first government in the United States to declare racism a public health crisis.

While OAAA started under County Executive Abele, it’s work continues as a central focus of County Executive David Crowley.

When Crowley took office, he appointed Jeff Roman as OAAA’s new director and tasked him with positioning the County to play an even larger role in advancing health and racial equity throughout the county, region, and the state.

Under Roman, OAAA has played a key role in elevating the voices and lived experiences of African Americans in shaping the Crowley administration’s priorities, including ongoing response to COVID-19 and decision making related to addressing institutional racism within the County.

The last 20 months has been challenging. As the County and community has continued to face the COVID-19 pandemic, divisive political partisanship, racialized violence, and social unrest, County leaders have realized that OAAA’s scope, while important and needed, is not enough to drive the County’s vision of racial equity and health for all.

County leaders engaged in a process to reimagine a stronger organizational structure that would better support OAAA and position all other County departments to increase accountability for achieving racial equity.

The result, the expansion of OAAA to the Milwaukee County Office of Equity giving the County a much broader reach into all components of health and racial disparities.

The reimagined Office of Equity’s essential responsibilities will remain providing advice, guidance, research, and technical assistance to address inequities within the African American community and other vulnerable populations, including other communities of color, LGBTQ+ and people with disabilities.

The expanded department will bring a higher level of energy, expertise, and leadership to advance County Executive Crowley’s strategic goals to create intentional inclusion, bridge the gap, and invest in equity.

With the adoption of the 2022 budget, both the County Executive and the County Board have strategically positioned the Office of Equity to support the County and empower the broader community to make Milwaukee County’s vision, ‘by achieving racial equity, Milwaukee is the healthiest county in Wisconsin,’ a reality.

The Office on Equity will focus on building bridges between community and government, allowing impacted residents with County and systems leaders to critically examine and challenge power structures, advocate for shifting resources where they are needed, and work to eliminate barriers to access and inclusion in ways that are responsive, transparent, and accountable to people of color and other vulnerable communities across the county.

The office will have a more expert staff to continue targeted outreach to the African American community, engage in equity research and policy analysis, standardize community engagement practice county-wide, provide innovative solutions to guide and support County leaders, departments, and community and municipal partners in their efforts to improve health and racial equity, and increase the capacity of residents and decision makers to address racial disparities and inequities through the following four service areas:

- African American Affairs – examining, defining, and addressing issues central to the rights and needs of African Americans, developing and implementing policy and programs related to the special needs of African American residents, and promoting equitable access and equal opportunities for African American residents
- Research and Policy Advocacy – conducting racial equity policy analysis, building equity policy assessment capacity within departments and municipalities, and driving countywide equity research and advocacy initiatives
- Community Engagement and Strategic Partnerships – developing standard practices and frameworks for community outreach and engagement, leading countywide community engagement initiatives, and building strategic partnerships with an emphasis on outreach to Black and brown communities and other vulnerable populations
- Equity Operations, Strategy, and Innovation – advising and providing direct support and partnership to County leaders, departments, and municipalities to improve racial equity praxis, identifying and remedying inequitable policies, processes, and practices within the County, and supporting regional diversity, equity, and inclusion (DEI) advancement.

Milwaukee County remains committed to putting African Americans at the center of shaping its health and racial equity work.

That work started with the creation of OAAA which will remain an outreach unit of the Office of Equity.

The expansion of OAAA to the Office of Equity gives the County more support and capacity to accomplish the work OAAA was created to do, with accountability to see that work through.

The department will maintain its OAAA office on the corner of MLK Drive and Clarke Street, keeping the County’s presence in the heart of the Harambee community.

The office’s first hires in 2022 will be positions focused on African American outreach and community engagement, who will work closely with the County leaders and departments, the City’s Office of African American Affairs, and community partners to improve access to services, build community capacity, and highlight African American culture, arts, and history across the County year-round.

To get involved, please contact the Milwaukee County Office on African American Affairs at AfricanAmericanAffairs@milwaukee-countywi.gov or call (414) 278-7979.
They reviewed the amount of time spent each day in leisure sedentary activities (hours spent on computer, reading and watching TV) and divided them into categories of less than four hours per day; four to less than six hours per day; six to less than eight hours per day; and eight hours or more a day. They also divided physical activity into quartiles, or four equal categories, where the lowest quartile was the least physically active and equivalent to going for a walk for 10 minutes or less daily.

“A walk of 10 minutes or less per day is lower than half of what the American Heart Association’s physical activity guidelines recommend,” Joundi said. The American Heart Association recommends adults get at least 150 minutes, or 2.5 hours, of moderate-intensity physical activity per week.

Analysis of study participants found:

- During the follow-up period, an average of 9.4 years, 2,965 strokes occurred. Nearly 90% of those were ischemic strokes, the most common stroke type, which occurs when a vessel supplying blood to the brain is obstructed.
- The average daily leisure sedentary time among all participants was 4.08 hours. Individuals aged 60 and younger had an average leisure sedentary time of 3.9 hours per day.
- Adults 60 years and younger who had low physical activity and reported eight or more hours of leisure sedentary time a day had a 4.2 times higher risk of stroke compared to those reporting less than four hours of daily leisure sedentary time.
  - The most inactive group — those reporting eight or more hours of sedentary time and low physical activity — had 7 times higher risk of stroke compared to those reporting less than four hours of sedentary time a day and higher levels of physical activity.
  - Adults 60 years and younger should be aware that very high sedentary time with little time spent on physical activity can have adverse effects on health, including increased risk of stroke...” — Raed A. Joundi, M.D., D.Phil

“My Choice Wisconsin serves government-funded programs to frail seniors and adults with disabilities.

We care for the whole person and well-being of all by offering services that promote independence, value diversity, and inspire self-advocacy.

For information on long term care options, call your local Aging and Disability Resource Center.
Protect your family from COVID-19

The COVID-19 vaccine is the greatest hope we have for our community to overcome the pandemic and return to normal activities. By having our children vaccinated, we prevent the virus from further infecting our community.

All families with children 12 years old and older can now schedule appointments online to receive the vaccine at Children’s Wisconsin. The vaccine is free to families. To schedule your child’s appointment, visit childrenswi.org/covidvaccine.

Learn more at childrenswi.org

Children’s Wisconsin
Kids deserve the best.