SENIOIRS AND EXERCISE!

How older adults can get the most out of their physical activity for better health outcomes!

See pages eight and nine

COVID-19 & MENTAL HEALTH

BLACK DOCTORS and the battle for HEALTH EQUITY

NEW STUDY REVEALS JUST HOW EXPENSIVE A SMOKING HABIT CAN BE!
Hate mail, death threats, and social media trolling have been reported by doctors.

The continued efforts to restrict how the nation talks about race has spilled over into the medical profession, resulting in threats against Black doctors fighting for equity.

Some doctors have reported that they've been trolled on social media, one has had a death threat spray-painted on their front door, and hate mail has been sent out to threaten others.

The hate mail "terrified me," Dr. Camara Jones told NBC News. "I hid for two weeks."

Jones was at the center of uproar from conservative activists who opposed a training program she developed on the public health impacts of systemic racism.

The program, for Centers of Disease Control and Prevention (CDC) staff, was canceled by the Trump administration in September 2020.

The threatening behavior comes as the American Medical Association (AMA) has made several moves to promote health equity.

The AMA has acknowledged its role in discrimination, calling it "will actively work to dismantle racist and discriminatory policies and practices across all of health care."

There's a historical need to do so. Decades of research shows Black people and people of color suffer from health care inequities.

Research reported in the Washington Post shows that Black people may be under-treated for pain. Another study, reported in Nature, showed that Black people were less likely than whites to get care for complex medical needs.

As part of its efforts, the AMA created a chief health equity officer role to fight racial disparities in healthcare. According to NBC News, Dr. Aletha Maybank filled the position in 2019, and by 2021, she was already facing opposition.

In 2021, the AMA released a communication guide designed to foster equity-focused language and messages. But, conservatives pounced, accusing the AMA of adopting "critical race theory," and embracing "leftist" language.

Maybank found herself the victim of threats so vile that the AMA hired a security detail for her and scrubbed her online information, she told NBC.

"When it comes that close, it's really scary," she told NBC. "But I think it's just really important that people do know about it — I'm not the only one."

The AMA recognized that the threats were a problem and in February condemned intimidation against health providers. It called out a January incident in which a group of Neo-Nazis protested against two doctors fighting for greater health equity. The protestors called the equity effort "anti-white."

"Society needs to protect its citizens from individuals or groups that encourage and advocate violence as a means for resolving deep social issues," the AMA said.

Black doctors face threats as they battle for health equity

HOSPITALIZATION RISK FOR BLACK ADULTS QUADRUPLED THAT OF WHITE ADULTS DURING THEOMICRON WAVE'S PEAK, CDC SAYS

New data from the Centers for Disease Control and Prevention (CDC) found that Black adults in the U.S. were four times more at risk of hospitalization than white counterparts as cases of the omicron variant peaked, The Washington Post reported.

During the highly transmissible variant's surge in cases from the middle of December 2021 through late January, the CDC found that rates of hospitalization for Black patients in January reached a higher level than any other racial or ethnic group since the COVID-19 pandemic began, as reported by The Post.

The report, which examined hospitalization rates in 99 counties across 14 U.S. states, additionally found that unvaccinated adults were 12 times likelier than vaccinated adults to be hospitalized due to COVID during the surge, according to The Post.

Per the report, a lower rate of Black adults older than 18 had gotten their first two shots (39.6%) than white counterparts (47.3%) as of Jan. 26, with 43.9% of vaccinated Black adults having gotten a booster shot after becoming eligible, compared to 54.5% of eligible white adults.

According to the report, while hospitalizations in Black communities increased among all vaccination statuses, rates among adults in some communities of color, including American Indian, Alaska Native and Latino communities, dropped during omicron compared with the delta variant, The Post reported.

Additionally, according to the report, two-shot vaccinated Black adults were hospitalized more often during the omicron wave (25.5%) than the delta wave (14.9%) according to the report.

According to the outlet, Teresa Y. Smith, an emergency physician at SUNY Downstate in Brooklyn and associate dean of graduate medical education at Downstate Health Sciences University, works in a borough with a majority Black and Latino population which has seen social, economic, political and environmental factors result in a disproportionate impact on local families since long before the pandemic.

Smith told The Post that the vaccinated patients she treated during the surge were not as likely to be "lethally sick," but added that any virus "can set off people's underlying illnesses."

"Even a cold can make your diabetes or high blood pressure worse," Smith told the outlet.

"So even if they're not deathly sick from COVID, they still may have a jump in their glucose or not as good control of their hypertension."

And so, admissions have increased because of that, but those who end up getting admitted and go to the ICU are those who are unvaccinated."
COVID-19 and Mental Health

The first year of the COVID-19 pandemic saw a massive 25% increase in people feeling anxious or depressed, according to a study from the World Health Organization (WHO).

While the focus shifted to keeping everyone physically healthy and protected from getting COVID-19, we simultaneously faced a rise in mental health challenges.

One major cause is the unprecedented level of stress endured and sustained for two years.

Loneliness caused by social isolation, fear of infection or death, the grief of losing loved ones, and financial worries have also been identified as causes leading to anxiety and depression.

Fear, worry, and stress are normal responses to the threats caused by COVID-19 and the uncertainty felt about the future.

It’s normal and understandable that people are experiencing increased mental health challenges.

Fortunately, there are many actions we can take and tools we can use to improve our mental health:

• Focus on your daily routine: In times of uncertainty, keeping routines such as going to bed and waking up at the same time every day, exercising daily, eating regular meals, and scheduling time for rest and relaxation can help with feelings of stability.

• Minimize screen time and media consumption: It’s important to stay informed. However, it’s equally important to disconnect from social media and the news.

During a global pandemic, much of the information we read and watch can cause feelings of anxiety or distress. Instead, try to seek out information only once or twice a day.

Listen to the advice and recommendations from local and national experts but schedule time to disconnect.

• Find ways to contribute positively to your community: If you are able, helping others can provide feelings of community, self-worth, and purpose.

Cook a fresh meal for a neighbor. Volunteer time with a community organization. Even picking up the phone to check in on a loved one (continued on page 14)

A Letter from the Milwaukee Health Commissioner

March 13, 2022 marked the two-year anniversary of the first confirmed case of COVID-19 in Milwaukee. In one way or another, this pandemic has greatly affected all of our lives over the past two years.

The impact of the virus seems quantifiable: The city of Milwaukee has experienced nearly 150,000 positive cases, and devastatingly, 1,086 Milwaukeeans have lost their lives to COVID-19.

But these numbers do not take into consideration those who are still struggling with long COVID and whose symptoms have disrupted their lives. They do not take into consideration those who have lost their jobs or businesses because of the pandemic.

They do not take into consideration those who are still struggling with the loss of their loved ones to this virus. They do not take into consideration the countless individuals who are grieving the loss of their loved ones to this virus.

However, these numbers also don’t take into consideration the countless individuals and organizations who have stepped up over the past two years: Healthcare providers, educators, and public health workers who have gone above and beyond to provide care to keep our community safe.

Businesses who have donated food, money, or resources to those in need. And neighbors, friends, and family who have supported one another in every way needed.

Since the peak in COVID-19 cases due to the Omicron variant in early January, Milwaukee has experienced a declining burden of COVID-19 in our community. However, if we’ve learned anything from the past two years, it’s that this virus is unpredictable.

Future case surges are a real possibility and new variants will continue to emerge. The pandemic is not over and our work is not done, but, two years later, we have tools to get through them.

Continued mask use in public settings and getting tested when feeling symptomatic or exposed is critical to stopping the spread of the virus. The most important tool is the COVID-19 vaccine.

I strongly encourage everyone to take to take this time while demand is still low to prioritize getting their vaccine or booster dose. Vaccination is our way forward.

We all want to make the right decision to protect ourselves and keep our children safe, and there is a lot of information out there about the COVID-19 vaccine. It can be overwhelming, but I urge you to talk to a trusted professional to get the answers you need.

That can be your primary care physician, pediatrician, nurse, or public health professionals.

The Milwaukee Health Department

Kirsten Johnson, Commissioner

milwaukee.gov/covidvax

We do anything to keep our little ones safe.

Make the life-saving decision to protect them from COVID-19 by vaccinating yourself and your children (ages 5+) today.
Tackling the Mental Health Challenges Facing People Living with HIV

By Mike Gifford

Mike Gifford is the president and Chief Executive Officer of Vivent Health, a leader in the fight against HIV. His career spans nearly 30 years leading one of the nation’s largest HIV prevention agencies. Mike is a relentless champion for people affected by HIV and do all we can to help them thrive.

Since our inception as a social services and HIV prevention agency in 1984, we’ve seen the clinical and social needs of the people we serve grow increasingly complex. Advancements in healthcare mean people living with HIV can now live long, healthy lives without the possibility of transmitting HIV to others. Yet too many of our patients continue to face discrimination, homelessness, hunger, and poverty. Helping patients overcome these social determinants of health is central to our model of care and our mission.

We know that patients live their best lives possible when they’re able to get the depth and breadth of the health care and social services they need — all under one roof.

At Vivent Health, patients can receive medical care, dental care, behavioral health and substance use services and treatment and pharmacy services as well as the wrap around social services needed to address social determinants such as access to healthy food, housing services, and legal services.

This is a model of care that has been designed and redesigned every year to best meet the needs of HIV patients.

The result: viral suppression among our patients is 95%, exceeding the national viral suppression average of 65.5% among all people with diagnosed HIV, as reported by the Centers for Disease Control and Prevention.

There is no health without mental health. Imagine not having a stable place to live, being denied public benefits, or not having a working refrigerator nor healthy food to put it in. These are just a small handful of the social determinants of health many of our patients face on the daily. And we know that these challenges don’t just impact one’s physical health. They often lead to an array of mental health issues, with depression, anxiety, stress and addiction among the most common.

What’s more, ramifications of the COVID-19 pandemic as well unrelenting discrimination and stigma continue to exacerbate these challenges. Research has shown that these challenges lead to negative health outcomes at each step in the HIV care continuum, from diagnosis all the way to achieving viral suppression.

By integrating mental health counseling and programs into our HIV care, we’re able to reach more people with the specialist care and life-saving support they need — when they need it.

Vivent Health offers our patients a full slate of mental health counseling and treatment including:

Depression Screening A psychotherapist provides a depression assessment along with education on depression and self-care.

Mental Health Assessment & Evaluation A psychotherapist conducts an assessment to identify symptoms that are commonly associated with mental health challenges.

Psychiatric Assessment & Evaluation A psychiatrist conducts a comprehensive assessment to diagnose any mental health conditions. Any side effects or drug interactions you may have to help increase your wellbeing.

For people living with HIV, substance use can hasten disease progression, affect medication adherence and worsen overall health outcomes. To most effectively engage patients in care, we meet them where they are in their substance use and recovery journey, providing a range of services and programs to help them achieve their individual goals. Our offerings, which include in-person and virtual visits, span:

Harm Reduction Services Overdose prevention, safer injection and other harm reduction resources.

Individual Substance Use Counseling Support for people who are thinking or ready to change their relationship with alcohol and drugs.

Outpatient Group Weekly group programming that supports recovery efforts via substance use interventions, education and a network of recovery support.

Recovery and Aftercare Group Counseling and support for recovery and aftercare services.

Recovery Exploration Group Early intervention group designed for individuals who are new to their recovery journey or contemplating a need for change. The group focuses on engagement, exploring patterns of usage and negative consequences to substance use, and assessing motivation and commitment to change in a safe and supportive environment.

Substance Use Day Treatment Counseling and support on a day-treatment basis to slowly reduce and eventually eliminate alcohol and drug use.

Tremendous advancements in HIV prevention and treatment have brought us closer to ending HIV. But we cannot achieve this goal if we don’t address its most challenging barriers: the mental health and substance use struggles among people living with and at risk for HIV.

Mike Gifford is the president and Chief Executive Officer of Vivent Health, a leader in the fight against HIV. His career spans nearly 30 years leading one of the nation’s largest HIV prevention, care, and treatment providers, caring for more than 10,000 affected by HIV. To learn more, please visit www.ViventHealth.org.

“AT VIVEN HEALTH, PATIENTS CAN RECEIVE MEDICAL CARE, DENTAL CARE, BEHAVIORAL HEALTH AND SUBSTANCE USE SERVICES AND TREATMENT AND PHARMACY SERVICES AS WELL AS THE WRAP AROUND SOCIAL SERVICES NEEDED TO ADDRESS SOCIAL DETERMINANTS SUCH AS ACCESS TO HEALTHY FOOD, HOUSING SERVICES, AND LEGAL SERVICES. THIS IS A MODEL OF CARE THAT HAS BEEN DESIGNED AND REDESIGNED EVERY YEAR TO BEST MEET THE NEEDS OF HIV PATIENTS.”
Committed to serving our community

Froedtert Health is committed to valuing and celebrating the wealth of diversity reflected in our staff and patients, as well as their families and communities. We are committed to being an inclusive and culturally competent organization that provides exceptional care to everyone.

As a health care organization, we often care for people who have been impacted by racism. We are taking action to treat racism as a health crisis. We will help to end racism and racial disparities in health care by:

- Examining our own biases
- Measuring, tracking and reviewing our policies and practices to meet the needs of everyone we serve
- Treating people with dignity and respect
- Leading change in our communities and addressing health care disparities

Learn more at froedtert.com/end-racism
The average Wisconsin smoker spends over $2,400 annually on tobacco products to support a habit that will eventually incapacitate them, a new research study by WalletHub reveals.

That disingenuous investment is magnified significantly when health care costs are passed on to consumers in health care and other related expenses to $179,389. The report, 'The Real Cost of Smoking by State,' has Wisconsin ranked 31st among 50 states and the District of Columbia.

Nationwide, smoking costs exceed $300 billion while claiming over one-half million lives, far exceeding the deaths associated with the COVID-19 pandemic. It is estimated that 43.2 million Americans continue to smoke, despite warnings of health risks.

"Smoking doesn't just ruin your health," the report noted. "It can also burn a nasty hole through your wallet...accounting for nearly half a million deaths in the U.S. each year and is the leading cause of lung cancer."

"Smokers also may have an increased risk of severe symptoms from COVID-19. Equally alarming, the report continued, "Since 1964, smoking-related illnesses have claimed over 20 million lives in the U.S., 2.5 of which belonged to non-smokers who developed diseases merely from secondhand smoke exposure."

The National Health Interview Survey report of 2020 revealed that 14.4% of African Americans smoke, compared to 13.3% of Whites and 8% of Hispanics. Surprisingly, 27% of American Indian/Alaska Natives smoke. Nearly 20% of African American adults are current tobacco product users and have the highest prevalence of cigar smoking. The Campaign for Tobacco-Free Kids reports that 'approximately 45,000 African Americans die from smoking-related diseases each year."

"Smoking-related illnesses are the number one cause of death in the African American community, surprising all other causes of death, including AIDS, homicide, diabetes, and accidents." If current smoking rates persist, an estimated 1.6 million Black Americans alive today under the age of 18 will become regular smokers, and about 500,000 will die prematurely from a tobacco-related disease.

Menthol cigarettes—Kool's and Newport's—are the number one selling cigarettes. As reported in a previous edition of Healthy Start, tobacco companies specifically targeted those brands to the Black community, at one point giving away menthol cigarettes to hook Black consumers.

The U.S. Centers for Disease Control and Prevention (CDC) reveals e-cigarettes are the most commonly used tobacco product among African-American youth. In 2021, 5.9% of African-American high schoolers and 4.3% of middle schoolers were current e-cigarette users. African-American high school students reported the highest prevalence of current combustible tobacco product use (7.3%), specifically cigar use, usually used to wrap marijuana (blunts).

Blunts are the second most popular product among African-American youth. In 2021, 4.4% of African American high school students were current cigar users, compared to 2.1 percent of Whites and 1.2 percent of Hispanics. African-American high school students smoke cigarettes at a much lower rate than their Hispanic and White peers due to protective factors such as greater price sensitivity, religiosity, negative community attitudes towards smoking, parental opposition, and sports involvement.

In 2020, 2.8% of African American high school students smoked cigarettes compared to 5.3% of Whites and 4.6% of Hispanics. However, as African American youth enter young adulthood, their smoking rates may rise due to decreased protective factors.
Get care for your health needs — big and small

Connections to all the care you need, close to home

Do you have health questions or symptoms that have been weighing on your mind or waiting on your list? It’s easy to reach out to a doctor at Ascension Medical Group Wisconsin and start a conversation about:

- Annual checkups, physicals and concerns
- Screenings, such as heart scans, colonoscopies, lung and prostate screenings
- Care for new symptoms to chronic conditions
- Care for the whole you — including mental health
- Scheduling imaging and lab tests
- Prescriptions through Ascension Rx
- Connection to specialists for additional care

Schedule now at ascension.org

Wherever and whenever you need us, we’re here — with flexible hours, same-day and next-day care and virtual visits.

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Ascension Wisconsin
How Older Adults Can Get Started with Exercise

Exercise and physical activity are great for your mental and physical health and help keep you independent as you age. Here are a few things you may want to keep in mind when beginning to exercise.

Start Slowly When Beginning Exercise
The key to being successful and safe when beginning a physical activity routine is to build slowly from your current fitness level. Over-exercising can cause injury, which may lead to quitting. A steady rate of progress is the best approach.

To play it safe and reduce your risk of injury:
• Begin your exercise program slowly with low-intensity exercises.
• Warm up before exercising and cool down afterward.
• Pay attention to your surroundings when exercising outdoors.
• Drink water before, during, and after your workout session, even if you don’t feel thirsty. Play catch, kickball, basketball, or soccer.
• Wear appropriate fitness clothes and shoes for your activity.
• If you have specific health conditions, discuss your exercise and physical activity plan with your health care provider.

Get Fit So You Can Do
Practice all 4 types of exercise for the...

1. Endurance
   - So you can: climb stairs, dance the night away
2. Strength
   - So you can: lift groceries, carry grandchildren
3. Balance
   - So you can prevent falls and related injuries
     TIP: Use a chair or the wall for support
4. Flexibility
   - So you can: drive, get dressed

QUESTIONS to Ask Your Doctor About Exercise

Are you considering adding exercise to your daily routine or significantly increasing your level of activity? Talk to your doctor about the exercises and physical activities that are best for you. During your appointment, you can ask:

1. Are there any exercises or activities I should avoid? Your doctor can make recommendations based on your health history, keeping in mind any recent surgeries or ongoing health conditions such as arthritis, diabetes, or heart disease. This would be a great time to check with your doctor about any unexplained symptoms you’ve been experiencing, such as chest pain or pressure, joint pain, dizziness, or shortness of breath. Your doctor may recommend postponing exercise until the problem is diagnosed and treated.

2. Is my preventive care up to date? Your doctor can tell you if there are any tests you might need. For example, women over age 65 should be checked regularly for osteoporosis.

3. How does my health condition affect my ability to exercise? Some health conditions can affect your exercise routine. For example, people with arthritis may need to avoid some types of activity, especially when joints are swollen or inflamed. Those with diabetes may need to adjust their daily schedule, meal plan, or medications when planning their activities. Your doctor can talk to you about any adjustments you need to make to ensure that you get the most out of your new exercise routine.
Write Down Your Short-Term Fitness Goals

Short-term goals will help you make physical activity a regular part of your daily life. For these goals, think about the things you'll need to get or do in order to be physically active.

Here are a few examples of short-term goals:
• Today, I will decide to be more active.
• Tomorrow, I will find out about exercise classes in my area.
• By the end of this week, I will talk with my friend about exercising with me a couple of times a week.

Write Down Your Long-Term Goals

After you write down your short-term goals, you can go on to identify your long-term goals. Focus on where you want to be in 6 months, a year, or 2 years from now. Long-term goals also should be realistic, personal, and important to you. Here are a few examples:
• By this time next year, I will swim 1 mile three times a week.
• Next summer, I will be able to play pitch and catch with my grandchildren.
• In 6 months, I will have my blood pressure under control by increasing my physical activity and following my doctor's advice.

Write Down Your Short-Term Fitness Goals

Short-term goals will help you make physical activity a regular part of your daily life.

For example, you may need to buy walking shoes or fill out an Activity Log so you can figure out how to fit physical activity into your busy day.

Make sure your short-term goals will really help you be active.

Here are a few examples of short-term goals:
• Today, I will decide to be more active.
• Tomorrow, I will find out about exercise classes in my area.
• By the end of this week, I will talk with my friend about exercising with me a couple of times a week.

For more! most benefits!

Don’t forget to test your current fitness level for all 4 types of exercise—endurance, balance, flexibility, and strength.

You may be in shape for running, but if you’re not stretching, you’re not getting the maximum benefit from your exercise.

Write down your results so you can track your progress as you continue to exercise.

Make notes about how these test exercises feel.

If the exercises were hard, do what’s comfortable and slowly build up.

If they were easy, you know your level of fitness is higher.

You can be more ambitious and challenge yourself.

5 Tips to help you stay motivated to exercise

Being physically active is one of the most important things you can do each day to maintain and improve your health and keep doing things you enjoy as you age. Make exercise a priority with the following tips:

1. Find ways to fit exercise into your day.
You are more likely to get moving if exercise is a convenient part of your day.

2. Do activities you enjoy to make it more fun.
Be creative and try something new!

3. Make it social.
Find a virtual “exercise buddy” to help keep you going and provide emotional support.

4. If there’s a break in your routine, get back on track.
Start slowly and gradually build back up to your previous level of activity. Ask your family and friends for support.

5. Keep track of your progress.
Make an exercise plan and don’t forget to reward yourself when you reach your goals.


Should I warm up or cool down before or after exercise?

Warm up for 5 minutes before you exercise. Walking slowly and then stretching are good warm-up activities.

You should also cool down with more stretching for 5 minutes when you finish exercising. Cool down longer in warmer weather.
An outpouring of Black parents are lining up in vaccination centers across the United States to get Pfizer-BioNTech COVID-19 vaccines for their children.

The Food and Drug Administration (FDA) recently authorized emergency approval for two small doses of the Pfizer vaccine for children ages 5 to 11.

More than 9 million children between 5 and 11 years old have received at least one dose of the vaccine, bringing the FDA closer to making Pfizer-BioNTech’s low-dose vaccine available for 28 million children in this age bracket.

The call-to-action for Black parents to get their children ages 5 to 11 vaccinated also comes with a growing concern about long COVID, a condition marked by ongoing COVID-19 symptoms, including brain fog and chronic fatigue, that is affecting more than 6 million children.

Other children have been diagnosed with Multisystem Inflammatory Syndrome in Children (MIS-C), a rare condition that affects multiple organs. And others are struggling with their mental health.

Dr. Nina Ford Johnson, a physician at Cobb Institute and a pediatrician with Infirmary Pediatrics in Alabama, stressed the importance of protecting Black children from long COVID, Multisystem Inflammatory Syndrome and other problems that are becoming more widespread in the U.S.

Dr. Ford Johnson is also the president of the Medical Society of Mobile County, a professional membership organization founded in 1841 that develops medicine to conserve and protect public health.

Last year, Dr. Johnson didn’t have any flu cases among her patients, leading her to think that the flu had been eradicated. But this year, she’s seeing a sharp rise in the number of flu cases among her patients.

“A few days after I thought that, it popped up,” she said. “And I’ve been seeing it ever since.”

Dr. Ford Johnson reminds us that a flu shot protects kids and adults from the flu and other related illnesses, including pneumonia. And that we should see COVID vaccines in the same light.

The Centers for Disease Control and Prevention (CDC) is cautiously optimistic that the number of Omicron cases have already peaked and will now spiral downward. This month, there’s a growing concern that some states are prematurely dropping their indoor mask mandates.

Dr. Ford Johnson said this makes it even more imperative to vaccinate Black children.

“This is very concerning. We still have to stay on top of this,” Dr. Ford Johnson said. “This pandemic has not gone away, and we can witness that with those who’ve lost loved ones.

“This is a public health emergency. This is something that must be done, not just to protect the child itself, but also to protect communities.”

Dr. Ford Johnson said Black Americans should have a collective mindset and get their children and themselves vaccinated, which will get them to the other side of the pandemic in 2022.

“We’re doing this to help each other,” Dr. Ford Johnson said. “I wish everyone would kind of see that from that light and from that standpoint. If we vaccinate each other and vaccinate ourselves, we are protecting each other. I hope that message comes across and is received.”

Please visit this CDC link for more information about COVID-19 variants.

For more information about booster shots, please visit CDC – booster shots.

(continued on page 14)
Community Effort Needed to Lower Alcohol-Induced Deaths in Black Community

A recent report by the Wisconsin Policy Forum highlights concerns about alcohol-induced deaths among Wisconsin residents, and most notably the state’s Black population.

The report, "A Scaring Trend: Alcohol Deaths Up Sharply in Wisconsin," was released in January and shows alcohol-induced deaths rose nearly 25% in the state in 2020, the biggest one-year increase in more than 20 years.

Data in the report only includes deaths directly attributable to alcohol, such as alcohol poisoning, liver disease, neurological, digestive system, or other diseases. Around 90% of alcohol-induced deaths are from alcoholic liver disease or mental/behavioral disorders caused by use of alcohol.

Impact on Black Community

Among the state's Black residents, the report points out that there has been a sharp rise in the rate of alcohol-induced deaths within the Black population over the past decade, to the point where it’s now higher than the national average for Black Americans.

Nationally, the alcohol-induced death rate for Black Americans has been lower than that of White Americans since 2002, and in 2020, significantly more White Americans per 100,000 were dying (176) annually compared to Black Americans (10.0).

Busalacchi noted that in Milwaukee the density of alcohol that’s available within the city’s neighborhoods is concerning along with marketing of alcohol-related products that tends to be targeted toward a younger audience.

"We’ve been watching these numbers go up over the past decade. It is possible to take a step back and figure out how to rein things in and maintain more normal consumption of alcohol.

- Maureen Busalacchi

In Wisconsin, alcohol-induced death rates for Black residents mirrored the national average until 2012, when they began a sharp increase. In 2019, the alcohol-induced death rate for Black residents (17.0 per 100,000) was higher than the rate for White residents (15.1) for the first time since 2005. The death rate for Black residents declined slightly in 2020 (a little more than 15.0 per 100,000), but still well above the national rate (about 10.0).

While the report did not include data from specific cities or regions of the state, the data it presents carries significance for Milwaukee, which has the state’s largest Black population.

Among the steps that communities can take and that the Wisconsin Alcohol Policy Project is working to help facilitate, include:

- Encouraging reassessment of how licenses to sell liquor are approved and how they are renewed.
- Evaluating how alcohol is marketed in retail outlets and what kind of audience is being targeted.
- Encouraging communities and organizations to reduce alcohol consumption at events they host, and encouraging communities to offer family-friendly alcohol-free activities.
- Encouraging screening in schools and health care organizations that identifies those with health challenges related to alcohol consumption or who may show indicators of experiencing such challenges down the road.

Greater collaboration among retailers, restaurant/bar owners, police and civic leaders to ensure alcohol laws are being followed and enforced — not serving or selling to minors and not overserving consumers in general — can also impact people’s behavior toward alcohol consumption.

“There are people working on this in the city and it’s important for us all to work together because it’s a critical health issue not only for the Black community, but the overall community,” Busalacchi said.

Addressing the Challenge

The issue facing Wisconsin’s Black community did not just happen overnight.

“We’ve been watching these numbers go up over the past decade. It is possible to take a step back and figure out how to rein things in and maintain more normal consumption of alcohol,” Busalacchi said.

Where To Go For Help

If you or someone you know is experiencing a drinking problem, help can be found at the following organizations:

- Community Advocates’ Milwaukee Women’s Center | (414)-270-4600
- Wisconsin Addiction Recovery Helpline | Dial 211
- Visit your doctor or local health clinic
- Greater Milwaukee Alcoholic Anonymous | (414)-771-9119
Imunique Triplett has always been something special.

First, her name. Her mother was determined to christen her first daughter with that name - pronounced “I’m unique.”

Then came the Milwaukee president’s transformation from problem child to eager, attentive student in elementary and middle school.

“While I liked school, getting along with others was an issue,” Triplett recalled. “I felt like I was the kid that always got picked on. So when I was, I retaliated. I became the girl everyone watched out for.”

Now, at the tender age of 17, Triplett graduated from Milwaukee Area Technical College’s Licensed Practical Nursing Program six months before earning her diploma from Milwaukee Public Schools’ Rufus King International High School.

And despite being the youngest student in her LPN class, Triplett was chosen by her classmates to speak at MATC’s Nurse Pinning Ceremony, Dec. 14, 2021.

“She’s extremely personable and an amazing person,” said Erin Cherney, MATC’s manager of high school relations.

“She was nominated to be speaker by her peers who are mostly a lot older than her. That’s how dynamic this young lady is.”

“She texted me when she found out and said ‘you’re not going to believe this,’” Cherney said. “I told her I absolutely believed it.”

Triplett has accomplished so much so fast thanks to MATC’s M³ (pronounced M-Cubed) program, a collaboration among MATC, Milwaukee Public Schools and the University of Wisconsin-Milwaukee.

Through College Connections, an M³ dual enrollment program, high school students earn both high school and college credits while taking classes simultaneously at MATC, UWM and high schools.

The M³ program was designed and developed to increase student retention and graduation, enhance student career success and provide a prepared workforce for the state.

“Imunique is setting an example for Milwaukee and setting an example for her peers,” Cherney said. “She relates well to people and she is going to be a role model for them.”

Imunique didn’t start out as a role model. She was adopted by her great aunt and great uncle when she was 10 months old, providing her a stable foundation for life and school.

“I’ve always really liked school. It just came naturally to me. I have enjoyed learning and hearing about new things,” Triplett said. “But I did have some behavior problems.”

At Milwaukee’s Albert Story School, Triplett caught the eye of principal Portia Ewing-Lipsey and several other teachers.

They saw her potential to succeed and steered her on the right path.

“They taught me to stop and think. Don’t be so quick to react. Contemplate and consider what can be done. Mindfulness,” she said.

Going to Rufus King High School as a freshman, Triplett had to learn a new grading system, meet new friends, get familiar with a new building - all without anyone from her old school.

“I was the only student from Story who went to King, so I was pretty hesitant,” she said. Still she succeeded, achieving a 4.0 grade point average in her first year.

During her sophomore year she got an email about the LPN program at MATC and didn’t give it a second thought. “Blood? People? Yuck,” she said. “I never really wanted to be in the health field at all.”

But she did her own research, weighed the pros and cons, then decided to start the program.

She traveled to MATC’s Downtown Milwaukee Campus to take nursing classes, including general anatomy and physiology, pharmacology, clinical management, and psychology of human relations.

She has earned 32 college credits and has received mostly As and Bs in her subjects.

She will be the first student to complete the LPN M³ program, which started in spring 2018, on schedule, said MATC’s Cherney.

“She has a different head on her shoulders,” Cherney said. “She’s not the norm. She is also putting a stamp on the work we’re doing. You set up opportunities for students and when you see a student take them and succeed like Imunique has, it validates what you’re doing. Truly the best part of our job is when we see students succeed.”

For Triplett, there are no real secrets to her success. She works hard, stays focused and tries to remain positive as she can.

“I make time for having fun and being social. She sings, participates in the King High School investment club and makes jewelry in her limited free time.”

“I work hard because I’ve seen how people can struggle. I have seen my parents live from paycheck to paycheck and I knew that I wanted to change that narrative,” she said. “I have to be on my own and surround myself with people that inspire me and that I can inspire.”

The path hasn’t always been easy, especially for a teenager in the 21st century. Peer pressure. Marijuana. Fitting in. Boys and significant others. Needing to do everything you ever wanted to do right now - those are some of the obstacles Triplett has navigated the past two years.

“I have found the confidence to say no when I need to,” she said. “I know that there are things I have to do to finish strong and accomplish my goals.”

Being the nursing pinning speaker was never one of her goals, but she’s embracing the opportunity.

“Everyone in the class is older than me and I think a lot of them saw their own kids in me,” she said.

“I love that they had a sense of trust in me to represent them and our class.”

“I never thought I would be a person other people would look up to,” she said.

“It’s a great, great feeling. It’s wonderful that people feel that way about me. To think some of the adults look up to me is mind-blowing.”

Just as inspiring are Triplett’s future prospects. She has applied to 20 four-year colleges and has heard back from 11.

She has her eyes on New York University, but she also might return to MATC. Becoming a registered nurse is the goal, but medical school is an option.

“Decisions, decisions, decisions,” she said with a smile. But she said she’ll never regret her decision to enter the MATC LPN program. “I would do it all over again in a heartbeat.”

“Once I discovered what I wanted to do, the nursing program aligned right with it,” she said.

“It gave me the practical experience, the networking experience, the learning experience. The faculty and everyone at MATC was super supportive and provided invaluable inspiration.”

“It was worth every tear I shed and every night I stayed up late studying,” she said. “It has been a very special experience.”
USE AS NEEDED TO REDUCE STRESS

Taking care of yourself is a lot more rewarding than taking drugs. That’s why we offer the resources and support you need to avoid a drug or alcohol problem—before you develop one.

BetterWaysToCope.org
COVID Quandry (continued from page 10)

To find out more about the schedule for the upcoming Cobb Institute/NMA Stay Well Health Fair events, visit Stay Well Community Health Fairs. To learn more about the Cobb Institute, please visit thecobbinnstitute.org.

COVID & mental health (continued from page 3)

As we move into the warmer months, we may find that we are more likely to feel fatigued or lacking energy. This is normal, especially if it happens after a period of isolation or stress. However, if you are experiencing urges to harm yourself or others, if you are struggling to focus or concentrations are low, if you are experiencing changes in appetite, mood, or sleep patterns, or if you are feeling overwhelmed or unable to manage daily tasks, it is important to seek help.

There are many low-cost, virtual options for therapy, such as Better Help or Talkspace. If you are experiencing urges to harm yourself, please call the National Suicide Prevention Lifeline at 800-273-8255. The important thing to remember is that you are not alone. According to a study by the Kaiser Family Foundation, about 4 in 10 adults in the U.S. have reported symptoms of anxiety or depression during the pandemic. This is up from only 1 in 10 adults in 2019.

Seek help when needed, engage in activities to improve your mental health, and focus on your daily routine. Consistency is key to finding your way back to a sense of normalcy in times that are anything but normal.

**Take Charge with the DASH Diet**

*Eat your way to lower blood pressure*

About one in three Veterans are believed to have high blood pressure. Are you one of them?

One common reason for high blood pressure, or hypertension, is diet. Eating foods high in salt or fat can lead to big health problems. High blood pressure can cause heart disease, kidney disease, and stroke. But some diets can help.

**What is the DASH diet?**

DASH stands for “Dietary Approaches to Stop Hypertension.” This eating plan focuses on daily and weekly nutrition goals. This eating plan recommends:

- Fish and poultry
- Unsalted nuts
- Vegetables
- Fruits and whole grains
- Fat-free or low-fat dairy
- Unsalted nuts
- Fish and poultry
- Beets and nuts
- Limiting foods high in saturated fat like fatty meats, full-fat dairy products, and coconut or palm oil
- Reducing sugar-sweetened drinks and sweets
- Minimizing processed foods

**Benefits of DASH diets**

When following the DASH diet, positive health changes are sometimes seen in a few weeks. The DASH diet helps control high blood pressure with heart-healthy food choices. It also reduces your risk for other problems including cancer, heart disease, osteoporosis, and diabetes.

**DASH meals with flavor**

Part of the DASH diet is reducing the amount of salt and fat in your diet. When you prepare meals, check food labels for the sodium amount.

- Most dietary sodium comes from eating packaged foods, not from the salt that you add at the dinner table. Look at the label. You should be consuming less than 2,300mg of sodium a day. Foods labeled as “low sodium” have less than 140mg sodium per serving. Try these tips to add more flavor:
  - Read the nutrition fact label
  - Buy fresh seafood and poultry rather than processed
  - Enjoy fresh or frozen vegetables and try ones you haven’t used before
  - Un-salt your snacks by choosing no-salt-added nuts and seeds

**For the sake of your family and your friends...get tested...AND...get your shots!**
Rhys Caraway
I grew up in an affirming faith community that had an AIDS outreach ministry in the early 1990s, which was a radical move during that period and a statement that I hope helps frame my story. For 16 years, HIV has been a major part of my life.

Though my HIV status is negative, I have operated as a same-gender loving (SGL) Black male, creating spaces and doing the work. At 15 years old, I went through my first training on how to have conversations about condoms and testing.

At 23 years old, it hit close to home when one of my closest friends disclosed his status to me. At 24, I entered a new reality when I accepted myself as a gay man.

I used my awareness and experience to address HIV for my community. Black people make up 42 percent of new HIV diagnoses in the United States. Among that population, most new diagnoses are from men who have sex with men (MSM).

According to a CDC fact sheet titled “HIV and African American People,” some of the main factors driving these numbers are racism, HIV stigma, and homophobia. In addition, other factors such as education, housing status, and poverty limit one’s access to HIV prevention services.

The incidence of HIV in the Black SGL community is significantly higher than it is compared with our White counterparts. It saddened me to witness friends of mine be diagnosed; they had no say in the matter.

Seeing friends navigate through life with the stigma of HIV attached to them, along with all the other circumstances Black SGL men face, affected my spirit. They were living at the intersection of being Black and gay with HIV.

Most times, they were not privileged to have the appropriate amount of time to process the news of their diagnosis. It frequently went from a diagnosis to survival mode, which is often the plight of people of color having to navigate the healthcare system in this country.

When addressing this community, let us consider what an HIV diagnosis does to a person’s mental health. My church home was drastically different than most. Whereas I was affirmed and accepted, others were stigmatized and shamed.

These tactics only serve to push people to engage in more high-risk behaviors.

“According to a CDC fact sheet, some of the main factors driving these numbers are racism, HIV stigma, and homophobia…In addition, other factors such as education, housing status, and poverty limit one’s access to HIV prevention services.”

I often think about how much I could have helped if I realized sooner my voice mattered.

As a Let’s Stop HIV Together (Together) Community Ambassador, it has been my mission to address these drivers and to create spaces where SGL men are free to be themselves and address their sexual health concerns.

Creating affirming spaces like my church environment builds a needed rapport in places where mistrust in institutions is often very high.

In my work as a Together Community Ambassador, I found using materials that resonate with my community helps to build that rapport and trust. Together offers an array of tools to address HIV prevention, testing, and treatment and stop HIV stigma in the community. Learn more about Together resources here.

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.
How do I know if my daughter needs mental or behavioral therapy?

If you have questions like these, you are not alone.

Kids in Wisconsin are experiencing a mental & behavioral health crisis, and many families are unsure how to address it with their own children. That’s why Children’s Wisconsin is committed to helping parents and caregivers get the answers they need. Because there simply is no health without mental health.

Learn how you can Shine Through for the child in your life and play an active role in their mental & behavioral health with free online resources at childrenswi.org/shinethrough

Children’s Wisconsin | SHINE THROUGH
Creating Solutions for Mental & Behavioral Health