

Men's Proactive Health Initiative

Summit and Job Fair

September 7, 2024

10:00AM to 2:00PM

1616 W. Atkinson AVE (William R. Stark St.)



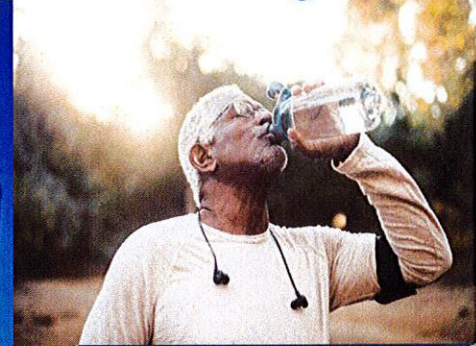
Prince Hall



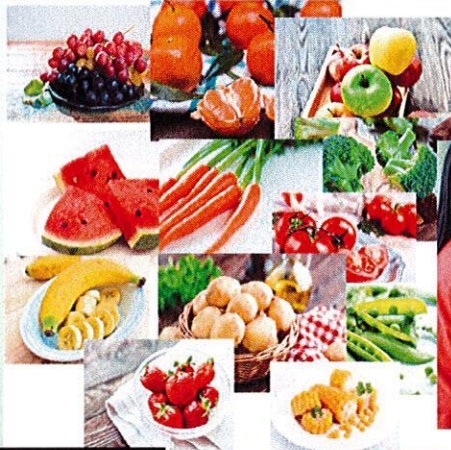
Ionic Consistory #70



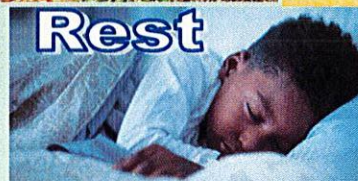
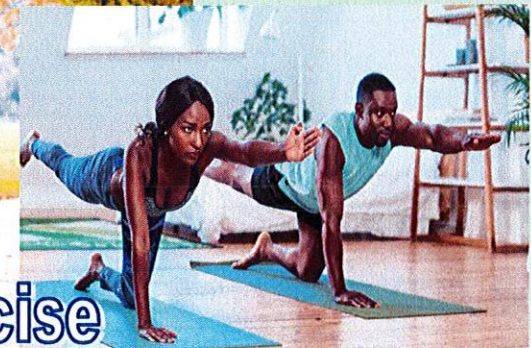
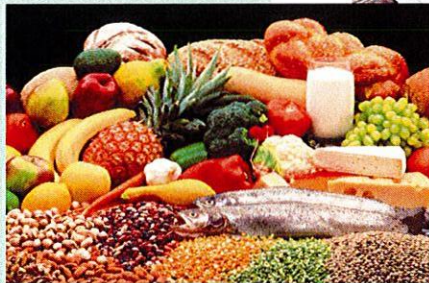
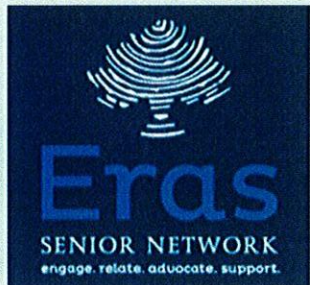
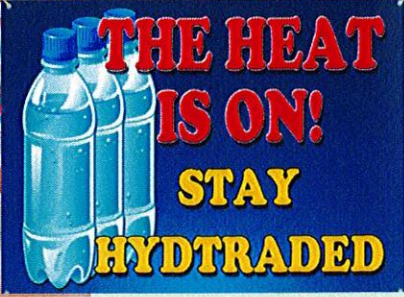
St. Mark AME Church



Medical College of Wisconsin



Greater Milwaukee Urban League



Rest

Exercise

iCare

INDEPENDENT CARE HEALTH PLAN



MEN'S PROACTIVE HEALTH INITIATIVE

April 10, 2024



Hello, I am Minor King, President and CEO of Men's Proactive Healthcare Initiative. We are a 501C(3) organization dedicated to improving the health of men as well as addressing whole family health care concerns. Studies have found that men do not always take care of themselves as well as they should. It is widely recognized that men are less likely than women to access or engage with a range of health programs across a diversity of settings. After several group discussions, and seeing this discrepancy, we organized in 2023 with the purpose of promoting men's health through workshops, and events that support men and their family's well-being.

To inspire men to address physical awareness about health issues, "The goal of the Men's Proactive Healthcare Initiative" (MPHI), is to influence men to see their physician and be screened for various diseases that better respond to treatment if detected early. This includes promoting annual checkups, where many health problems can be identified and treated before they become more serious or even life-threatening.

Currently absent from the men's health literature is practical guidance on approaches to men's health program design—those which seek to quell harmful gender norms and purposefully promote health equity across issues. Programmatic efforts that support the behavioral health, positive development, and social relationships of Black men translate into positive families, communities, and experiences as they live, learn, love, and work over the life course (*American Journal of Men's Health*, 2020). Designing health programs that mitigate barriers associated with normative ideals of masculinity has been widely viewed as a key factor in how health systems should respond. Unfortunately, strategies engaging men often have narrowly conceptualized male health behavior and risk inadvertently reinforcing negative and outdated gender stereotypes.

In cooperation with the Milwaukee Urban League, and other community groups, we propose utilizing a novel gender-transformative conceptual model to sponsor events that help encourage men's proactive healthcare through dissemination of information, discussions, and hands on group presentations. Gender-transformative refers to a set of beliefs, expectations, actions, and embodied practices such as self-reliance, dominance, self-perceived invulnerability, or emotional control typically associated with risk-taking and decreased likelihood to seek help or 'talk'. Utilizing this model, our ultimate goal is to tailor our healthcare programs to improve accessibility, engagement, and appropriateness for men and their families.

Please feel free to reach out with any additional questions or interest in engaging with our program or in joining this effort.

Sincerely,

Minor King, President & CEO

9245 FAIRY CHASM LANE
BROWN DEER, WI. 53223-1408
(414) 248-2113



MENS PROACTIVE HEALTH INITIATIVE

Abstract:

The Black population of the United States is growing. In 2021, there were an estimated 47.2 million people who self-identified as Black, making up 14.2% of the country's population. ¹ As a whole, black men suffer far more health issues than any other ethnic group. The lack of affordable healthcare, health education, and ethnic barriers, promote the disenfranchise to early mortality. We are not apart of the healthcare crises and do not figure into the current healthcare models.

Healthcare can be made assessable with education and knowledge. Understanding how to navigate healthcare systems and the information available can improve the outcomes of a healthier fraternity. The goal of this program is to have the committee armed to become healthcare navigators with strategic models for our organization. Knowledge is the key to success, and it is the one thing that can't be taken from us. A healthy fraternity is within our grasp.

Scope:

In order to fully understand and improve the health of black men; it is imperative we take a more complete view of black men's health outcomes and obtain a broader scope and understanding of how social and institutional forces influence these outcomes.

"Many Black men believe in health repair instead of health maintenance," says Thorpe, founding director of the Program for Research on Men's Health at the Center for Health Disparities Solutions. " We show up at the ER with a condition that often times could have been prevented through checkups." With an average life expectancy of 72, Black men have the shortest lifespan of all groups by race and gender—except Native American men. Black men also have one of the poorest health profiles in the U.S., but it's hidden in plain sight. This is an outcome that should not be accepted especially as corrective measures are within our grasp.

It is important for us to check on one another. We can develop a program and protocol that follow our membership body maintaining contact with one another. Through this vessel, the program is designed to enhance the physical, mental, and spiritual needs of good health. The COVID-19 pandemic has shifted our lives and everything we do into a new paradigm. We are witnesses to a new normal in our lives, and we must embrace it in order to move forward and to meet the needs of our brothers as we close 2023 and enter into 2024.



MENS PROACTIVE HEALTH INITIATIVE

As we will focus not only on providing information on current treatments and services, but developed strategies that expand the reach and network of the healthcare system and community so, people can easily connect and stay healthy outside of a hospital. In the near future advances in artificial intelligent (AI) information technologies, high speed Internet, and remote monitoring technology will be at the forefront, in the delivery of Healthcare. Remotely connected medical devices already will have made major alterations in treatments and the way the healthcare industry will work. We must do our part and make sure those services are available in communities and our members. However, there is a long road ahead, and the journey will not be easy, but we can walk arm and arm and keep supporting each other along the way. We can make it as "President John F. Kennedy stated they are risks and cost to action, but they are for less than the long range risk comfortable interactions."

Mission:

Our mission is to provide health education to all and reach black men, boys, and their families with health awareness messages, tools, screening programs, educational materials, advocacy opportunities, and patient navigation.

Program Goals:

-
- Disseminates information, printed and visual to the members related to health, spirit, and mental concerns.
 - Provide monthly updates on men's health resources
 - Establish relationships with FQHC's as access to care.
 - Follow healthcare trends and report anomalies that impact our health.
 - Raise awareness to current and future trends in healthcare
 - Understand the role AI and how web base healthcare impacts our race
 - Establish an annual healthcare event
 - Establish external partnerships and external contributions
 - Solicit external partner's
 - Secure external funding,
 - Allocate internal funding resources
 - Check on members that have short and long term health concerns
 - Bring in professional presentations during the meeting's
 - Build a resource bank for members and their families
 - Collaborate and stage a annual health and resource fair for members and community



MENS PROACTIVE HEALTH INITIATIVE

Summary: The vision to improve the lives of black men

Men's health outcomes are problematic globally, regionally and nationally. Over the past two decades, there has been growing interest in improving black men's health and the health disparities affecting them. Yet, the health of black men consistently ranks lowest across nearly all groups in the United States. Evidence on the health and social causes of morbidity and mortality among black men has been narrowly concentrated on public health problems (e.g., violence, prostate cancer, and HIV/AIDS) and determinants of health (e.g., education and male gender socialization).

This limited focus omits age-specific leading causes of death and other social determinants of health, such as discrimination, segregation, and access to health care, employment, and income. This review discusses the leading causes of death for black men and the associated risk factors, as well as identifies gaps in the literature and presents a radicalized and gendered framework to guide efforts to address the persistent inequities in health affecting black men.

Men take more risks with their health and are less likely than women to be aware of disease symptoms. They use primary care services less frequently than women, with likely impacts on health outcomes, especially for mental health, although there is evidence that for some conditions men may seek help just as quickly as women. The goal of the committee is to disseminate information, printed and visual to the members related to health, spirit, and mental concerns. Make our members more knowledgeable, more proactive, and more connected with healthcare providers.

Program goals and Outcome:

Improve health outcomes for our members, and their families. While the spotlight right now may be on the disadvantages African Americans face while fighting the novel coronavirus (COVID-19), they are also disadvantaged throughout the health care system when combating other diseases. Compared to their white counterparts, African Americans are generally at higher risk for heart diseases, stroke, cancer, asthma, influenza and pneumonia, diabetes, and HIV/AIDS, according to the Office of Minority Health, part of the Department for Health and Human Services.¹

One possible contributing factor: The Centers for Disease Control and Prevention (CDC) says African Americans are more likely to die at early ages for all causes, as young African Americans are living with diseases that are typically more common at older ages for other races. For example:



MENS PROACTIVE HEALTH INITIATIVE

- High blood pressure is common in 12% vs. 10% of blacks vs. whites aged 18-34 years, respectively. It is common in 33% vs. 22% of those aged 35-49 years, respectively.
- Diabetes is common in 10% of blacks aged 35-49 compared to 6% of whites.
- Stroke is present in 0.7% of blacks aged 18-34 compared to 0.4% of whites the same age. Stroke is common in 2% of African Americans compared to 1% of whites aged 35-49 and 7% vs. 4%, respectively, in those aged 50-64.

The CDC said that social factors compared to others in the U.S., specifically whites, affect African Americans at younger ages: unemployment, living in poverty, not owning a home, cost-prohibitive effects of trying to see an MD, smoking, inactive lifestyle, or obesity.

A white paper from Cigna went further, acknowledging mental health disparities between African Americans and white patients. They noted blacks are 20% more likely to report psychological distress and 50% less likely to receive counseling or mental health treatment due to the aforementioned underlying socioeconomic factors.³

Another area of health care there is a disparity is among renal disease. Blacks and African Americans can suffer from kidney failure at as much as 3 times the rate of Caucasians, according to the National Kidney Foundation.⁴ Black patients represent as much of a third of all patients in the U.S. receiving dialysis for kidney failure, though they don't represent anywhere near that proportion of the U.S. population, they added. Individuals who are black alone, the Office of Minority Health says, make up 12.7% of the U.S. population.

Cancer is another avenue for the differences in health outcomes between white and black Americans. The American Cancer Society said that for most cancers, African Americans have the highest death rate and shortest survival.⁵ however; the overall cancer death rate has dropped faster in African American men and women compared to whites since 1990. They believe this has been driven by more rapid declines among black patients for lung, colorectal, and prostate cancers. This progress has narrowed the black/white disparity for cancer mortality and they estimate almost half million-cancer deaths for black patients were avoided over the previous 25 years.

As noted, the emergence of the COVID-19 has added another spotlight on the health care disparities for black Americans. African Americans are experiencing more serious illness and death from COVID-19 compared to white people, according to data from Johns Hopkins.⁶



MENS PROACTIVE HEALTH INITIATIVE

Some minorities are being disproportionately affected by COVID-19, the CDC said, stemming from inequalities in health care access and poverty.⁷ African Americans are experiencing 2.6 times higher cases, 4.7 times higher hospitalization rates, and 2.1 times more death from COVID-19 compared to white counterparts, the CDC said.⁸ But to combat this harmful trend, Johns Hopkins suggested targeted messaging promoting social distancing and discouraging the stigma associated with COVID-19. Making testing available for those without primary care physicians or access to one is another important way to mitigate racial disparities in health care particularly in the context of COVID-19.

Notably, in 2017, 89% of African Americans had health care coverage compared to 93% of white Americans; 44% of African Americans had government health insurance that year.⁹ Additionally, 12% of African Americans under the age of 65 reported having no health care coverage that year.¹⁰

Health care providers can also look at the race gap through the lens of mortality rates. The leading causes of deaths for African Americans have not changed from 1999 to 2015, the CDC said, but the rates have decreased. Heart disease deaths dropped 43% in that time period, cancer deaths dropped 29%, and stroke deaths were down 41%.

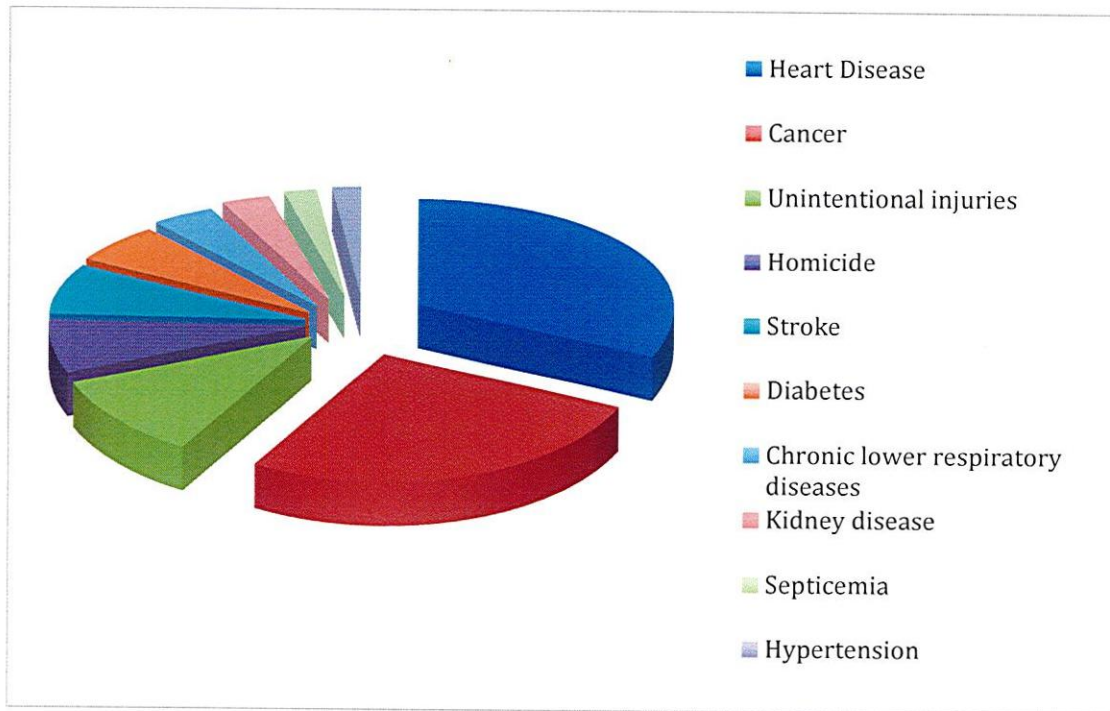
The American Heart Association said getting checked regularly and working with doctors to decrease risk factors can help take care of African Americans' heart health.¹¹ A 2017 statement from the American Heart Association said that disease management is less effective among this population which can contribute to higher mortality.¹² Clinicians and researchers from multiple disciplines can help promote equity in the cardiovascular health of African Americans, they said.

In order to help mitigate these health care disparities, a 2010 American College of Physicians position paper recommended, ¹³ among other things, strengthening health literacy among racial and ethnic minorities and creating cultural competency initiatives beginning in medical school for physicians and health care professionals.



MENS PROACTIVE HEALTH INITIATIVE

10 Leading Causes of Death



Very well Health 3/05/22

Heart Disease	23.7%
Cancer	20.2%
Unintentional injuries	7.9%
Homicide	5.0%
Stroke	4.9%
Diabetes	4.3%
Chronic lower respiratory diseases	3.2%
Kidney disease	2.6%
Septicemia	1.8%
Hypertension	1.6%

MENS PROACTIVE HEALTH INITIATIVE

Vendor Sign-Up Application

Date of Event: September 7, 2024

Event Time: 10:00 AM till 2:00 PM

Breakdown Time: 2:00 PM – 3:00 PM

Place: ST MARK AME Church: 1616 W Atkinson Ave
Milwaukee, WI

Organization: _____

Contact Person: _____

Address: _____

Phone: _____

Email: _____

Date: _____

Type of Service / Describe your Booth:

Please detail any and all planned activities, games, or giveaways, and include a detailed description.

All vendors/participants space is allotted 6-foot tables only, unless granted otherwise. We will be providing the tables and chairs or you can bring your own. Please advise that once your location is assigned there will be no changes made on the day of the event. Space will be allocated on a first come first serve basis.

Please return completed application no later than July 31th, 2024 to assure your reserve space. Please email form to: warner.pmhi@gmail.com

Table information

By signing below. I acknowledged that I have read the terms of condition below regarding the Men's Proactive Healthcare Summit and Job expo, and agreed to abide by them.

Terms and conditions:

- All set up will be completed by Saturday, September 7, 2024 by 9 AM.
- The availability for set up starts at 8:00 AM and must be completed by 9:00 AM
- Break down and moves out. Will start at 2 PM and must be completed by 3 PM.
- Exhibitors agree to be open and staffed with the duration of the event, 10 AM to 2 PM.
- Exhibitor agrees that the booth display will not intrude on or into Isles or adjacent exhibitors space.
- Exhibitor is responsible for any state and local permits and insurance.
- Exhibitor agrees not to use MPH, or logo or its name on any merchandise for sale without a license from MPH.
- Exhibitors are responsible for the cost of moving in/out damage caused by the exhibit space and connection with the event.
- Exhibitors are responsible, for destruction or injuries to him/herself, her/his employees, agents, and representative and will not hold MPH or St Mark responsible.
- MPH reserve the right to make any last-minute changes to space
- Space will be assigned on a first come first serve basis upon receipt of application.
- For additional information or question contact Warner Jackson (414) 699-8921.

Signature: _____