NORTHERN CALIFORNIA

BLACK PHYSICIANS

FORUM 2017

Event Program & Physicians Referral Directory

Discussing Violence as a Public Health Issue in the African American Community

April 28, 2017

UC Davis School of Medicine | Sacramento, CA

PRESENTED BY:

sac cultural hub Media Foundation

UC DAVIS SCHOOL OF MEDICINE

Improving health and health care for all members of our community

UC Davis Health physicians, researchers, specialists, nurses, students and staff are a reflection of California's unique diversity and offer high-quality, compassionate and culturally relevant care, with the goal of reducing health disparities for all. Widely recognized for excellence:

- UC Davis Health has a **dedicated Office for Equity, Diversity and Inclusion,** which is responsible for managing and directing diversity and inclusion programs and initiatives through-out the health system, including its schools of Medicine and Nursing, as well as UC Davis Medical Center, and its Practice Management Group.
- UC Davis Medical Center has been **named a "Leader in Healthcare Equality" by the Human Rights Campaign Foundation** for seven years running for creating a safe, inclusive and welcoming environment for LGBT patients and employees.
- UC Davis School of Medicine **offers curriculum and programs in delivering culturally competent care for underserved populations.** Forty-six percent of incoming first-year medical students in 2016 identify with groups from diverse backgrounds.

To learn more about our award-winning and diverse health system, visit **health.ucdavis.edu.**

UCDAVIS HEALTH

Hendry Ton, M.D., M.S.
Interim Associate Vice Chancellor for Diversity and Inclusion

UC Davis Health

I am pleased to welcome you to the 7th Annual Northern California Black Physicians Forum at the UC Davis School of Medicine. We are grateful to Sac Cultural Hub, whose continued partnership makes this important event possible.

This year, we take a vital look at violence as a critical social determinant of health in communities of color. We have assembled an expert panel that will discuss, among other essential topics, public health interventions relating to youth violence; the dynamics of racial violence; grassroots organizing as a tool to address community violence and mass incarceration; and collaborative, community-level initiatives to address trauma and promote healing. All of our discussions encompass the vital need to address disparities in class, race, gender and other issues of social justice.

As part of its longstanding community mission, UC Davis Health has a strong commitment to equity in both health and education. Our collaborative research, education and clinical services are improving the health of diverse communities locally, statewide, and throughout the United States. And I am proud to share that we have one of the most diverse medical student populations in this country thanks to our efforts to recruit students from traditionally underserved communities. UC Davis Health places a high priority on our partnerships with the African American community and we will continue to support their care providers and leaders to address health disparities.

We are all at this forum because we are committed to finding solutions and fueling change that will positively impact communities in which violence and other social issues are having a deep impact on health and well-being. In addition to gaining insights at the sessions, I hope you will consider this event an opportunity to network and exchange ideas with other attendees. Violence is a community issue that is best addressed collaboratively. We are all better together.

I thank our corporate and community sponsors for their generous support of this forum. And I am grateful to all attendees for demonstrating their commitment by being here today.

Warmest regards,

Hendry Ton, M.D., M.S.

Discussing Violence as a Public Health Issue in the African American Community

Friday, April 28, 2017 – 5:30 pm to 9:30 pm
FORUM SCHEDULE OF ACTIVITIES

UC Davis School of Medicine, Education Building
4610 X Street, Sacramento, CA 95817

5:30 PM **REGISTRATION & RECEPTION**
Networking & Exhibits, Catered Reception
Interviews & Group/Individual Photos

6:30 PM **WELCOME & OPENING REMARKS**
Pleshette Robertson – CEO/Founder
Sac Cultural Hub Media Company & Foundation

Dr. Hendry Ton – Interim Associate Vice Chancellor for Diversity and Inclusion, Associate Dean for Faculty Development and Diversity, University of California, Davis Health

Allen Warren – Councilmember
District 2 City of Sacramento

7:00 PM **SPONSORSHIP ACKNOWLEDGEMENTS**

7:10pm **William Jahmal Miller, MHA** – MC/Host
Deputy Director - Office of Health Equity,
California Department of Public Health

7:15 PM **KEYNOTE PRESENTATION**
Dr. Roger A. Mitchell, Jr., MD, FASCP – Chief Medical Examiner
Office of The Chief Medical Examiner, Washington D.C.

8:15 PM **PANEL PRESENTATION**

Larissa Estes – Program Manager, Health System Transformation Team, Prevention Institute
Oakland, California

Danielle Williams – Community Organizer
Sacramento Area Congregations Together (ACT)

Howard Pinderhughes, PhD – Associate Professor Social & Behavioral Sciences Department at University of California, San Francisco, School of Nursing

9:15 PM **SCHOLARSHIP ANNOUNCEMENTS & CALL FOR MENTORS**

9:30 PM **THANK YOU / CLOSING REMARKS**

Please submit completed evaluation forms to any Sac Cultural Hub Media Foundation staff member

The Sac Cultural Hub Media Foundation is proud to partner with co-presenting sponsor, Office of Diversity at the UC Davis School of Medicine on the 7th Annual Northern California Black Physicians Forum (BPF).

Our 2017 Corporate Sponsors, Community Partners, and Scholarship Contributors include:

The California Endowment
www.calendow.org

Capital Medical Society
www.capitalmedicalsociety.org

Cares Community Health
www.carescommunityhealth.org

Catalyst Real Estate Professionals
www.catalystrealestate.com

Fortune School
www.fortuneschool.us

Health Net of California, Inc.
www.healthnet.com

Office of Health Equity
California Department of Public Health
www.cdph.ca.gov

Sierra Donor Services
www.sierradonor.org

State Farm Insurance
www.sheilaeismyagent.com

The Gospel Vine
www.thegospelvine.com

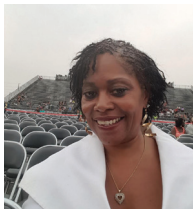
The SOL Project – Saving Our Legacy,
African Americans for Smoke Free Safe Places
www.thesolproject.com

Twlia Makes It Happen!
(916) 662-3502

VisionStep
(916) 397-4501

EVENT PROGRAM DESIGNED BY:
Heather Nieman
Tingible Design | www.tingible.com

Pleshette Robertson is the CEO and Founder of Sac Cultural Hub and the Chief Editor of THE HUB Magazine. She is also the owner of PR & Associates Business Resources which is an advertisement and promotions agency specializing in providing multi-media advertising, social media marketing campaigns, e-blast ad/website production and consultation to new business and startup organizations. She also serves as the Executive Director for the Sac Cultural Hub Media Foundation and as a Covered California Certified Enrollment Counselor. She holds a B.A. in Business Administration from San Jose State University. Pleshette loves and celebrates her extended family while she is the proud mother of three daughters and also has one grandson.



Vicki Blakely holds a Bachelor of Science degree in Health Care Administration/Management where she worked for various hospitals and clinics throughout Southern and Northern California. Vicki is currently studying for her Master's Degree at Capella University. She also owns "Audacity to Promote" a company that specializes in promoting local community events. She was the promoter for the NAACP R&B Festival in 2011. Vicki joined the staff of Sac Cultural Hub in the Fall of 2009 and is the Administrative Secretary working on special grant projects and activities.

After over 20 years in broadcasting, print media, and public relations, **Michael P. Coleman** relocated from Detroit in 2010 to write the latest chapter in his career: Coleman Communications. He regularly delivers feature articles to a variety of print and online platforms, including Jet Magazine, EURweb.com, and Uptown Magazine. Coleman Communications also provides consultation on brand management, event planning & execution, and fund development/sales to corporations and small businesses. Coleman has earned a Bachelor of Arts with High Honors and Distinction in Communication from the University of Michigan, and he's working on achieving fluency in Spanish.

Twlia Laster is the owner of Twlia Makes It Happen! Consulting Service. Ms. Laster has 20 years of experience in providing consulting services to clients in need of strategic marketing, program development, public relations, event management, health education, and smoking cessation facilitation. For the past eight years Ms. Laster has served as the Strategic Marketing and Program Director for Sac Cultural Hub Media Company directly engaged in increasing overall company revenue by revamping the marketing model, developing programs, solidifying corporate and community partnerships. Additionally, Ms. Laster is the Program Manager of The SOL Project, Saving Our Legacy, African Americans for Smoke Free Safe Places, and serves on several public health advisory committees throughout Northern California.

Lesley Leatherwood is the CEO of Leatherwood Marketing, and specializes in national internet marketing and print advertising. She possesses over 20 years of corporate experience, including inside and outside sales, hospitality, public relations, media buying, production assistant in television and four feature films. She is an expert with consulting on promoting, advertising, telemarketing products, events and photography. Lesley is originally from Cardiff Wales, England. Lesley has been with Sac Cultural Hub Media Company since 2008 and serves as the Community Advertising Manager.

Donna Ramos writes several multi-cultural novels simultaneously. Her journalism career as a Senior Staff Writer/Reporter for THE HUB Magazine writes multi-cultural novels and her journalism career as a Senior Staff Writer for THE HUB Magazine has yielded interviews with Maxwell, Venus and Serena Williams and HRH Sarah Ferguson Duchess of York, to name a few. As a self-published author, Ramos received acclaim from Essence Magazine and BlackbookPlus.com for her contemporary romance book "HIGH RISE". "M&M, Madness and Mayhem", the final book in her HIGH RISE Trilogy, was released in 2013.

Valarie Scruggs is the Health Equity Manager at Cares Community Health where she designs programs to reduce health disparities by educating the public on health insurance and managing overall health. She is also owner of VisionStep, a consultant business focused on program development and grant writing. She has 17 years of experience in program planning, securing funding, and implementing effective public health campaigns. She develops strategic alliances to conduct campaigns that increase knowledge and encourage individuals and communities to take action to reduce their risk for disease. She holds a Bachelor of Arts in Social Ecology from University of California, Irvine with an emphasis in Psychology and Social Behavior. Valarie also serves as Program Development Manager for the Sac Cultural Hub Media Foundation.

Violence is preventable. There are a number of cities and communities across the nation that have successfully reduced the amount of violence within their borders and improved the overall health of their residents. Sac Cultural Hub Media Foundation welcomes you to the 7th Annual Northern California Black Physicians Forum, where we will discuss how violence is impacting the African American community in this region and what we can do to prevent future violence and heal the trauma from past violence to make our communities more resilient. Real change happens at a basic level, in our minds, our hearts, our choices, words and actions. It's sustained by us when fostered in the places where we live, where life is valued. We welcome you to learn about and adopt public health strategies to reduce violence in the African American community.

Violence is not just a part of our history, on an upsurge, or a new simmering public problem. Violence is a part of our daily lives, directly or indirectly. In order to mentally separate and protect ourselves from violence we often selectively categorize what is violence, who are the perpetrators of violence, and why the victims brought the violence on themselves. We may dismiss the verbal violence that hurts and shames people. We may minimize some violence as a "normal" part of relationships and child development. We may sensationalize violence when it is between polarizing groups such as bullies in school, gangs, blacks vs whites and citizens vs immigrants. All while ignoring or feeling helpless to tackle the true causes that bring people to violence such as poverty, frustration and fear, mistrust, lack of supportive relationships, negative cultural norms that are passed down, stress from instability, chronic unemployment, abuse, limited education, poor communication skills, religious intolerance, substance abuse, and absence of resilient ability. Within this environment we've added cellphone cameras, police cams, video games, television and social media that have significantly contributed to faster spread and a more penetrating awareness of the violence in our communities. This only inspires greater fear and evokes even more violence when the perception is that there is no accountability, justice, or satisfactory resolutions. Violence leaves everyone not just the individuals involved, but the families, neighborhoods, groups, and communities where we live, work, worship, and play changed for the worse.

Here are a few facts on the scope of violence:

- Homicide is the fifth leading cause of premature death in Sacramento County.
- 9.5% of Black women have been stalked and 41.2% of Black women have been physically abused by a partner during their lifetime.
- Homicide ranks as the 9th leading cause of death among African Americans, Hispanics, and American Indian/Alaskan Natives. Homicide is not in the top 10 for Caucasians and Asians.
- Accidents, Homicide, and Suicide are the top 3 leading causes of death for youth ages 15-24.
- For black homicides with an identified weapon, 84% of victims were shot and killed with guns.
- 29.8 African American children per thousand compared to 10.2 per thousand of White children in Sacramento County experience abuse and neglect.

Studies have shown that trauma from experiencing and witnessing violence creates physical changes in our brains. It's not just an emotional response and the effects are not just momentary but life-long. In our current climate, Americans are increasingly divided and unable to find common ground. The skills in treating trauma and an increased number of voices joined in preventing violence will be critical factors in supporting African Americans at every age to limit violence and manage trauma resulting from both within the community and outside the community.

Thank you for joining us to proactively discuss "Violence as a Public Health Issue in the African American Community."

Pleshette

Pleshette Robertson
CEO & Founder - Sac Cultural Hub
Chief Editor of THE HUB Magazine
President - Sac Cultural Hub Media Foundation

Twlia

Twlia Laster
Strategic Marketing Director
Sac Cultural Hub Media Foundation
Owner - Twlia Makes It Happen!

Valarie

Valarie Scruggs
Program Development Manager
Sac Cultural Hub Media Foundation
Owner - VisionStep

Sources:
Black Homicide Victimization in the United States An Analysis of 2013 Homicide Data by the Violence Policy Center
Domestic Violence in Communities of Color WOCN, Inc. FAQ Collection
Community Health Status Report 2014 Sacramento County
Kidsdata.org - http://www.kidsdata.org/topic/7/childabuse-cases-race/table#jump=children-faring&fmt=2323&loc=1,2,344&tf=84&ch=7,11,8,10,9&sortColumnId=0&sortType=asc

Working to promote healthy lifestyles among African American and urban communities in Northern California, Sac Cultural Hub Media Foundation (SCHMF) was created in 2003 to develop programs which mentor young adults, women, and underserved communities. The Foundation has implemented programs in partnership with corporations, businesses and individuals to promote higher education, provide entrepreneurship opportunities, further diversity partnerships, and improve and encourage collaborative efforts through exceptional signature events that include:

- **Exceptional Women of Color (EWOC) Networking Brunch Conference**
- **Hub Choice Awards (HCA) Show**
- **Black Physicians Forum (BPF)**
- **BPF Medical Student Scholarship Program**
- **Young Exceptional Women of Color (Y-EWOC) Scholarship Competition**
- **Young Women's Summit (YWS)**

The mission of the Sac Cultural Hub Media Foundation is to provide exciting non-traditional vehicles of engagement where businesses and non-profit organizations can market services and products, mentor and provide public service information to educate and inspire the urban community. Our primary goal is to motivate and empower African American professionals, communities, and youth to thrive and succeed in life.

The Sac Cultural Hub Media Foundation utilizes the Sacculturalhub.com Media Company to connect with the African American and Urban communities of Northern California. Sacculturalhub.com is known as the #1 grassroots multi-media organization in Northern California and is the most popular resource for networking of businesses, non-profit organizations, community resources, entertainment, and individuals.

Pleshette Robertson, the CEO and Founder of Sacculturalhub.com launched the website in March 2002. The website provides an internet platform for news, multicultural events, career profiles, professional business services, community resources, educational opportunities, corporate advertising, and photo gallery of Northern California residents, visitors, and celebrities. The website currently receives over 2 million national hits each month with over 50,000 unique visitors each month. In February 2006, Ms. Robertson implemented a signature publication to complement the website. THE HUB: Urban Entertainment & Lifestyle Magazine caters to affluent urban professionals, working class families, and underserved African American and mainstream communities with a mission to highlight these individuals for their community contributions which increases enthusiasm in the community and helps others to celebrate what Northern California has to offer.

sac cultural hub Media Foundation

sac cultural hub urban entertainment

THE URBAN ENTERTAINMENT AND LIFESTYLE MAGAZINE THE HUB SERVING THE NORTHERN CALIFORNIA AREA

Northern California BLACK PHYSICIANS FORUM 2011

EWOC EXCEPTIONAL Women of Color

As Mayor of the City of Sacramento, it is my honor to welcome you to the 7th Annual Black Physicians Forum at the UC Davis School of Medicine. The City of Sacramento values the work of the Black Physicians Forum, and I am pleased to support this year's efforts to help assess health issues impacting African Americans.

This event provides dedicated physicians, medical students, nurses, health providers and residents with valuable resourses to address health disparities in the African American community. I commend your commitment to improving access to services and education, as well as addressing social justice issues. These efforts are important, now more than ever, to achieve equity, equality, and a better quality of life.

I would like to commend the organizers and sponsors for their commitment in ensuring equal and accessible healthcare for African Americans is achieved.

Thank you for all that you do in our community and best wishes for a successful event!

Sincerely,

Darrell Steinberg
MAYOR

Discussing Violence as a Public Health Issue in the African American Community
2017 Black Physicians Forum

Violence is a "Shapeshifter"

Violence is defined by the World Health Organization (WHO) as the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, which either results in or has a high likelihood of resulting in injury, death, psychological harm and deprivation. Violence can affect anyone as "shifts" further than bodily harm. Violence can cause health conditions such as depression, anxiety and other mental health disorders. It also contributes to cancer, heart disease, stroke and other health related disparities because victims of violence try to manage their traumatic experiences by engaging in risky behaviors such as using tobacco, alcohol and drugs. In this regard, violence can be a catalyst to early death and lifelong ill health.

> ***"If violence is not a public health problem; why are all these people dying from it?"***
>
> **Surgeon General David Satcher, 1993**

Why Violence is a Public Health Issue?

Violence is among the most serious health threats in the nation today that jeopardizes public health and safety. There are disproportionately high rates of violence in low-income communities and this disparity contributes heavily to overall health inequities. Violence is a significant inequality, disproportionately affecting young people and people of color.

In the Center for Disease Control (CDC) 2007 publication *"The History of Violence"*, violence is discussed and recognized as a public health problem. The public health community recognizes the importance of behavioral factors in the cause and prevention of disease. Prevention for the top three leading causes of death for African Americans in the United States—heart disease, cancer, and stroke— rests largely on behavioral modifications such as exercise, changes in diet, and smoking cessation. Health care and public health professionals are now utilizing similar models to ascertain the behavioral challenges and modifications needed underlying interpersonal violence and suicidal behavior ("*The History of Violence*", 2007)

Violence is a health issue because it directly affects the health of its victims. In fact, it's such a direct health problem that:

- It's the #1 cause of death for African-American and Latino males aged 15-24
- In many cities, violence is the #1 cause of death for all people under the age of 34
- Since 1960, millions of people have died in the United States from intentional violence

Violence is also a health issue because of the many indirect effects. Merely being exposed to violence has been linked to:

- Chronic disease (heart disease, asthma, stroke, cancer, and more)
- Mental health problems (PTSD, stress, anxiety, depression, and more)
- Lower quality of life
- Increased risk of perpetrating violence

6 Leading Causes of Death, United States
2015, Black, Both Sexes

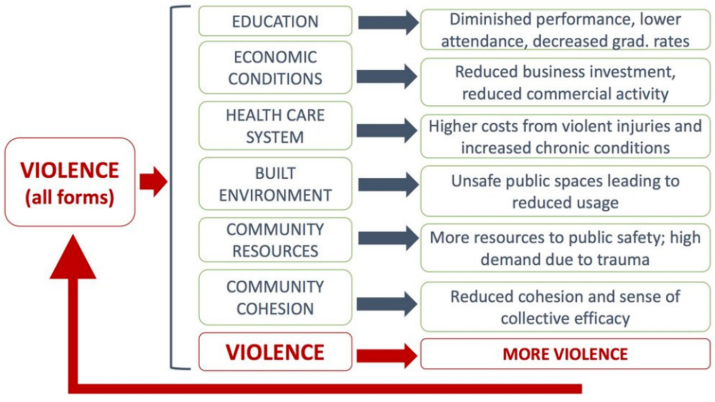
	Age Groups										
Rank	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	Short Gestation 1,618	Unintentional Injury 298	Unintentional Injury 185	Unintentional Injury 150	Homicide 3,062	Homicide 2,921	Heart Disease 2,868	Heart Disease 7,532	Malignant Neoplasms 18,178	Heart Disease 48,028	Heart Disease 75,249
2	Congenital Anomalies 973	Homicide 146	Malignant Neoplasms 63	Homicide 81	Unintentional Injury 1,712	Unintentional Injury 2,208	Unintentional Injury 2,136	Malignant Neoplasms 7,123	Heart Disease 15,302	Malignant Neoplasms 41,045	Malignant Neoplasms 69,389
3	SIDS 537	Congenital Anomalies 101	Chronic Low. Respiratory Disease 50	Malignant Neoplasms 68	Suicide 610	Heart Disease 999	Malignant Neoplasms 1,941	Unintentional Injury 2,771	Diabetes Mellitus 3,093	Cerebro-vascular 12,708	Cerebro-vascular 17,988
4	Maternal Pregnancy Comp. 487	Malignant Neoplasms 57	Homicide 41	Chronic Low. Respiratory Disease 54	Heart Disease 308	Malignant Neoplasms 649	Homicide 1,424	Diabetes Mellitus 1,509	Cerebro-vascular 3,027	Diabetes Mellitus 8,379	Unintentional Injury 15,745
5	Unintentional Injury 423	Heart Disease 53	Congenital Anomalies 39	Suicide 45	Malignant Neoplasms 255	Suicide 603	HIV 604	Cerebro-vascular 1,458	Unintentional Injury 2,768	Alzheimer's Disease 8,039	Diabetes Mellitus 13,869
6	Placenta Cord Membranes 292	Influenza & Pneumonia 28	Heart Disease 30	Two Tied 30	Chronic Low. Respiratory Disease 91	HIV 329	Diabetes Mellitus 549	HIV 969	Chronic Low. Respiratory Disease 1,946	Chronic Low. Respiratory Disease 7,388	Chronic Low. Respiratory Disease 10,475

Produced By: Office of Statistics and Programming, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention
Data Source: National Center for Health Statistics (NCHS), National Vital Statistics System

How does violence impact the health of an entire community?

Communities with high levels of violence often exhibit a number of risk factors at work in the community that have been shown to be linked to poor health outcomes. The pressures from these risk factors that also contribute to bringing about violence such as increased levels of unemployment, poverty, and transiency; decreased levels of economic opportunities and community participation; poor housing conditions; and a lack of access to services as well as the actual acts of violence that cause physical, emotional, and mental trauma detrimentally effect the health of individual members and entire communities. (APA, 2009; Department of Health and Human Services, 2001; Lipsey & Derzon, 1998; Resnick, Ireland, & Borowsky, 2004; World Health Organization, 2002). In contrast, communities with lower levels of violence exhibit more protective factors that buffer individuals and the entire community from violence. Protective factors include a stable economy, positive social norms, abundant resources, high levels of social cohesion, and rewards for prosocial community involvement. (Arthur, Hawkins, Pollard, Catalano, & Baglioni, 2002; Hawkins, Van Horn, & Arthur et al., 2004; Kegler et al., 2005).

Assessing and targeting violence at the community level is especially useful because adjustments at this level often affect a large number of individuals. Factors such as socio economic status (SES) play an important role in this area because communities are often segregated by SES, race, and ethnicity. Targeting the risk and protective factors of violence at the community level will likely produce the greatest change.



Source: Violence as a Health Issue Collaborative - www.violenceepidemic.org

Typology of violence

In its 1996 resolution WHA49.25, declaring violence a leading public health problem, the World Health Assembly called on the World Health Organization to develop a typology of violence that characterized the different types of violence and the links between them. The typology divided violence into three broad categories according to characteristics of those committing the violent act; self-directed violence; interpersonal violence and collective violence.

- Self-directed violence is subdivided into suicidal behavior and self-abuse. The former includes suicidal thoughts, attempted suicides – also called "parasuicide" or "deliberate self-injury" in some countries – and completed suicides. Self-abuse, in contrast, includes acts such as self-mutilation.
- Interpersonal violence is divided into two subcategories: Family and intimate partner violence – violence largely between family members and intimate partners, usually, though not exclusively, taking place in the home. This includes forms of violence such as child abuse, intimate partner violence and abuse of the elderly. Community violence – violence between individuals who are unrelated, and who may or may not know each other, generally taking place outside the home. This includes youth violence, random acts of violence, rape or sexual assault by strangers, and violence in institutional settings such as schools, workplaces, prisons and nursing homes.
- Collective violence is subdivided into social, political and economic violence. Unlike the other two broad categories, the subcategories of collective violence suggest possible motives for violence committed by larger groups of individuals or by states. Collective violence that is committed to advance a particular social agenda includes, for example, crimes of hate committed by organized groups, terrorist acts and mob violence. Political violence includes war and related violent conflicts, state violence and similar acts carried out by larger groups. Economic violence includes attacks by larger groups motivated by economic gain – such as attacks carried out with the purpose of disrupting economic activity, denying access to essential services, or creating economic division and fragmentation. Clearly, acts committed by larger groups can have multiple motives.

Why is Violence more impactful to African American communities?

There is a long history of cultural violence in the African American community. The epidemiological African holocaust is direct proof of years of violence in the form of slavery, oppression, exploitation, rape, suicide, segregation psychological distress and too many other atrocities to list. The history of this trauma impacting all areas of African life, was and is still being transferred generationally through African American communities

Discussing Violence as a Public Health Issue in the African American Community
2017 Black Physicians Forum

In many African American communities, violence and poverty are often part of daily living. As a result, children are at risk for difficulties in all aspects of their lives, particularly their emotional well-being. The magnitude of violence – in terms of the number of victims – makes it a serious health issue. But the effects of violence also ripple through a community, causing trauma to those who witness it or live in fear of it. Violence is a critical public health problem in the United States. Consequences of violence extend beyond the physical and mental suffering of victims and their families to impact schools, neighborhoods, businesses, and the legal and health care systems.

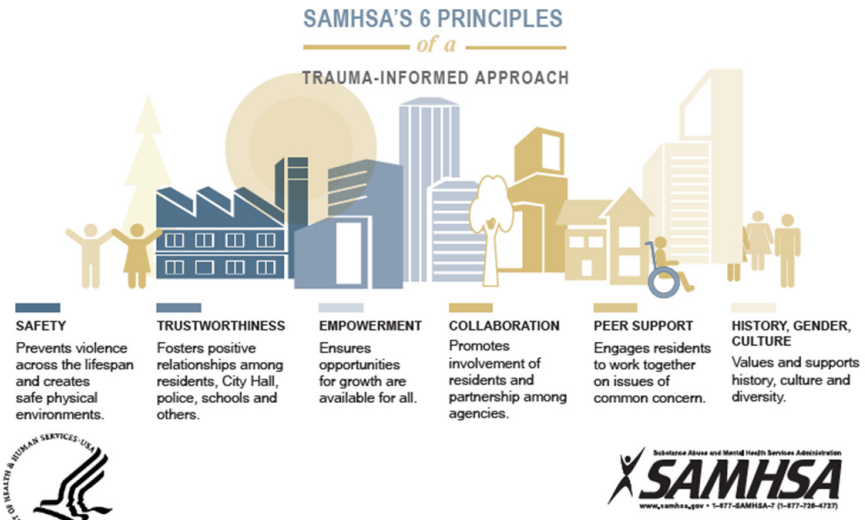
African American communities are experiencing an epidemic of violence and violence related trauma more than ever before. SAMHSA defines trauma as a widespread, harmful, and costly public health problem that occurs as a direct result of violence, abuse, neglect, loss, disaster, war, and other emotionally harmful experiences. Trauma has no boundaries with regard to age, gender, socioeconomic status, race, ethnicity, geography, or sexual orientation.

The need to address trauma and violence is increasingly viewed as an important component of effective behavioral health service delivery. SAMHSA promotes a trauma-informed approach to behavioral health care. This approach shifts away from the view of "What's wrong with this person?" to a more holistic view of "What happened to this person?" This becomes the foundation on which to begin a healing and recovery process (SAMHSA Trauma-Informed Approach, 2017).

The effects of trauma place a heavy burden on individuals, families, and communities and create challenges for public institutions and service systems. Although many people who experience a traumatic event will go on with their lives without lasting negative effects, others will have more difficulty and experience traumatic stress reactions such as exuding violent behavior on others. Emerging research has documented the relationship among traumatic events, impaired neurodevelopmental and immune system responses, and subsequent health risk behaviors resulting in chronic physical and behavioral disorders. In fact, the chronic stress that often accompanies repeated or unresolved trauma has even been linked to physically observable negative changes in brain development, including a reduction in the size of the hippocampus, the portion of the brain associated with long-term memory and spatial reasoning. With appropriate supports and intervention, people can overcome traumatic experiences. However, most people go without these services and supports. Unaddressed trauma significantly increases the risk of mental and substance use disorders, chronic physical diseases, and early death.

Most violence is preventable. Cities with more coordination, communication, and attention to preventing violence have achieved lower violence rates. There is a strong and growing evidence base, grounded in research, practitioner and community prevention models that have developed best practices to reduce violence and treat those effected by trauma.

Post-Traumatic Stress Disorder (PTSD) is a severe and chronic condition that may occur in response to traumatic violent events. The National Survey of American Life (NSAL) found that African Americans show a prevalence rate of 9.1% for PTSD versus 6.8% in non-Hispanic Whites, indicating a notable mental health disparity (Himle et al., 2009). Increased rates of PTSD have been found in other groups as well, including Hispanic Americans, Native Americans, Pacific Islander Americans and Southeast Asian refugees (Pole et al., 2008). Furthermore, PTSD may be more disabling for minorities; for example, African Americans with PTSD experience significantly more impairment at work and carrying out everyday activities (Himle, et al. 2009).

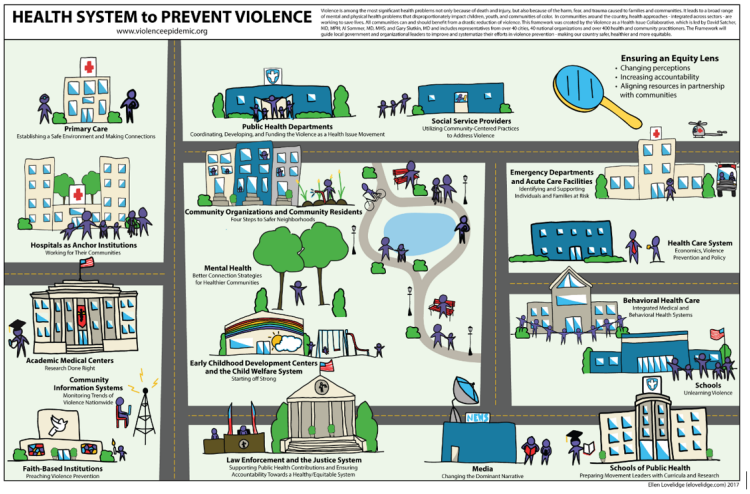


One major factor in understanding PTSD in ethno racial minorities is the impact of racism on emotional and psychological well-being. Racism continues to be a daily part of American culture, and racial barriers have an overwhelming impact on the oppressed. Much research has been conducted on the social, economic, and political effects of racism, but little research recognizes the psychological effects of racism on people of color (Carter, 2007).Chou, Asnaani, and Hofmann (2012) found that perceived racial discrimination was associated with increased mental disorders in African Americans, Hispanic Americans, and Asian Americans, suggesting that racism may in itself be a traumatic experience.

Racism is not typically considered a PTSD Criterion A event, i.e., a qualifying trauma. Mental health difficulties attributed to racist incidents are often questioned or downplayed, a response that only perpetuates the victim's anxieties (Carter, 2007). Thus, clients who seek out mental healthcare to address race-based trauma may be further traumatized by macroaggressions — subtle racist slights — from their own therapists (Sue et al., 2007).

Mental health professionals must be willing and able to assess race-based trauma in their minority clients. Psychologists assessing ethno racial minorities are encouraged to directly inquire about the client's experiences of racism when determining trauma history. Some forms of race-based trauma may include racial harassment, discrimination, witnessing ethno violence or discrimination of another person, historical or personal memory of racism, institutional racism, macroaggressions, and the constant threat of racial discrimination (Helms et al., 2012). The more subtle forms of racism mentioned may be commonplace, leading to constant vigilance, or "cultural paranormal" which may be a protective mechanism against racist incidents. However subtle, the culmination of different forms of racism may result in victimization of an individual parallel to that induced by physical or life-threatening trauma.

Violence has devastated communities across the state, particularly in low-income African American communities. African Americans have the right to safety, health resources and a future free of violence. Health leaders can be instrumental in reversing this trend by having a role in restoring health and violence prevention.



Health institution recommendations on preventing violence in communities

The Adverse Community Experiences and Resilience Framework for Addressing and Preventing Community Trauma Paper summarizes that people are affected by the environments they grow up in. This has implications for preventing violence. Entire communities experience traumatizing events and conditions. Communities that have high levels of violence not only are impacted by the individual trauma that community members and residents are subject to as a result of their exposures to physical violence but also social stressors that can be understood as structural violence. There are also impacts on the community itself—its social structure, social function and its role in the social production of health and well-being which has been identified as Community level trauma. Among other outcomes, trauma can be a barrier to successful implementation of violence prevention and intervention strategies. Trauma and its associated symptoms of mental and psychological illness are more prevalent in the U.S. than in most other countries in the world. While trauma is all too common in the US, there is evidence that boys and men of color may be at even higher risk due to multiple factors including higher rates of incarceration and more exposure to violence. To address this scale of trauma means not only insisting on trauma-informed care for individuals, but also exploring how to address trauma at the population level (Pinderhughes H, Davis R, Williams M., 2015).

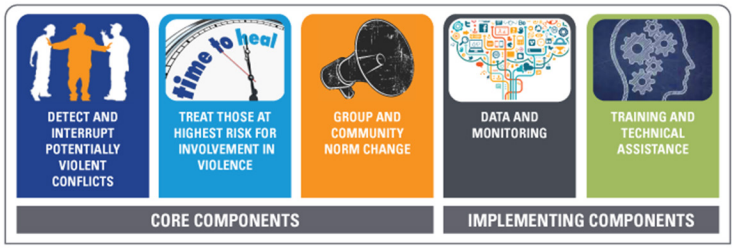
The Cure Violence Health Model offers the following examples for cross sector collaborative efforts:

- **State, county, and city health department**
  The severity of the effect of violence on the health of a community makes it a public health issue. This not only affects the many victims of violence, but also communities that suffer from the exposure to violence. Therefore, every health department should assess the violence in their communities and implement an appropriate program to address the needs of the community.
- **Steps for every health department:**
  - Assessment and analysis of violent injury data to provide improved public health information related to violence and the responses needed.
  - Implement epidemic control programs to prevent fatal events and the spread of violence *(Cure Violence is one model and example, but there are others as well)*.
- **Physicians, others health professionals and hospitals; especially those with trauma services**
  Hospitals, especially those with trauma services, need to implement measure to properly deal with victims of violence. More specific information about how to implement a hospital-based violence intervention program is available at the National Network of Hospital-based Violence Intervention Programs. http://nnhvip.org/

Steps for every hospital:

- Assessment of the types, severity, and amount of violence that your hospital treats.
- Identification of available resources in your community for domestic violence prevention, conflict mediation, behavioral change, and mental health.
- If your hospital treats a high volume of victims of community violence, implement a hospital-based program to prevent retaliation, treat mental trauma, and address behavioral effects.

- **Universities and schools for public health**
  In order to properly treat violence as a disease, we need to properly train workers in the theories and techniques of this work. Additionally, more research is needed to better understand methods of detection and treatment. Below are some of the crucial roles universities need to play.
  - Conduct research on public health methods to prevent violence, including on behavior change for youth involved in violence, changing norms, and mediating conflicts.
  - Develop and offer curriculum on violence, behavior change, norm change, and mediation.
  - Conduct research on the magnitude and impact of violence.



According to the research noted in *Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma;* A community can have several inter-related manifestations of trauma. Symptoms can be present in: the social-cultural environment (the people); the physical/built environment (the place), including infrastructure and public services; and the opportunities afforded in the economic and educational environment which is made up of the local economy and educational institutions (*Pinderhughes H, Davis R, Williams M.*, 2015). These three aspects of the community environment are described below:

THE SOCIAL-CULTURAL ENVIRONMENT

The economic and social processes that result in the concentration of poverty and the urban decay of inner city neighborhoods also damage the social-cultural environment and make-up of many inner city communities. The trauma manifests at the community level as:

- Damaged, fragmented or disrupted social relations, particularly intergenerational relations
- Damaged or broken social networks and infrastructure of social support
- The elevation of destructive, dislocating social norms that promote or encourage violence and unhealthy behaviors rather than community-oriented positive social norms
- A decreased sense of collective political and social efficacy

THE PHYSICAL/BUILT ENVIRONMENT

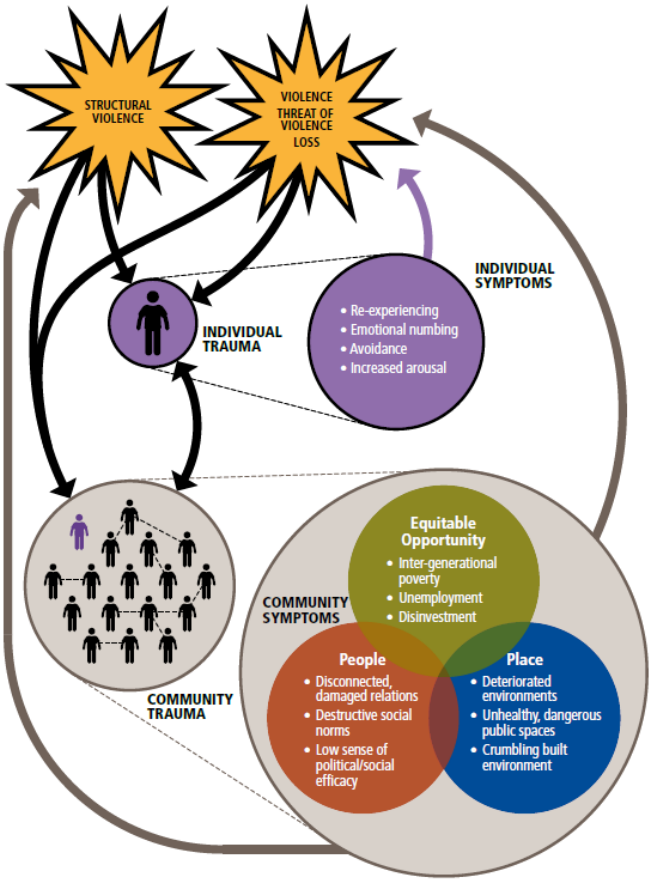
The economic and social changes that occurred during the last 50 years have resulted in communities where high rates of poverty were concentrated in neighborhoods that had a crumbling infrastructure with dilapidated buildings and deteriorating roads, poor transportation services and crippled local economies. There is a mutually reinforcing dynamic between deteriorated physical environments, violence and community trauma. At the community level, trauma manifests within the physical environment, including as:

- Deteriorated environments and unhealthy, often dangerous, public spaces with a crumbling built environment.
- The high availability of unhealthy products, such as alcohol.

THE ECONOMIC ENVIRONMENT

Over the last 40 years, scholars and policy makers have pointed to the role of "neighborhood effects" caused by concentrated poverty. Multiple studies have illustrated that levels of violence, crime and delinquency, education, psychological distress, and various health problems, among many other issues, are affected by neighborhood characteristics, particularly the concentration of poverty. Conversely, the risk of violence and associated trauma is increased by the presence of concentrated poverty. The stressors of living with inadequate access to economic and educational opportunities or inequitable opportunities can also contribute to trauma at the community level. The manifestation of trauma at the community level includes:

- Intergenerational poverty
- Relocation of businesses and jobs
- Limited employment and long-term unemployment
- Government and private disinvestment.



Adverse Community Experiences and Resilience **THEMES AND FINDINGS**

The *Healthy People 2020* initiative includes 13 measurable objectives related to violence prevention. The objective to reduce homicides has been selected as a Healthy People 2020 Leading Health Indicator. Progress to achieve these objectives can save thousands of lives, reduce the suffering of victims and their families, and decrease financial cost to the law enforcement and healthcare systems. The role that health care and public health professional can and do have in violence prevention is critical and extends beyond just caring for victims to also include preventing violence before it happens.

Health care and public health professional goals should be prevention at the population level to improve the health of the entire community or society. Prevention at the population level requires input from and coordination across sectors, including health, education, social services, justice, and policy. The model used by public health is multidisciplinary, incorporating science from healthcare, epidemiology, sociology, psychology, criminology, education, and economics.

The HealthyPeople.gov website provides an implementation framework, called MAP-IT, which describes key steps and resources to help users Mobilize, Assess, Plan, Implement, and Track progress (U.S. DHHS, 2013f). This framework is a helpful resource for planning and evaluating public health interventions to achieve Healthy People 2020 objectives. Healthy People 2020 provides resources, tools, and "field notes" describing an example from a specific location for each of these steps in the MAP-IT framework.

Violence is a preventable public health problem. The public health approach to violence prevention works with multiple sectors including health care when using science and data to understand patterns in violence and implement effective prevention strategies to reduce risk for violence at the population level. Health care professionals are routinely involved in responses to violence after it occurs. However, there are creative, evidence-based approaches, prevention strategies and several resources that professionals can use to become involved in helping reduce and prevent violence in the community.

Table. Healthy People 2020 Violence Prevention Objectives

Objective	Baseline (Year)	Target	Data Source
IVP-29 Reduce homicides (age adjusted, per 100,000 population)*	6.1 (2007)	5.5	National Vital Statistics System-Mortality (NVSS-M), CDC/NCHS
IVP-30 Reduce firearm-related deaths (age adjusted, per 100,000 population)	10.3 (2007)	9.3	National Vital Statistics System-Mortality (NVSS-M), CDC/NCHS
IVP-31 Reduce nonfatal firearm-related injuries (per 100,000 population)	20.7 (2007)	18.6	National Electronic Injury Surveillance System (NEISS), CPSC
IVP-32 Reduce nonfatal physical assault injuries (age adjusted, emergency department visits per 100,000 population)	512.5 (2008)	461.2	National Electronic Injury Surveillance System-All Injury Program (NEISS-AIP), CDC/NCIPC and CPSC
IVP-33 Reduce physical assaults (per 1,000 population, 12+ years)	21.3 (2008)	19.2	National Crime Victimization Survey (NCVS), DOJ/BJS
IVP-34 Reduce physical fighting among adolescents (percent, students in grades 9 through 12)	31.5 (2009)	28.4	Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP
IVP-35 Reduce bullying among adolescents (percent, students in grades 9 through 12)	19.9 (2009)	17.9	Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP
IVP-36 Reduce weapon carrying by adolescents on school property (percent, students in grades 9 through 12)	5.6 (2009)	4.6	Youth Risk Behavior Surveillance System (YRBSS), CDC/NCHHSTP
IVP-37 Reduce child maltreatment deaths (per 100,000 population, <18 years)	2.3 (2008)	2.1	National Child Abuse and Neglect Data System (NCANDS), ACF
IVP-38 Reduce nonfatal child maltreatment (per 1,000 population, <18 years)	9.4 (2008)	8.5	National Child Abuse and Neglect Data System (NCANDS), ACF
IVP-41 Reduce nonfatal intentional self-harm injuries (age adjusted, emergency department visits per 100,000 population)	124.9 (2008)	112.4	National Electronic Injury Surveillance System-All Injury Program (NEISS-AIP), CDC/NCIPC and CPSC
IVP-42 Reduce children's exposure to violence (percent, <18 years)	58.8 (2008)	52.9	National Survey of Children's Exposure to Violence (NatSCEV), DOJ/OJJDP
IVP-43 Increase the number of States and the District of Columbia that link data on violent deaths from death certificates, law enforcement, and coroner and medical examiner reports to inform prevention efforts at the State and local levels	16 states (2009)	50 states and DC	National Violent Death Reporting System (NVDRS), CDC/NCIPC

Healthcare providers can be part of the solution by playing a leadership role, "[They can] provide the leadership to bring the police and the Health Department together ... and when there's a hearing [they can come] to support the Health Department's budget. I can assure you they'll always come down for Medicaid hearings ... But having them come down to talk about the budget request for programs that do this kind of work would be enormously helpful."

Georges Benjamin, MD, executive director of the American Public Health Association, Washington DC
MedPage Today, April 21, 2017

What can physicians and medical professionals do to prevent and address violence in our communities?

Many question physicians and other health care professionals' involvement in violence prevention. Violence negatively affects the health of victims those who witness violence and the communities they reside in. It acts like and epidemic disease which can be effectively prevented using a multi-pronged approach which includes health and hospital based violence intervention and prevention methods.

The Movement towards Violence as a Health Issue promotes the application of an equity lens to all prevention work and advocacy to ensure efforts to reduce violence contain an explicit focus on also reducing inequities. Similar to other health inequities, violence disproportionately affects groups that have been marginalized due to their socioeconomic status, race/ethnicity, sexual orientation, gender identity, disability status, geographic location, or some combination of these factors (www.violenceepidemic.org, 2017).

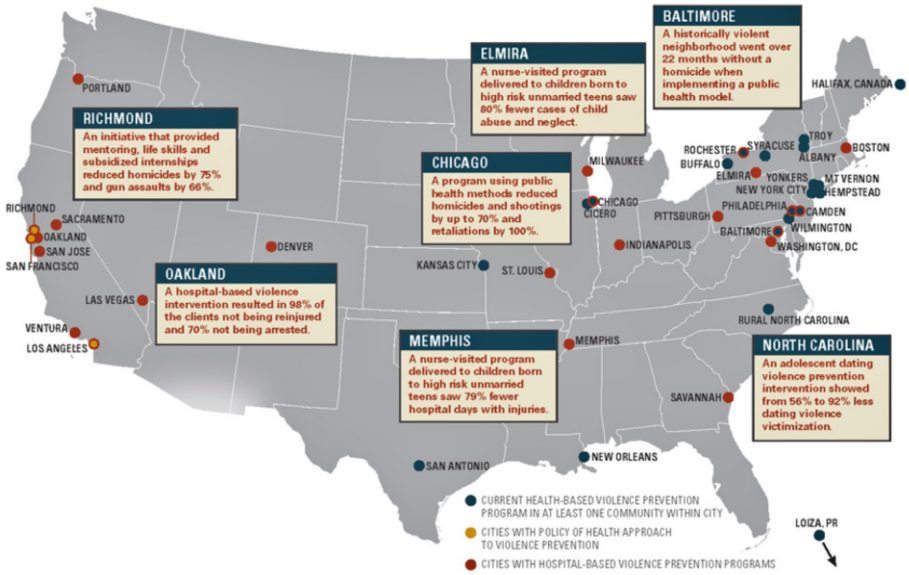
The Movement towards Violence as a Health Issue Collaborative consists of over 400 individuals representing more than 100 organizations across the country dedicated to activating the health and community response to violence. The Initiative, which began in July of 2015, is led by Former Surgeon General Dr. David Satcher, Former Dean of Johns Hopkins School of Public Health Dr. Al Sommer, and CEO/Founder of Cure Violence Dr. Gary Slutkin. They have developed a comprehensive health system framework which includes health sector responsibility (violenceedipemic.org). A health approach to violence prevention offers a solution to the devastating effects of all forms of violence, stabilizing families and communities in a healthy manner and moving the nation towards equity.

Prevention at the population level requires input from and coordination across sectors, including health care, education, social services, justice, policy and public health. The model used by the collaborative must be multidisciplinary, incorporating science from healthcare, epidemiology, sociology, psychology, criminology, education, and economics (Dahlberg & Krug, 2002).

Health care and public health professionals have the ability to bring a comprehensive solution to the African American community's multifaceted violence issues. Public health has a track record in addressing threats to the health equity, improving the health and safety of a population, and can maintain a focus on preventing violence before it occurs. Because violence is preventable, it is critical that collaborative efforts between public health and health care providers who understand effective, quality prevention are part of the leadership and implementation in efforts to reduce violence.

It is the desire of Sac Cultural Hub Media Foundation that you will be inspired to conduct your own research and use the resources we have provided in this booklet to either develop a framework for your specific goals or integrate the framework from the several sources we have cited in this booklet. Join local, state and national conversations around the topic of violence. Together we can change the tide from systems that compound the problem associated with violence to systems that collaborative to reduce violence, and the associated individual and community trauma.

Rigorous evaluations of health approaches to violence prevention and intervention have found reductions in injuries, shootings, and deaths – as well as new attitudes and safer norms. The **health approach works** to intervene, to prevent and to heal. For example:



Source: Violence as a Health Issue Collaborative - www.violenceepidemic.org

Citations:

Pinderhughes H, Davis R, Williams M. (2015). Adverse Community Experiences and Resilience: A Framework for Addressing and Preventing Community Trauma. Prevention Institute, Oakland CA

Kessler R C & Üstün B, Eds (2008). The WHO World Mental Health Surveys: global perspectives on the epidemiology of mental disorders. New York: Cambridge University Press.

Prevention Institute (2014). Making Connections for Mental Health and Wellbeing. Oakland, CA. Pg.5

Health Security Act of 1993 : hearings before the Committee on Labor and Human Resources, United States Senate, One Hundred Third Congress, first session, on examining the administration's proposed Health Security Act, to establish comprehensive health care for every American. (n.d.). Retrieved March 28, 2017, from https://archive.org/stream/healthsecurityac00unit/healthsecurityac00unit_djvu.txt

(2014). Retrieved March 28, 2017, from http://www.who.int/violence_injury_prevention/violence/status_report/2014/en/

Prevention Institute (2014).Making Connections for Mental Health and Wellbeing Among Men and Boy in the U.S., Prevention Institute. Oakland, CA.

Shonkoff, J. P., Boyce, W. T., & McEwen, B. S. (2009). Neuroscience, molecular biology, and the childhood roots of health disparities: Building a new framework for health promotion and disease prevention. Journal of the American Medical Association, 301(21), 2252–2259.

Substance Abuse and Mental Health Services Administration & National Association of State Mental Health Program Directors. (2004). The damaging consequences of violence and trauma. Retrieved March 2, 2011, from http://www.nasmhpd.org/general_files/publications/ntac_pubs/reports/Trauma%20Services%20doc%20FINAL-04.pdf

Huang, L. (2016, September 1). Leading Change: A Plan for SAMHSA's Roles and Actions. Retrieved April 13, 2017, from https://www.SAMHSA.gov/topics/trauma-violence/SAMHSAs-trauma-informed-approach

U.S. Department of Health and Human Services. (2011). History and development of Healthy People. Retrieved from www.healthypeople.gov/2020/about/history.aspx

Prevention Institute. A Public Health Appraoch to Preventing Violence: FAQ. UNITY, 2009

Master of Ceremonies William Jahmal Miller, MHA – Deputy Director, Office of Health Equity, California Department of Public Health

Master of Ceremonies William Jahmal Miller, MHA

Wm. Jahmal Miller is the Deputy Director of the California Department of Public Health's Office of Health Equity (OHE). Miller is the State's lead advisor on issues related to reducing health and mental health disparities and achieving health equity for all Californians. He is responsible for leading the OHE mission to promote equitable social, economic and environmental conditions to achieve optimal health, mental health and well-being for all. Miller is a graduate of Columbia University in New York City, with a Bachelor of Arts (BA) degree in Psychology. He also holds a Master of Health Administration (MHA) degree from the University of Southern California. He holds an Honorary Doctorate in in Humane Letters from Western University of Health. Miller has also served on the boards of directors for some of the nation's most respected organizations, including The California Child Care Referral and Resource Network, The American Heart Association's Western Region Health Equity Task Force, The American Diabetes Association, and Ronald McDonald House. Miller currently serves on the Pacific and Southwest Regional Health Equity Council and as a board member of the National Association of State Offices of Minority Health, the California Telehealth Network and the Faith Fellowship Community Church, respectively. Miller is a native of Sacramento, California and is proud father to two young daughters.

Keynote Speaker Dr. Roger A. Mitchell, Jr., MD, FASCP Chief Medical Examiner, Office of The Chief Medical Examiner, Washington D.C.

Keynote Speaker Dr. Roger A. Mitchell, Jr., MD, FASCP is board certified in Anatomic and Forensic Pathology by the American Board of Pathology and a Fellow with the National Association of Medical Examiners (NAME). Dr. Mitchell sits on national subcommittees for NAME including Education & Planning, and Strategic Planning, as well as Chairs the Deaths in Custody Ad-hoc Committee. He also serves as the National Co-Chair for the National Medical Association's (NMA) Working Group on Gun Violence and Police Use of Force. He is a graduate of Howard University,Washington DC, and New Jersey Medical School, Newark, NJ. Dr. Mitchell is licensed to practice medicine inWashington DC. He has performed over 1300 autopsy examinations in his career and has testified as an expert on numerous cases. He began the study of forensic science and violence prevention as a Forensic Biologist for the Federal Bureau of Investigation (FBI) – DNA Unit in January 1997. It was at the FBI where his love for Science, Technology, Engineering, and Mathematics intersected with his social and professional service. After nearly twenty years, Dr. Mitchell currently serves as Chief Medical Examiner for the nation's capital. Dr. Mitchell currently serves on the Forensic Science Standards Board (FSSB) for the National Institute of Science and Technology (NIST). He is sought after for his expertise on violence, death investigation, mass fatality management, has lectured for the Governments of Egypt, Bangladesh, and the International Coroners Conference in London, England.

Larissa J. Estes, DrPH currently serves as a program manager for Health System Transformation at Prevention Institute in Oakland, California. Dr. Estes has prior experience in program planning, implementation, and evaluation, maternal and child health, women's health, public health and healthcare policy, and strategy development. Prior to Prevention Institute, Larissa served as a Policy Analyst for the Texas Institute of Health Care Quality and Efficiency in Texas. She also worked at the Houston Department of Health and Human Services as the performance improvement manager and public health accreditation coordinator. From 2005-2007, Larissa was the Vince L. Hutchins Fellow in the Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Women's Health where she focused on violence prevention and the Bright Futures for Women's Health and Wellness initiative. Dr. Estes earned her BS in Athletic Training from Duquesne University, a MPH in Family and Child Health from the University of Arizona, and a DrPH in Community Health from the University of Texas Health Science Center at Houston. Dr. Estes has experience in Federal, state, city and county level, non-profit, government, and academic public health. Dr. Estes is adjunct faculty with the Texas Tech Health Science Center School of Nursing, a contributing faculty member with the Walden University College of Health Sciences, and a member of the following organizations: American Public Health Association, Junior League of San Francisco, and Alpha Kappa Alpha Sorority, Inc. She also serves on the Austin Clubhouse Board Advisory Board, the HealthImpact and California Action Coalition Advisory Committee, and the Walden University Center for Faculty Excellence Advisory Council and President's Diversity and Inclusion Work Group.

Social and behavioral scientist and author **Howard Pinderhughes, PhD**, has conducted research and program development in the areas of race relations among youth and adolescent violence prevention and intervention. His research combines aspects of grounded theory, qualitative methods, survey research and participatory action research to examine problems related to the impacts of structural inequality, racial, class and gender dynamics on adolescent health and relations. Dr. Pinderhughes is currently developing a conceptual framework to address the production of racial, class and gender health inequality. His book, Race in the Hood: Conflict and Violence Among Urban Youth, presents a study of racial attitudes among youth and racial violence in New York City.

Danielle Williams is a community organizer for Sacramento Area Congregations Together (ACT) where she trains congregations on fulfilling their prophetic visions to transform their communities through effective grassroots organizing. As a community organizer, she trains congregations to identify community needs, conduct research to develop solutions to identified concerns, negotiate solutions with public officials, and hold them accountable to their commitments. Danielle is passionate about organizing with local faith leaders to end community violence and mass incarceration in ACT's Live Free Campaign that has championed neighborhood night walks to stop the violence the Priority Worker Program for the Kings Arena, civic engagement and implementation of Proposition 47, AB 953 Racial Profiling ACT of 2016, and for police transparency and accountability in Sacramento. Danielle graduated from the University of California Berkeley with a bachelor's degree in 2008.

Karen Hart, M.D. is a board certified family physician and healthcare delivery innovator. After a decade of work in the managed care system, which she feels "put too much emphasis on the bottom line and shortchanged patients," Dr. Karen Hart opened her unique medical practice in 2009. Her model combines traditional and alternative medicine. Dr. Hart is passionate about serving patients of all economic means. She assists the uninsured and small business owners with an innovative membership plan that provides access to her primary care services and a network of specialists. She has gone one step further by opening her heart and her practice to homeless women referred by a local organization that helps them regain a productive role in society. A graduate of the University of Iowa Roy J and Lucille Carver College of Medicine, Dr. Hart's work has been featured on CNN, KCRA, News10, Hearst Corporation national news and the Sacramento Bee. She is a Diplomat of the American Board Family Medicine and currently sits on the Advisory Board of Sure Safe Pharmaceuticals. A California native, she enjoys golf, tennis and cooking and is the proud mother of three girls.

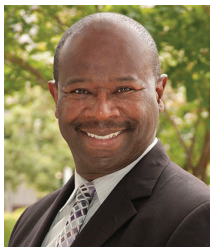
Monica Crooks, D.D.S. was raised in the USAF, where her dad served our country for 28 years and she was blessed with the opportunity to live all over the US as well as in many other countries, finishing High School in Japan and college in Scotland. Fluent only in English, Dr. Crooks can get by in Japanese, Spanish and German. Education was huge in her youth. Dr. Crooks' parents taught that education is the ticket to self-sufficiency and financial independence and she is glad that she listened. Dr. Crooks has been in private practice as a general and cosmetic dentist for 20 years here in Sacramento. Having attended UCLA School of Dentistry and completed a General Practice Residency at David Grant Medical Center, Dr. Crooks loves her profession because modern technology has given dentistry the ability to do nearly miraculous things with anyone's smile. She loves the sense of accomplishment that comes from making an unattractive smile, suddenly gorgeous. Even more, Dr. Crooks love the tears of joy and the hugs of gratitude that she gets from her happy patients!

Darryl Hunter, M.D. received his medical degree from the Uniformed Services University in 1988 and completed his radiation oncology residency at U.C. San Francisco in 1993. Dr. Hunter has served as an active duty Air Force physician for 17 years before joining Kaiser Permanente in 2005. Dr. Hunter participates in community service projects and considers it an obligation of good citizenship. He serves as a member of the Sacramento Community Cancer Coalition where 11 independent community-based organizations are committed to improving access to free cancer testing for underserved. He also serves as a member of the Sacramento Community Veterans Alliance where civic leaders, veteran service organizations and government agencies work to connect veterans to service-connected benefits. Dr. Hunter also participates in activities under the Dr Ernest and Arthella Hunter Foundation, Inc. which provides scholarships for physicians committed to improving access to cancer care for those in underserved communities.

Glenn A. Middleton, D.D.S. was born and raised in San Francisco, California. He received a B.S. in Zoology from the University of California, Davis, and then received a D.D.S. from the University of California, San Francisco. Dr. Middleton completed a post-doctorate program in prosthetics at the Stanford University Medical Center and the Veteran's Administration Hospital in Palo Alto, California. He provided care for the Head and Neck Oncology Unit and the Spinal Rehabilitation Department as well. Since 1992, he has maintained a private practice in restorative dentistry in Sacramento, California. Dr. Middleton has traveled abroad to provide dental care for the impoverished in Belize, Cuba and the Philippines. He is a member of the American Dental Association, the California Dental Association, the Sacramento District Dental Society, and is the current president of the Sacramento Chapter of the National Dental Association.

William Jahmal Miller is the Deputy Director of the California Department of Public Health's Office of Health Equity (OHE). Miller is the State's lead advisor on issues related to reducing health and mental health disparities and achieving health equity for all Californians. He is responsible for leading the OHE mission to promote equitable social, economic and environmental conditions to achieve optimal health, mental health and well-being for all. Miller is a graduate of Columbia University in New York City, with a Bachelor of Arts (BA) degree in Psychology. He also holds a Master of Health Administration (MHA) degree from the University of Southern California. He holds an Honorary Doctorate in in Humane Letters from Western University of Health. Miller is a native of Sacramento, California and is proud father to two young daughters.

Chet P. Hewitt, is the President and CEO of Sierra Health Foundation in Sacramento, California. Since joining the foundation in 2007, Chet has focused the foundation's grantmaking on health promotion, access, and disparity interventions that target youth and other vulnerable populations. Prior to joining Sierra Health, Chet served as the director of the Alameda County Social Services Agency, associate director with the Rockefeller Foundation in New York, and as a program director at the Center on Juvenile and Criminal Justice in San Francisco. In addition to his work, Chet enjoys cycling and gardening. However, his greatest joy is time spent with his wife, Laura, and their two young sons, Chet II and Stephan. William Jahmal Miller serves as the National Communications Manager with Kaiser Permanente's Program Offices - Community Benefit. Most recently served in Kaiser's Central Valley Service Area, where he was Manager for Government & Community Relations within the Public Affairs Division. Mr. Miller previously provided overall management of for Sutter Health as Manager for Strategic Marketing & Communications. Prior to that, he was the Program Manager for Sutter Children's Hospital at Sutter Medical Center, Sacramento. He is a board member of the CA Child Care Referral and Resource Network. The following are additional volunteer boards where he serves - American Diabetes Association, Safehaven Ministries, Bloodsource Advisory & Ronald McDonald House Charities. Mr. Miller recently completed an Executive Fellowship with the Nehemiah Emerging Leaders Program in conjunction with the American Leadership Forum & CORO. He completed his undergraduate work at Columbia University, and his graduate work at the University of Southern California.



Dr. Darin A. Latimore, M.D. is Deputy Dean for Diversity and Inclusion at Yale School of Medicine (YSM). He is establishing a comprehensive plan for furthering diversity, equity, and inclusion at YSM, including a robust recruitment, development, and retention program for faculty, students, and staff. Dr. Latimore is the former Associate Dean of Medical and Resident Diversity at UC Davis, where he helped to raise the diversity of qualified medical students to 43% coming from African-American, Hispanic, Native American, Asian-American and economically disadvantaged backgrounds. He is active on numerous task forces and local, state and national work groups dedicated to equity and medical education. He also maintains a clinical practice.

Amor Adams, D.C. - Chiropractic
5915 B Hollis St.
Emeryville, CA 94608
(510) 547-5633

Ruenell D. Adams, M.D. - Family Practice
8170 Laguna Blvd. #220
Elk Grove, CA 95758
(916) 691-5900

Josepha Adubofour, M.D. - Opthamology
7373 West Lane
Stockton, CA 95810
(209) 475-5140

Kwabena O. Adubofour-Mensah, M.D. - Internal Medicine
2524 East Main Street
Stockton, CA 95205
(209) 466-6871

Josephine N. Agbowo, M.D. - Family Practice
Kaiser Medical Grp
350-30th St., #100
Oakland, CA 94609
(510) 204-8290

Robert Agee Jr., M.D. - Emergency Medicine
African American Wellness Project (AAWP)
3555 Whipple Road
Union City, CA 94587
(510) 675-3267

Denise Bass Allen, D.D.S. - Pediatric Dentistry
2100 Broadway
Oakland, CA 94612
(510) 763-2022
denisebassallenD.D.S..com

Miya Allen, M.D. - Endocrinology
1010 Nut Tree Rd. #100
Vacaville, CA 95687
(707) 624-7999

Nate Allen - Natomas OB/GYN
National Medical Association
2201 Northgate Boulevard Suite East
Sacramento, CA 95833
(916) 924-8776

Thomas Amankonah, M.D. - Gastroenterology
Loma Linda Univ. Med Ctr.
25865 Barton Road, #101
Loma Linda, CA 92354
(909) 558-3636

Derek Anders, DPM - Podiatry Medicine
P.O. Box 41303
Reno, NV 89504
(702) 242-3870

Robert E Anderson, M.D. - Internal Medicine
1310 Jophnson Lnae Bldg. H-83, #114
Vallejp, CA 94592
(707) 638-5968

Susan F Andrews, Psy.D - Psychiatry
8007 Laguna Blvd.
Elk Grove, CA 95758
(916) 683-3700

Madelyn L. Ballard, D.D.S. - Dentistry
Berkeley Dental Society
3031 Telegraph Avenue, #108
Berkeley, CA 94705
(510) 845-2350

Norman Banks, M.D. - Family Practice
Brookside Comm. Health Ctr. of San Pablo
1030 Nebin Ave.
Richmond, CA 94801
(510) 215-5001
brookside.org

Victoria L Barber, M.D. - Orthopaedics
Pennisula Orthopaedics Assoc.
1850 Sullivan Ave., Suite #337
Daly City, CA 94015
(650) 756-5630

Ernest A Bates, M.D. - Neurology Surgery
American Shared
4 Embarcadero Center, Suite #3700
San Francisco, CA 94111
(415) 788-5900x302
ashs.com

Lorae Womack Batzdorf, M.D. - Internal Medicine
2850 Telegraph Ave., #130
Berkeley, CA 94705
(510) 204-8110

Gary E. Bean, M.D. - Pediatrics
4180 Park Blvd.
Oakland, CA 94602
(510) (530) 5437
sutterhealth.org/dr-gaey-e-bean

Sidney Bean, M.D. - Chiropractic
Bean Chiropractic
1754-36th St.
Sacramento, CA 95816
(916) 475-1263
beanchiropractic.com

Wallace J. Bellamy, DM.D. - Dentistry
Fountain Plaza Family Dental
8007 Laguna Blvd., #3
Elk Grove, CA 95758
(916) 683-3011
drbellamydmd.com

Ayanna Benett, M.D. - Pediatrics
Alameda Peds. Association
1332 Park Street, 202
Alameda, CA 94501
(510) 523-3417
alamedapediatrics.com

Samuel Benson, M.D. - Psychiatry
Registry K38Physician Svcs.
1299 Newll Hall Pl. #100
Walnut Creek, CA 94596
(925) 938-8085

Calvin B. Benton, M.D. - General Sx.
13460 Skyline Blvd.
Oakland, CA 94619
(510) 568-6743

Janine Bera, M.D. - Intrernal Medicine
The Permanente Medical Group
10350 Promenade Parkway
Elk Grove, CA 95757
(916) 478-5135
permanente.net/homepage/kaiser/doctor/janinebera

Yamilee Bermingham, M.D. - OB/GYN
630-29th St.
San Francisco, CA 94131
(415) 608-3934

John G. Bias, M.D. - Family Practice
UC Davis Medical Grp.
8110 Laguna Blvd.
Elk Grove, CA 95758
(916) 683-3955

Freddie Blackwell, M.D. - Orthopaedics
1600 Sherman St.
Alameda, CA 94501
(510) 987-8605

Ronald T Blanchette, D.D.S. - General Dentistry
7203 Florin Mall Dr Ste B
Sacramento, CA 95823
(916) 392-7373

D. Anton Bland, M.D. - Psychiatry
1580 First St.
Napa, CA 94559
(707) 258-8757

Dwain Bobo, M.D. - Anesthesiology
1700 Coffee Rd
Modesto, CA 95355
(209) 526-4500

Jackie A Bolds, M.D. - Internal Medicine
Alameda County Medical Ctr.
ACMC Highland 6066 Civic Terrace Avenue
Newark, CA 94560
(510) 505-1600

Laurie A Bostick-Cammon, M.D. - Pediatrics
Valley Medical Ctr.
1993 McKee Road
San Jose, CA 95116
(408) 885-5550

Albert L. Brooks, M.D - OB/GYN
African American Wellness Project (AAWP)
2000 Mowry Avenue
Fremont, CA 94538
(510) 795-2026

Andrew Brown, M.D. - Pediatrics
Kaiser Foundation Hospital K4
27303 Sleepyhollow
Hayward, CA 94545
(510) 675-4050

Frank Brown, M.D. - OB/GYN
ReGenesis Health Services
9925 International Blvd. #2
Oakland, CA 94603
(510) 632-5000
hillcarefoundation.org

Shontae Buffington, M.D. - Pediatrics
UC Davis Med. Grp.-Folsom
251 Turnpike Drive
Folsom, CA 95630
(916) 985-9330

Nadine Burke-Harris, M.D. - Pediatrics
Bayview Child Health Center
3450 3rd Street, Bldg 2, Suite 200
San Francisco, CA 94124
(415) 684-9520

Ralph A. Callender, III, D.D.S. - Dentistry/Orthodontists
3220 S. Broadway, #A6
Eureka, CA 95501
(707) 442-5000

Donna White Carey, M.D. - Pediatrics
825 Delbon Ave
Turlock, CA 95382
(510) 384-9607

Kawanaa Carter, M.D. - Neurology
Folsom Neurological Surgery
1615 Creekside Drive, Suite 101
Folsom, CA 95630
(916) 817-4600 • folsomneuro.com/AboutFNS.html

Wade R. Cartwright, M.D. - Otolaryngologist
411 30th Street #401
Oakland, CA 94609
(510) 814-6642

Ronald A Clark, M.D. - General Surgery
909 Hyde Street, Suite #325
San Francisco, CA 94109
(415) 775-2795

Edward J Collins, M.D. - Urology
2100 Webster Street, #222
San Francisco, CA 94115
(415) 202-0250

Tracey Cook, D.D.S. - Dentistry
227 C Street
Davis, CA 95616
(530) 661-3196

David Tom Cooke, M.D. - Thoracic Surgeon
UC Davis Medical Grp.
2221 Stockton Blvd. #2112 Cypress Bldg.
Sacramento, CA 95817
(916) 734-3861

Sherilynn Cooke, M.D. - Internal Medicine
Kaiser Permanente
200 Muir Road
Martinez, CA 94553
(925) 372-1999

Monica Crooks, D.D.S. - Dentistry
Family Dentistry
931 Howe Ave, Ste A
Sacramento, CA 95825
(916) 922-2027

Joann Daley, M.D. - Pediatrics
Kaiser Permanente
3000 Las Pasitas Road, 1st Floor
Livermore, CA 94550
(925) 243-2600

Toni Daniels, M.D. - Anesthesiology
2600 McDonald Avenue
Richmond, CA 94804
(510) 236-7243

E. Michael Darby, M.D. - Gastroenterology
Gastroenterology Consultants
3300 Webster Street, Suite #312
Oakland, CA 94609
(510) 444-3297 x112

Yinka Davies, M.D. - Pediatric Gastroenterologist
Sutter Medical Grp.-PED, GI
5765 Greenback Lane
Sacramento, CA 95841
(916) 332-1244

Julian R Davis, M.D. - Pediatrics/Onc. & Hem.
5461 Foothill Blvd.
Oakland, CA 94601
(510) 532-0918

Patrick A Dawkins, M.D. - OB/GYN
5401 Norris Canyon Road, Suite #304
San Ramon, CA 94583
(925) 901-0620

Leslie R Delaney, M.D. - Anesthesiology
1844 San Miguel Drive, #310
Walnut Creek, CA 94596
(925) 988-9333

Todd Dillard, M.D. - OB/GYN
Kaiser Permanente
7601 Stoneridge Drive, So. Bldg. 1st Fl.
Pleasanton, CA 94588
(925) 847-5326

Gregory Douglas, M.D. - Gynecology
1995 Zinfandel Drive, Suite 203
Rancho Cordova, CA 95670
916.761.9218

Veronica Eckblad-Obodo, M.D. - Family Practice
Kaiser Permanente
1550 Gateway Blvd.
Fairfield, CA 94533
(707) 427-4000

Moses Elam, M.D. - Dermatology
The Permanente Medical Group
3rd Floor, Ste. 355 7373 West Lane
Stockton, CA 95210
(209) 476-3309
permanente.net/homepage/doctor/moseselam/

Ronn Elmore, Psy.D - Counselling
5050 Laguna Blvd., Ste. 112-423
Elk Grove, CA 95758
(916) 760-0401
drronn.com

Coynes L. Ennix, Jr., M.D. - Thoracic Surgeon
Washington Township Center for Cardiovascular Diseases
39141 Civic Center Drive, #335
Fremont, CA 94538
(510) 248-1400

Calvin Larry Garland, D.D.S. - Dentistry
River Lake Family Dental
7600 Greenhaven #19
Sacramento, CA 95831
(916) 422-1823
riverlakefamilydental.com

Jocelyn Garrick, M.D. - Emergency Medicine
1411 East 31st Street
Oakland, CA 94605
(510) 535-7441

Owen D Garrick, M.D. - Administration
African American Wellness Project (AAWP)
1 Post Street, 29th Floor
San Francisco, CA 94104
(415) 983-8300

Yvette M Gentry, M.D. - OB/GYN
3300 Webster Street, #1200
Oakland, CA 94609
(510) 653-0846
obygyn-eastbay.com

Artha Gillis, M.D. Ph.D. - Psychiatry
Center for Mind & Brain
267 Cousteau Place
Davis, CA 95618
(530) 297-4651

A. Tyrone Glover, M.D. – Ophthalmology:
Oculoplastic Cosmetic Surgery (Retired)
President of Capital Medical Society
Sacramento, CA

Donald Golden, M.D. - Emergency Medicine
Berkeley Health Center
2908 Ellsworth Street
Berkeley, CA 94705
(510) 843-6194

Otashe Golden, M.D. - Family Practice
California Hospitalist Physicians, Inc.
9098 Laguna Main Street #6B
Elk Grove, CA 95758
(916) 691-6780
cahospitalists.com

Glenda Darlene Goodwin, M.D. - OB/GYN
Laguna Family Practice
7811 Laguna Blvd. #161
Elk Grove, CA 95758
(916) 683-6555

Reginald Gowans, D.D.S. - Dentistry
730 Sunrise Blvd., #130
Roseville, CA 95661
(916) 782-2161

Kathleen Grant, M.D. - Chief of Hematoology/Oncology
California Pacific Med. Ctr.
2100 Webster Street, #225
San Francisco, CA 94115
(415) 923-3012

Akiba Green, M.D. - OB/GYN
4100 E. Commerce Way, #110
Sacramento, CA 95834
(916) 515-1698

Dineen Greer, M.D. - Family Practice
1201 Alhambra Blvd, #300
Sacramento, CA 95816
(916) 451-4400
sutterhealth.org

Allen Hall, M.D. - Family and Community Medicine
UC Davis Medical Group
8110 Laguna Blvd.
Elk Grove, CA 95758
(916) 683-3955

Richard E. Harr, M.D. , MPH - Internal Medicine/Chronic Diseases
The Permanente Medical Group
1600 Eureka Road
Roseville, CA 95661
(916) 746-3646

Marsha Henry, D.D.S. - Dentistry
Carrington & Henry Dental
905 Secret River Dr.
Sacramento, CA 95831
916 393-1363

Michael J. Henry, M.D. - Rehabilitation Management
648 Northfield Dr
Sacramento, CA 95833
(916) 927-3422

Dr.Thomas W. Hopkins, M.D. - Internal Medicine
A Professional Corporation
2025 P Street
Sacramento, CA 95811
916.446.4449
www.hopkinsmd.com

Darryl C. Hunter, M.D. - Radiation Oncology
Kaiser Permanente
504 Gibson Dr Kaiser Permanente RDO
Roseville, CA 95678
(916) 771-2871

Olajire Idowu, M.D. - Internal Medicine
1735 Metler Road
Lodi, CA 95242
(209) 477-8510

Anthony Iton, M.D. ,JD, MPH - Sr.Vice Pres., Healthy Communities
California Endowment
1111 Broadway 7th Floor
Oakland, CA 94607
(510) 271-4300

Ronald Jennings, Ph.d - Clinical Psychologist
1220 S. Street
Sacramento, CA 95811

Andria D. Johnson, M.D. - Family Practice
3100 Telegraph Avenue
Oakland, CA 94609
(510) 286-8160

William Johnson, M.D. - Adult Medicine
Kaiser Permanente
10305 Promenade Pkwy
Elk Grove, CA 95624
(916) 544-6000

Candace Jones, M.D. - Pediatrics
Kaiser Permanente
1650 Response Road
Sacramento, CA 95815
(916) 614-4060

Ira T. Joyner, Jr., M.D - OB/GYN
Golden State Physicians Med. Grp.
7501 Hospital Drive, Suite 304
Sacramento, CA 95823
(916) 423-2299
gspmg.com/doc_info.jsp?eid=153

Olivia Kasirye, M.D. , MS - Public Health Officer
Sacramento County DHHS
7001A E. Parkway, #600
Sacramento, CA 95823
(916) 875-5881

Bobby C. Kennedy, D.D.S. - General Dentistry
1611 Executive Ct., #200
Sacramento, CA 95864
(916) 487-5160

Rosalind A. Kirnon, M.D. - Otolaryngologist
Kaiser Permanente
1600 Eureka Road, Bldg. D 2nd Floor
Roseville, CA 95661
(916) 784-5880

Clifton A. Lamb, M.D. - Psychiatry
1109 Kennedy Place #3
Davis, CA 95616
(530) 753-6554

Edward C Lampley,Sr., M.D. - Gynecology
9925 International Blvd., Suite #1
Oakland, CA 94603
(510) 638-1250

Darin Latimore, M.D. - Internal Medicine
UC Davis-School of Medicine
2315 Stockton Blvd.
Sacramento, CA 95817
916.703-5567
ucdmc.ucdavis.edu/welcome/features/20080820_diversity_latimore/index.html

Candace M. Lawson, M.D. - Family Medicine
Mercy Family Health Center
7601 Hospital Dr.
Sacramento, CA 95823
(916) 681-1600

Michael A LeNoir, M.D. - Pediatrics
2940 Summit Street
Oakland, CA 94609
(510) 834-4897
drlenoir.com

Bill Lewis, M.D. - Otolaryngology
2961 Summit Street, Suite #1
Oakland, CA 94609
(510) 465-0941

Cassius Lockett - Epidemiologist
7001-A East Pkwy, #600
Sacramento, CA 95823
(916) 875-6016

Avis E. Logan, M.D. - Family Practice
North Oakland Family Practice
3100 Telegraph Avenue, #2102
Oakland, CA 94609
(510) 286-8160

Judith Luce, M.D. - Clinical Professor/Dir. Of Oncology
San Francisco General Hospital
1001 Potrero Ave. Bldg.#80
San Francisco, CA 94110
(415) 476-4082x414

Michael C. Lucien, M.D. , MPH - Pediatric General
UC Davis Childrens Hospital
2521 Stockton Blvd.#4100-Glassrock Bldg.
Sacramento, CA 95817
(916) 734-5846

Kathryn E. Malone, M.D. - Family Practice
Sutter East Bay Medical Foundation
350 30th Street, #100
Oakland, CA 94609
(510) 204-8290

George Mayweather, D.D.S. - Dentistry
8013 Laguna Blvd., #1
Elk Grove, CA 95758
(916) 683-3015

Daniel McCrimons, M.D. - Internal Medicine
5030 J. Street, #301
Sacramento, CA 95819
(916) 451-8438

Allison E. N. Metz, M.D. - Dermatology
African American Wellness Project (AAWP)
450 - 6th Avenue, 3rd Floor
San Francisco, CA 94118
(415) 833-2679

Glenn A. Middleton, D.D.S.
2322 Butano Dr., Suite 212
Sacramento, CA 95825
(916) 486-2838

Tiffany Mimms, Ph.D - Clinical Psychologist
1531 Corporate Way
Sacramento, CA 95831
(916) 424-3700
www.therosettacenter.com

Melissa Rose Mitchell, M.D. - Public Health Family Medicine
2580 San Pablo Ave.
Oakland, CA 94680
(510) 444-9155
www.healthycommunities.us

Melita Moore, M.D. - Physical Medicine
UC Davis
4860 Y Street
Sacramento, CA 95817
(916) 734-5292

Amina Najieb, M.D. - Family Medicine
CHW Medical Foundation
3911 Norwood Avenue
Sacramento, CA 95838
(916) 929-8575

Khari F. Nelson, D.D.S. - Dentistry
7400 Greenhaven Drive, #100
Sacramento, CA 95831
(916) 427-1101

Natalie Newman, M.D. – Primary Care
Cascade Medical Wellness
7500 Hospital Dr
Sacramento, Ca 95823
(916) 782-5705

Gloria Nollie, D.D.S. - Dentistry
5740 Windmill Way, #16
Carmichael, CA 95608
(916) 331-0841

Nkechi Nzerem-Johnson, M.D. - Pediatric General
UC Davis Health System
2521 Stockton Blvd.#4100-Glassrock Bldg.
Sacramento, CA 95817
(916) 734-5846

Chimezie Okochi, M.D. - Family Practice
Kaiser Permanente
975 Sereno Drive
Vallejo, CA 94589
(707) 651-1025

Kevin Paige, D.D.S. - Dentistry
Elk Grove Dental Grp.& Orthodontics
9640 Bruceville Road #101
Elk Grove, CA 95757
(916) 686-9030

Tracy Phillips, M.D. - OB/GYN
2089 Vale Road, Suite #17
San Pablo, CA 94806
(510) 234-4235

Terri Pickering, M.D. - Ophthalmology
55 Stevenson Street
San Francisco, CA 94105
(415) 981-2020

Pauline Pierro, Ph.D - Mental Health
Henri Lepierrot Mental Health Svc
3000 T. Street #205
Sacramento, CA 95816
(916) 753-6489

Morris K. Pleasant, M.D. - Psychiatry
8001 Folsom Blvd. #110
Sacramento, CA 95826
(916) 388-9400

Thomas Gregory Quinn, M.D. - Cardiology
350 30th Street, Suite #411
Oakland, CA 94609
(510) 987-8616

Darryl Ragland, D.D.S. - Dentistry
Country Club Dental Care
2237 Park Towne Circle., #3
Sacramento, CA 95825
(916) 483-6161 • darrylkragland.com

Irvin Ray Ramsey, D.D.S. - Dentistry
Ramsey Irvin Ray, D.D.S.
905 Secret River Drive, #C
Sacramento, CA 95831
(916) 393-2587

Albert Randall, M.D.
PO Box 2975
Sacramento, CA 95812
(760) 242-7711

Anthony Rayman, DC - Chiropractic
4250 H. Street #2
Sacramento, CA 95819
(916) 452-5055 • www.keystonechiroinsac.com

Jennifer Redd, M.D. - OB/GYN
Mercy Medical Group
8120 Timberlake Way #102
Sacramento, CA 95823
(916) 681-6102 • www.mymercymedgroup.org

Leon F Richmond, M.D. - OB/GYN
411 30th Street, Suite #502
Oakland, CA 94609
(510) 452-2229

Olivia Rodrigues, D.D.S. - Dentistry
Olivia Rodrigues, D.D.S.
7471 Watt Avenue, #107A
North Highlands, CA 95660
(916) 331-1211

Monique Ross, MD - Family Medicine
Kaiser Permanente
4501 Sand Creek Road, 2nd Floor
Antioch, CA 94531
(925) 813-3600

Babatunde Salako, M.D. - Family Practice
Kaiser Permanente
4501 San Creek Road, 2nd Floor
Antioch, CA 94531
(925) 813-6500

Steven Scott, D.D.S., MS - Orthodontist
3001 Vaux Avenue, #1
Elk Grove, CA 95758
(916) 691-2912 • www.drstevescott.com

Timothy J Scott, M.D.M.P.H - Ophthalmologist
Palo Alto Medical Clinic
3200 Kearney Street
Fremont, CA 94538
(510) 498-2701

Donna Seabrooks, M.D. - Ophthalmology
Sutter Regional Medical Grp
1234 Empire St., #6
Fairfield, CA 94533
(707) 434-2020

Tanisha Silas-Young, M.D. - OB/GYN
Kaiser Permanente
1 Quality Drive
Vacaville, CA 95688
(707) 624-3814

Ernest L Simms, M.D. - Urology
2221 MLK Jr. Way
Oakland, CA 94612
(510) 267-7926

Pamela J. Simms-Mackey, M.D. - Pediatrics
Childrens Hospital & Research Center
5220 Claremont Avenue, 2nd Floor
Oakland, CA 94618
(510) 428-3129

Tolbert J Small, M.D. - Internal Medicine
819 Foothill Blvd.
Oakland, CA 94606
(510) 286-8300

Andrea Smith, D.D.S. - Dentistry
2447 Mission Avenue
Carmichael, CA 95608
(916) 482-8300

Corey Smith, M.D. - Internal Medicine
Kaiser Permanente
3553 Whipple Road
Union City, CA 94587
(510) 675-4010

Mark Smith, M.D., M,B.A. – Founding President & CEO
California Health Care Foundation
1438 Webster Street, #400
Oakland, CA 94612
(510) 238-1040

Marjorie Soloman, Ph.D. ,M.B.A. - Clinical Psychology, Psychiatry
UC Davis Mind Institute
2825 50th Street
Sacramento, CA 95817
(916) 703-0270

Terri Speed, D.D.S. - Cosmetic and Family Dentistry
9098 Laguna Main Street Suite 4
Elk Grove, CA 95758
(916) 691-1600
terrispeeddds.com

Eugene Spencer, Jr., D.D.S. - Dentistry
2322 Butano Drive, #212
Sacramento, CA 95825
(916) 486-2838

Oscar Streeter,Jr., M.D. , FACRO - Radiation Oncology
San Joaquin Community Hospital-Medical Director
2620 Chester Avenue
Bakersfield, CA 93301
(661) 637-8321

William C Sweeting, M.D. - OB/GYN
Kaiser Permanente
2238 Geary Blvd.
San Francisco, CA 94115
(415) 388-6541

James Tate,Sr., M.D. - Neurology
Patients Hospital of Redding
2900 Eureka Way
Redding, CA 96001
(530) 225-8700
patienthospital.com

Derrick D Taylor, M.D. - General Surger
Kaiser Permanente Medical Group
1150 Veterans Blvd.
Redwood City, CA 94063
(650) 299-2355

Konrad B. Thomas, M.D. - OB/GYN
Kaiser Permanente
2185 W. Grant Line Road
Tracy, CA 95377
(209) 839-3200

David R. Townsend, M.D. - Clinical Pathology
Kaiser Permanente
Union City Med.Off.Building B 3553 Whipple Rd
Union City, CA 94587
(510) 675-4010

Leo W. Townsend, D.D.S. - Dentistry
Laguna View Family Dentistry
7915 Laguna Blvd., #120
Elk Grove, CA 95758
(916) 683-1335

Amater Z. TraylorJr., M.D. - Ophthalmologist
African American Wellness Project (AAWP)
5682 Adeline Street
Oakland, CA 94608
(510) 655-5385

Stephanie Walton, M.D. - Pediatrician
Walton Pediatrics
7237 E Southgate Dr., #A
Sacramento, CA 95823
(916) 422-6635

Melanie Watkins, M.D. - Psychiatry
1280 Boulevard Way, #204
Walnut Creek, CA 94595
(925) 212-5744
www.drmelaniewatkins.com

Karen Webster, M.D. - Family Practice
Planned Parenthood-B Street
201 29th Street
Sacramento, CA 95816
(916) 446-6921

Careen Whitley, M.D. - Family Practice
Childrens Hospital & Research Center
350 30th Street, #407
Oakland, CA 94609

Sharon R Williams, M.D. - Pediatrics
Children's Hospital & Research Ctr
747 52nd St.
Oakland, CA 94619
(510) 428-3710

Alicia Williams-Tobin, M.D. - OB/GYN
3581 Palmer #608
Shingle Springs, CA
(530) 672-7060

Valerie Yerger, N.D. - Associate Professor
UCSF - Center for Tobacco Control Research & Educaiton
3333 California Street
San Francisco, CA
(415) 476-2784

We need Black physicians to serve as mentors for medical students!

Contact us if you are interested in providing mentorship for medical students at (916) 234-3589 or e-mail contact@sacculturalhub.com

COSUMNES RIVER COLLEGE

FORTUNE SCHOOL

CAL POLY SAN LUIS OBISPO

REX AND MARGARET FORTUNE EARLY COLLEGE HIGH SCHOOL
WITH COSUMNES RIVER COLLEGE

Fortune School, in partnership with Cosumnes River College and Cal Poly, San Luis Obispo, will open Rex and Margaret Fortune Early College High School in Fall 2017, starting with 9th grade.

The school will be focused on providing scholars with Science, Technology, Engineering, Art, and Math (STEAM) in order to position graduates for success in the new economy.

Rex and Margaret Fortune Early College High School will be a small, autonomous school that fully integrates high school, college and the world of work, allowing scholars to earn a high school diploma and an associates degree while meeting a-g requirements for transfer to the University of California or California State University systems.

STUDENT ENROLLMENT MEETINGS:

All meetings will take place at:
Fortune School
6829 Stockton Blvd. #380 • Sacramento, CA 95823

February 27 @ 5:30pm **March 27 @ 5:30pm** **April 24 @ 5:30pm**
May 22 @ 5:30pm **June 12 @ 5:30pm**

TO RSVP FOR A MEETING, PLEASE CALL (916) 924-8633
QUESTIONS? PLEASE CONTACT:
SHONDA HUTTON, Director of Marketing & Communications
916.924.8633 OR shutton@fortuneschool.us

THESE ENROLLMENT MEETINGS ARE ONLY FOR REX AND MARGARET FORTUNE EARLY COLLEGE HIGH SCHOOL. ATTENDANCE AT OTHER FORTUNE ELEMENTARY AND MIDDLE SCHOOL MEETINGS WILL NOT QUALIFY FOR THIS CAMPUS.

SAVE THE DATE!

EWOC EXCEPTIONAL Women of Color

9th Annual Exceptional Women of Color Conference

Saturday, October 7, 2017 • 8:30 a.m. to 2:30 p.m.
Dr. Ephraim Williams Family Life Center • 4036 14th Avenue • Sacramento, CA 95820

EMPOWERING WOMEN TO BE LEADERS AND MENTORS

FEATURING: WOMEN-TO-WATCH PANEL, YOUNG WOMEN'S SUMMIT, DYNAMIC SPEAKERS, BOOK SIGNINGS, WORKSHOPS, & EXHIBITORS

www.sacculturalhub.com/exceptional-women-of-color/details

For sponsorship and vendor opportunities contact: (916) 234-3589 or e-mail contact@sacculturalhub.com

cares community health · SOL · Twlia Makes It Happen! Strategic Marketing Program Development Event Coordination · LLM · VisionStep · COLEMAN communications · THEGOSPELVINE · THE HUB · sac cultural hub

SAVE THE DATE!

SAANC Sacramento African American Nonprofit Coalition

Soul Village Cookoff & Wine Tasting
at SAANC's 2017 Big Day of Giving Celebration

Thursday, May 4, 2017
5:00 pm - 8:30 pm
Sojourner Truth Multicultural Art Museum
2251 Florin Road in South Sacramento

You must RSVP via eventbrite.com (search Soul Village Cookoff)
$5 Soul Food Tasting ■ $5 Wine Tasting ■ $8 Combo Soul Food & Wine Tasting
More info e-mail contact@sacculturalhub.com or visit www.facebook.com/916saanc

Presented by SAANC Partners:

sac cultural hub Media Foundation · YES 2 College

Bookmark Sacculturalhub.com

Connect with African American professionals and families!
Share your services, products and events with
Sacculturalhub.com and THE HUB Magazine ... your leading Urban Resource for Business, Education & Entertainment News in Northern California.

SUBSCRIBE TODAY to THE HUB Magazine

Follow us on Facebook
facebook.com/Sacculturalhub1
Tweet us at twitter.com/sachub916

contact@sacculturalhub.com or (916) 234-3589

sac cultural hub
urban entertainment

THE URBAN ENTERTAINMENT AND LIFESTYLE MAGAZINE
THE HUB
SERVING THE GREATER SACRAMENTO VALLEY REGION

Sac Cultural Hub Media Foundation would like to thank all of our sponsors and partners for supporting the

7th Annual Northern California Black Physicians Forum

CORPORATE SPONSORS, COMMUNITY PARTNERS AND SCHOLARSHIP DONORS

health happens here

California Department of PublicHealth Office of Health Equity (OHE) CDPH

Health Net

cares community health

City of SACRAMENTO

Councilmember Allen Warren - District 2

Capital Medical Society

SOL SAVING OUR LEGACY African Americans for Smoke-Free Safe Places

Sierra Donor Services

StateFarm

Rex & Margaret Fortune Early College High School

CatalystRealEstate PROFESSIONALS

Twlia Makes It Happen! Strategic Marketing Program Development Event Coordination

VisionStep

COLEMAN communications WRITING. EDITING. MARKETING. MORE MICHAELPCOLEMAN.COM

THE GOSPELVINE

THE URBAN ENTERTAINMENT AND LIFESTYLE MAGAZINE THE HUB

sac cultural hub urban entertainment

Presented by:

sac cultural hub Media Foundation

Sac Cultural Media Foundation
7902 Gerber Road #357
Sacramento, CA 95828
(916) 234-3589 | Fax: (866) 302-6429
www.sacculturalhub.com/916/media-foundation

UC DAVIS SCHOOL OF MEDICINE

UC Davis School of Medicine
Office of Diversity
4610 X Street Suite 101
Sacramento, CA 95817
(916) 734 2615 | (916) 703-5568
www.ucdmc.ucdavis.edu/diversity