from the Dean's desk

We chose to focus this issue of Carolina Public Health on health disparities out of a deep conviction that



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eliminating health disparities is one of the most important tasks before us, as individuals, as a school and as a nation. In too many areas—diabetes, cancers, stroke, cardiovascular disease, to name a few—members of ethnic minority groups are disproportionately and unjustly burdened. The disparities between race/ethnic groups have been well documented, e.g., Racial and Health Disparities in North Carolina Report Card 2006 (www.ncminorityhealth.org) and the 2005 National Healthcare Disparities Report from DHHS (www.ahrq.gov). Some health-related disparities are avoidable. We have the knowledge today to close the gaps if we have the will.

There are many important scientific questions that must be answered and more effective interventions that still are to be developed and tested before we close all the gaps between population groups. In this magazine, you will find examples of how, in every department of this School and in the North Carolina Institute for Public Health, our faculty members are conducting research, teaching and practice to eliminate health disparities.

Many students come to Carolina because they care about eliminating health disparities and want to make a difference. Many of our best and brightest students, faculty and staff are focused on understanding the roots of health disparities, developing and testing policies and interventions to overturn disparities, translating what we have learned into policies and practices and teaching about what we have learned. This critical mass of scholarship, teaching and service is part of what makes Carolina's School of Public Health so strong.

If people don't have clean water, healthy food, access to health care, safe means of transportation and good educations, they will not progress. Economics, public education, politics and public health are deeply interwoven. Progress is about having the right technologies or solutions to improve health and getting them to people so they are used—like insecticide-impregnated mosquito nets to prevent malaria. We know from research done at the Carolina School of Public Health and elsewhere that getting discoveries to people is harder than it seems and much harder than it should be. Yet, it is one of the major obstacles to reducing health disparities.

Our School has been engaged in overcoming social and health injustices since its earliest days. It is part of our DNA, as you will find in reading the timeline and historical articles on pages 47-54. We are proud to continue this tradition of working collaboratively in communities around North Carolina to overcome barriers to good health for all.

Faculty members across our School are leading studies to improve health behaviors and reduce the chances that people will get serious diseases. These faculty have pioneered a tool to assess health literacy among Spanish-speaking patients, used lay health advisors to increase use of mammography in Eastern North Carolina, improved eating behaviors among members of African-American churches in North Carolina and are intervening via beauty parlors to increase healthy behaviors in African-American women.

What we do also spans the policy arena. One of the most important lessons of the last century was a recognition of the multiple layers and levels that must be changed to achieve big changes in health behaviors and disease outcomes. This is something our faculty members do extraordinarily well.

Our students, too, are making a difference, both within the School of Public Health, through organizations like the Minority Student Caucus, through the minority health conference they sponsor yearly and through their amazing dedication to community activities, such as Carolina for Kibera.

And yet, we must do even more. The invisible side of our successes, the real rest of the story, is the wall we hit because of a lack of resources. It's the communities we might have gone into, the technology we might have tested, and the faculty we might have recruited. We have excellent, dedicated students, but we lose too many when they must pass us by for other schools that can offer full scholarships. That's where we need you, our friends and donors. To speed the pace of positive change, we need your transformational gifts. The challenges of public health are vast and deep. Help us change the world, and you will make a world of difference.

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