



**AFRICAN-AMERICAN AFFAIRS COMMISSION
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Testimony before the Public Health Committee

Wednesday, March 2nd, 2011

10:00 am in Room 1D of the LOB

Good morning/afternoon Senator Gerratana, Representative Ritter and members of the Public Health Committee. My name is Frank Sykes the Legislative Analyst with the African-American Affairs Commission (AAAC) a non-partisan state agency. This Commission is an advocate for the African-American community and for the people. We accomplish our mission primarily through research, policy analysis, outreach and information sharing.

We are here today to testify in support of **House Bill (HB) 6481** – *An act concerning the establishment of a Lupus Education and Awareness Plan* and **(HB) 5608** – *An act concerning the implementation of culturally and linguistically appropriate standards*. In reference to **HB 6481** we recognize that there is a need to educate the public and increase awareness about lupus. It is reported that Lupus affects more than 17,000 Connecticut residents and an estimated 1.5 million citizens in the nation. While it affects people of all races and ethnicities, research tells us that African-American women in particular are 2 to 3 times more

likely of developing this condition.¹ The symptoms of lupus tend to mimic the symptoms associated with other common illnesses such as the flu; the common cold etc. therefore diagnosing lupus can be overlooked or misdiagnosed. In view of this **HB 5608** seeks to educate the medical community and public about the diagnosis, management and treatment of lupus. We are confident that the work of the panel will precipitate further insight and understanding of the lupus condition.

This leads me to **HB 5608** – *An act concerning the implementation of culturally and linguistically appropriate standards*. Cultural competence for medical providers is critical for a number of reasons. First of all the demographics of Connecticut's population is changing. Immigration patterns, have led to significant increases in diverse populations that experience, cultural and language barriers. African-Americans even with health care coverage in some cases receive improper or incomplete medical attention partly due to a cultural misunderstanding. In view of these differences this population segment will need a continuum of services responsive to their unique cultural needs. Secondly understanding the cultural norms and history of different racial and ethnic groups will only lead to better outcomes in health care delivery for the medical providers and patients alike.

A few years back, the Connecticut Health Foundation conducted a survey of Connecticut physicians across 17 specialties. This survey identified a variety of gaps in physician education programs, as it relates to cultural competency. It revealed that fewer than 2 in 5 physicians received some kind of cultural competency training in medical school or residency, 70 percent were not even aware of educational programs in the area that they could take advantage of if they chose to and 80 percent of physicians working in small practices were least likely to have received any training in cultural literacy.² Finally strictly from a cost

¹ Connecticut Lupus Foundation

² Connecticut Health Foundation, *Providing Medical Care To Diverse Populations*

perspective strengthening the cultural competence of medical providers will mean improved health outcomes and overall help in reducing health care costs.

In view of these findings we urge you all to support both bills and thank you for the opportunity to testify.