MetroHealth Medical Center is a major teaching campus for Case Western Reserve University School of Medicine, and all full-time members of MetroHealth's medical staff hold CWRU faculty appointments.

MetroHealth and CWRU are partners as well in performing medical research. The Charles H. Rammelkamp, Jr., Center for Education and Research, located on the MetroHealth Medical Center campus, houses laboratory and classroom facilities. From the laboratory to the clinical setting, research at MetroHealth is designed to directly benefit patient care.

Visit our website: www.metrohealthresearch.org

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**Speakers**

Richard S. Cooper, MD  
Chairman, Department of Preventive Medicine & Epidemiology  
Loyola University Medical School  
Chicago, IL

John M. Flack, MD, MPH  
Professor & Interim Chairman  
Department of Internal Medicine  
Wayne State University Center for Urban & African American Health  
Detroit, MI

Dennis Raphael, PhD  
Associate Professor  
School of Health Policy and Management  
York University  
Toronto, Canada

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The Case Center for Reducing Health Disparities was established two years ago by Case Western Reserve University and MetroHealth Medical Center. The mission of the Center is to reduce health disparities through (a) research on root causes, mechanisms, and interventions, (b) education of students, providers, and policy makers, and (c) partnership with community organizations and government agencies.

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**Research Festival 2006**  
**Featured Symposium**

**Health Disparities: From Genetics to Health Policy**

**September 27, 2006**

Richard S. Cooper, MD  
Chairman, Department of Preventive Medicine & Epidemiology  
Loyola University Medical School  
Chicago, IL

John M. Flack, MD, MPH  
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**MetroHealth Medical Center**  
**and**  
**Rammelkamp Center**  
**for Education and Research**

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## Agenda

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<tr>
<td>8 a.m.</td>
<td>Poster Displays</td>
<td>Rammelkamp Atrium</td>
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<td>9 - 10:30 a.m.</td>
<td>Oral Presentation Competition</td>
<td>Rammelkamp 170</td>
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<tr>
<td>10:30 - 12 p.m.</td>
<td>Poster Presentation Competition</td>
<td>Rammelkamp Atrium</td>
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<td>12 - 1 p.m.</td>
<td>Lunch</td>
<td>Rammelkamp 170</td>
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<td>1:00 - 1:15 p.m.</td>
<td>Announcement of Competition Winners</td>
<td>Rammelkamp 170</td>
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<td>1:30 - 4:30 p.m.</td>
<td>Symposium: Health Disparities: From Genetics to Health Policy</td>
<td>Scott Auditorium</td>
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<td>1:30 - 2:15 p.m.</td>
<td>Richard S. Cooper, MD</td>
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<td>2:15 - 3:00 p.m.</td>
<td>John M. Flack, MD, MPH</td>
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<td>3:00 - 3:15 p.m.</td>
<td>Break</td>
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<td>3:15 - 4:00 p.m.</td>
<td>Dennis Raphael, PhD</td>
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<td>4:00 - 4:30 p.m.</td>
<td>Panel Discussion:</td>
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<td>4:30 - 5:00 p.m.</td>
<td>Reception</td>
<td>Scott Auditorium</td>
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## Health Disparities

Health disparities are differences in health-related outcomes by race, gender, socioeconomic status, or other groupings. For example, African American babies in Cleveland have a 2.4 times higher mortality rate in the first year of life compared to white babies. Similarly, poor individuals are 1.8 times more likely to be hospitalized for bacterial pneumonia compared to wealthier individuals. A number of genetic, clinical, and health policy factors may contribute to the development of health disparities.

Research in health disparities involves a progression through three phases. In the first, or descriptive phase, investigators identify or describe the presence of a health disparity. In the second, or mechanistic phase, investigators attempt to understand the mechanisms or causes of the identified disparity. In the third, or intervention phase, investigators utilize this mechanistic understanding to develop and test an intervention to reduce or eliminate the disparity.