one type of pain reliever.

You should see a medical provider if you have a flu-like illness and have chronic medical problems, such as: pregnancy, weakened immune system due to HIV/AIDS, chemotherapy, chronic steroid use; asthma or other lung disorder, heart disease; kidney or liver diseases, nervous system disorders (e.g., Multiple Sclerosis, cerebral palsy); diabetes and adrenal disorders, blood disorders (e.g., clotting or platelet problems); rheumatologic disorders (e.g., lupus, rheumatoid arthritis); and gastrointestinal diseases (e.g., Crohn’s disease). There are medications available that are antiviral. However, only high risk people (those who are hospitalized or who have chronic medical conditions) will receive those medications. You may be prescribed an antibiotic if your flu virus turns into bacterial infections like bronchitis or pneumonia.

How can you plan ahead?

• Buy tissues, over the counter medications (e.g., ibuprofen), thermometer, food, juice, broth and alcohol-based hand cleaners.

• Have a plan in case you need to go home or stay with a friend or family member.

• School work may continue so prepare to use the Internet for class work.

• Update your emergency contact info on My-CSULB. You will receive updates from the university if there are any campus changes.

Information and facts for this article were provided by the following sources and references: Centers for Disease Control & Prevention; www. Flu.gov.; American College Health Association. (2009); and the University of Kansas (2009).

What Can Be Done to Eliminate Health Disparities? By Amber Griffin

With the launch of Healthy People 2010 in January 2000, the Department of Health and Human Services (DHHS) committed the nation to an overarching goal to eliminate health disparities. Eliminating health disparities is an ongoing goal, not only now, but in the future. Health education needs to be placed at the forefront in community health programs and in all schools. It is through health education that health disparities can be reduced. When health education programs are presented in minority communities, individuals can change behaviors.

“To make progress in reducing and ultimately eliminating disparities in health, policy makers should go beyond discussion of inequality and consider what is inequitable.” Discussions of what is avoidable and unjust cannot be left to only lawmakers and government. Americans must have input into making these changes. All health care can be provided in a fair and equitable manner, so that citizens can be guaranteed access to good health care, regardless of financial and ethnic restraints. Governmental organization must fund community efforts for increasing access to health care facilities. Through collaborative teamwork, ethnic minorities have choices that enable them to attain good health care.

Education is a major component for combating health disparities. It is important that minorities are educated about appropriate care for their bodies. Community workers must implement relevant health education programs that are culturally sensitive and address language barriers. Through focusing upon the youth, they will become advocates for healthy behaviors not only in themselves, but for their community. Some suggest that by offering incentives such as awards, more youth will become actively involved in promoting healthy activities and planning for the future.


Health Issues Facing Hispanic/Latino Americans

By Gerri Duru

According to the 2007 census, Hispanic Americans make up almost fifteen percent of the U.S. population. The Hispanic community consists of people from Spanish speaking geographical areas such as: Mexico, South American countries, Cuba, Central America and Puerto Rico. In the U.S., these Spanish speaking populations face higher health disparities and a greater lack of health insurance coverage. Because of their present health disparities and the inability to receive treatment, Hispanic Americans are more likely to suffer from certain health problems over other groups of Americans.

Among the top ten health related leading causes of death among Hispanic/Latinos are heart disease, cancer, stroke and diabetes. These conditions can be and are often fueled by obesity. According to the 2003-06 statistics on obesity, about 30 percent of Mexican males and 41 percent of women are obese. These are very high percentages and can increase one’s probability of acquiring other illness such as diabetes, specifically type II diabetes for children. Diabetes is a leading health issue among many Hispanic Americans. About 10 percent of Hispanics (20 years of age or above) are living with diabetes. The highest prevalence is among Puerto Ricans at 12.6 percent. Cubans have a prevalence of 8.2 percent and Mexican Americans are at 12 percent according to the National Diabetes Statistics for 2007.

While diabetes has been connected with obesity, there has also been correlation between diabetes and heart disease. Cardiovascular diseases such as heart ailments and stroke are the number one killer of Americans, especially those living with diabetes. Up to 68 percent of diabetics die from cardiovascular disease. In 2005, about 26 percent of Mexican American men (20 and over) suffered from heart disease. This number was notably higher for Hispanic American women, which was 33 percent. High blood pressure, an attributing factor in heart disease, is also prevalent among Mexican Americans; about 30 percent of females and 23 percent of males have high blood pressure.

Cancer is another health issue among the Hispanic American community and the United States as a whole. Cancer is currently the fifth leading cause of death in the United States. It is responsible for 20 percent of death among the Hispanic American population. One of the commonly diagnosed cancers among Hispanic males is prostate cancer, for females it is breast cancer. Cancers that are more common among Hispanics include liver, gallbladder, uterine cervix and stomach. Health issues such as cancer, diabetes, heart disease and obesity can be controlled among the Hispanic population with increased access to health insurance, a healthier diet and regular physical activity.

So, what can be done to combat health disparities? Currently, there are centers whose goals are to aide in eliminating health disparities. These goals are met by using a combination of methods such as informing minority groups of the importance of a healthy diet and incorporating some sort of exercise in their life style. Also, some centers conduct community-based research to better understand the causes of disparities and help create a solution. Supporting more affordable healthcare policies is something individuals can do, as well as centers. In addition individuals with health insurance can attend regular doctor’s appointments.


Editor’s Note: Linda Pena

The topic of health disparities is important to California. According to the American Community Survey (ACS), 2003-2007, California has the largest minority population in the United States, making up 57% of the state’s population. The survey indicates the following ethnic minority percentages: 36.0% Hispanic/Latino, 12.2% Asian, 6.7% African American, 2.6% Multiracial and 1.2% American Indian.


Swine flu, also known as H1N1 flu, has affected thousands of college students by the time you read this article! Two CSULB students were positively confirmed to have H1N1 last spring semester. Already H1N1 flu is sweeping across the nation, and hitting college campuses hard. H1N1 contains genetic material from swine, birds and humans. Unlike seasonal flu, young people are expected to be impacted the most. A vaccine for H1N1 flu will be available in mid-October according to the Centers for Disease Control & Prevention (CDC).

CDC H1N1 PREVENTION STEPS

1. Get vaccinated.
2. The regular/seasonal flu vaccine available on 9/29, 10/1, 10/13 and 10/15 for $10 at the USU Ballroom for staff, faculty and students.
3. Avoid cover you nose and mouth when you sneeze and cough. If you use a tissue throw it away immediately. If you use your hands, wash them with soap and water immediately.
4. Alcohol-based hand cleaners are also effective when you cannot wash your hands with soap and water.
5. Avoid touching your eyes nose, and mouth. Germs are spread this way!
6. Avoid close contact with sick people.

A high fever (over 100°F), cough, sore throat, runny or stuffy nose, body aches, chills, headache, fatigue, and possibly diarrhea and/or vomiting are the symptoms of the flu. If you become sick with swine flu, do not go to work or school. Stay home for at least 24 hours after the fever is gone. Only leave home if you are going for medical assistance. Keep away from others to avoid spreading the flu. Drink plenty of fluids, like broth, water, and sports drink (e.g., Gatorade®). Get plenty of rest and don’t smoke or drink alcohol. To reduce your fever and body aches take ibuprofen, acetaminophen, or naproxen. Only choose . . . .

Minorities and Health Insurance

By Rebekah Atwater

According to the 2006 National Health Interview Survey (NHIS), 14.8% (43.6 million of Americans) lack health insurance. Racial and ethnic minorities in particular age, more likely than non-Hispanic whites to live without health insurance, one of many factors that affect their health status adversely. Individuals are defined as uninsured they lack any of the following: private health insurance, Medicare, Medicaid, State Children’s Health Insurance Program (SCHIP), state-sponsored or other government-sponsored health plans, or military plans. The NHIS reports that 32.1% of Hispanics and 15.9% of non-Hispanic blacks fell under this definition at the time of the interview, as compared to 10.4% of non-Hispanic whites.

Without health insurance, many racial and ethnic minorities cannot afford preventative services and medical treatments that can reduce many health disparities. Racial and ethnic minorities suffer disproportionately higher rates of disease and disability than non-Hispanic whites. Although other factors contribute to these differences, minorities are less likely than whites to utilize diabetes screenings, attend diabetes health counseling, or undergo treatment necessary to keep the condition under control.

A person who has health insurance is more likely to see their doctor for routine visits, allowing them to treat conditions early and avoid major complications. On average, the emergency room sees twice as many people who are uninsured, compared to those with insurance. As a result, emergency room fees and healthcare costs in general are ever increasing to compensate for those uninsured persons who must resort to the E.R. for their immediate health needs.

Therefore, it is critically important for government and society to place an emphasis on the reduction of health disparities in ethnic minorities. Through implementing changes in health insurance coverage and creating medical programs that positively affect minorities, there will not only be a reduction in health disparities, but also a health care system that meets the needs of all people.