

Ramadan helps man become a better father

By Sonya Douglass
Sentinel-Voice

With Ramadan well into its second week, Muslims worldwide are charting the year's course by refocusing on the long-held moral values.

Craig El-Amin, a Muslim whose family relocated to Las Vegas four months ago, said Ramadan offers Muslims a chance at renewal.

"It's a period where we rejuvenate ourselves spiritually, physically and mentally."

This year, Ramadan, a month-long spiritual celebration for Muslims, fell on Dec. 31st. As the ninth month of the Islamic calendar, Ramadan requires Muslims to fast and refrain from undesirable behavior during daylight hours.

"During this month we try to keep our minds on positive things," El-Amin said. "We have tolerance, patience and are more charitable. It brings us closer to Allah."

It also gives the Dallas native useful parenting tips.

El-Amin, a father of three — 6-year-old Jamal, 5-year-old Zarinah and 4-year-old Nadiyah — and his wife Wanda Zakiyyah El-Amin use the celebration to help teach their children more about Islam.

Observing Ramadan clears the body and the mind, El-Amin said.

Fasting cleanses the body. Children under 12 years-old are not required to fast during Ramadan, though Muslim children 12 and older are. In an effort to acclimate his children to fasting, El-Amin may have them miss a meal, like lunch, every other day.

The children do participate in prayer. El-Amin admitted a bit of difficulty getting to prayer, given children have loads of energy and are easily distracted.

He explains to them that prayer is a time for



Sentinel-Voice photo by Ramon Savoy

Young Muslim sisters, Zarinah El-Amin, left, and Nadiyah El-Amin join their mother Zakiyyah El-Amin at a pre-Ramadan ceremony held at Masjid As-Sabur just before the holy month started.

quiet reflection. The things we do are being recorded in children's minds, he said, so we must lead by example. So goes his approach to teaching his children.

He said he does not blunt their natural curiosity and penchant for mischief, but he

steers them in the right direction, monitoring and teaching at the same time.

El-Amin's family moved to Las Vegas from Austin, Texas four months ago. The transition was smooth and he was impressed that Las Vegas' Muslim community was bigger than the one in Austin.

The future of public hospitals on shaky ground

By Bailus Walker and
Deitra Hazelwood Lee
Special to Sentinel-Voice

Public hospitals nationwide are struggling to provide medical care to those Americans who need it most: The poor, the underinsured and the uninsured.

Because of the growth of Medicaid managed care, reductions in federal and state government funding, and the rise in the number of people without insurance, some public hospitals no longer have the financial stability to stay afloat. Many are merging, converting to private institutions, or closing their doors.

In the past, most cities had at least one public hospital, and cities like New York and Los Angeles had entire public hospital systems. But between 1981 and 1993 the number of public hospitals fell by 25 percent, a trend that is accelerating.

Now Congress plans to cut Medicaid funding given specifically to public hospitals that serve a large number of Medicaid, low-income Medicare, and uninsured patients.

The pending budget cuts are also going to shrink public hospitals' revenues far below what is necessary to meet the many health care needs of those who rely on this system for treatment.

Given the popularity of privatizing services and the apparent growth of so many forms of health care, why is it worth preserving public hospitals at all? Can't the rest of our health system pick up the slack?

It would be nice if that were possible, but the facts prove otherwise.

Indeed, already the tears in the public hospital safety net are creating a new health care

crisis in its own right. If we continue to lose these hospitals, many African Americans and other minorities, especially in urban communities, stand to lose their last certain access to medical care.

Public hospitals provide a significant share of all hospital care for those who are socially and economically underprivileged. As hospitals of last resort, they have become a health care safety net because of their policy of admitting anyone, insured and uninsured alike. They also have a tradition of striving to be culturally sensitive. Finally, public hospitals provide essential medical services which few clinics can offer and private hospitals often find unprofitable such as emergency care, trauma care, burn care, and neonatal care, and they provide these vital services for the entire community.

The importance of this situation is brought into sharper focus by the increase in the number of uninsured. The most recent data suggest that there are more than 40 million people in the United States who lack health insurance, including

more than seven million African Americans.

The number of uninsured is growing steadily as the cost of insurance continues to rise and as full-time, full-benefit employment remains scarce for urban minorities. Many full-time positions are being replaced as well by temporary, contract or part-time jobs without health coverage.

Many large, urban public hospitals also conduct medical education and research, which benefits the entire health care system. Many serve as teaching hospitals, where they train students. In addition, some urban public hospitals are major employers in the cities they serve. Closing these hospitals therefore increases the potential unemployment of both skilled and unskilled workers not only in the health care industry but in other related industries as well.

Many states have modified their Medicaid programs by shifting their method of delivering health care to managed care.

Federal waivers now allow states to require that their Medicaid recipients enroll in managed care organizations,

and many states have already modified their Medicaid programs with this new requirement. As of June 1996, this changeover had been carried out by 29 states and the District of Columbia.

This change in Medicaid policy is causing public hospitals to lose a large percentage of their patient base to managed care organizations.

Approximately 43 percent of public hospitals' patients are covered by Medicare, Medicaid or other public insurance and an equal proportion are uninsured. Even more important, 50 percent or more of these hospitals' revenue has been based on Medicaid payments. Unless they can effectively compete for low-risk Medicaid patients,

they may soon lose so much revenue that they will simply have to close.

In addition to the managed care changeover, Congress plans to cut the Medicaid funding that has long been given specifically to public hospitals that serve large numbers of Medicaid, low-income Medicare and

(See Hospitals, Page 4)

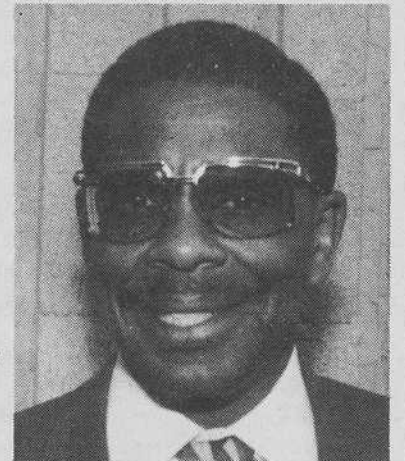
Need a New or Used Automobile or Truck?

HENRY CROCKETT
Integrity • Honesty

**Bad Credit • No Credit
It Doesn't Matter...**

**You could be driving today!!
\$0 Down Financing Available****

**Hundreds of Cars
to choose from**



HENRY CROCKETT

**Send a Friend or Relative and Earn Cash
\$100 to \$500 Reward***

Nissan West



*After transaction is completed ** On Approved Credit
Hours: Monday-Saturday 8:00 a.m. to 9:00 p.m.



871-7000 • 264-8739

5050 West Sahara Avenue at Decatur • Las Vegas, Nevada

**Heritage Sisters
&
Nubian Queens**

Featuring:
**Ethnic Art & Figurines,
African Masks & Sculptures**

Celebrate Our Rich Heritage and Culture

Open Everyday except Tuesdays 10 am to 7 pm

RANCHO INDOOR SWAP MEET

2901 W. Washington • Suites F109-111

648-6545