

## Study: 20 million workers have no health coverage

WASHINGTON (AP) - More than one in five working adults in Texas and five other Southern and Southwestern states don't have health insurance, a new study says.

In another 37 states and the District of Columbia, at least one in every 10 working adults is uninsured, according to the Robert Wood Johnson Foundation, which is leading a campaign to build support for expanding health coverage.

Organizers of the effort hope to alter public perception of health insurance as an issue that mainly affects the poor by emphasizing that the problem affects working families.

"I think this puts a different face on the uninsured. When people have a sense that it is someone like my neighbor—or it could be me—it does give you a different political face to work from," said Mary Grealy, president of the Healthcare Leadership Council, an association of health care executives.

Ron Pollack, president of

Families USA, a liberal consumer group, said the focus is now on "self-interest as well as altruism."

But unlike past attempts to extend coverage to everyone, getting more people insured has to occur in smaller steps, groups across the political spectrum say.

The most likely place to begin is in trying to cover the 8.5 million children without health insurance, they say.

Former Presidents Jimmy Carter and Gerald Ford are serving as co-chairmen for Cover the Uninsured Week. A coalition of diverse groups, including business, labor and several health organizations, has come together to push the issue in 1,500 events this week.

The campaign's organizers are pointing to 2005—without the distraction of a presidential campaign—to press Congress to pass legislation to cover a chunk of the 43.6 million Americans who, according to the Census Bureau, lack insurance.

The study released says nearly 20 million working

Americans, many with families, are uninsured.

More than a quarter of working Texans, 2.5 million people, have no insurance.

Other states in which more than a fifth of the work force is uninsured are: Louisiana, Mississippi, Nevada, New Mexico and Oklahoma.

The study was led by researchers at the University of Minnesota's School of Public Health that analyzed data from the federal Centers for Disease Control and Prevention.

Many studies have found that people without insurance are less likely to see doctors, more likely to be diagnosed with illnesses late and report being in poor or fair health more often than those with insurance.

The coalition has pledged to set aside their differences to push for action on the issue.

Other groups involved: U.S. Chamber of Commerce, the AFL-CIO and America's Health Insurance Plans.

## Blacks may have thick hearts

DALLAS (AP) - Researchers say they may have found a new clue as to why Blacks are at greater risk of dying from heart disease than Whites. In the largest study of its kind, Blacks with high blood pressure were found to have thicker hearts than Whites with high blood pressure. It's a condition called left ventricular hypertrophy, or enlarged heart.

"This is a marker for increased damage to the heart and may explain why there is a more adverse outcome of cardiovascular mortality, heart attacks, stroke and heart failure among Blacks," said lead researcher Dr. Jorge Kizer, an assistant professor of medicine and public health at Weill Medical College of Cornell University in New York.

Blacks suffer from hypertension more than other racial groups. In 2000, heart disease deaths were 29 percent higher among Blacks and stroke death rates were 40 percent higher than other groups, according to the Centers for Disease Control and Prevention.

In the study, researchers assessed 1,060 Blacks and 580 Whites by measuring their blood pressure, heart wall thickness and vascular tone. The findings revealed that Blacks had a higher average of left ventricular mass index and wall thickness that persisted even after researchers adjusted for age, gender, and clinical risk factors such as blood pressure treatment and artery stiffness.

When researchers adjusted for additional factors such as socio-economic level, edu-

cation, smoking and cholesterol, they found that ventricular hypertrophy was nearly double that of Whites and the increase in heart-wall thickness among Blacks was 2.5 times that of Whites.

"It has been well-documented that Blacks have higher cardiovascular mortality rates, but the basis of that is not clear," said Dr. Mark H. Drazner, an associate professor of medicine at the University of Texas Southwestern Medical Center. "This study could be a clue that explains the difference in mortality."

Drazner said the findings, published in Tuesday's issue of Hypertension: Journal of the American Heart Association, indicate that the effect of hypertension on Blacks is likely the contributing to the mortality rate.

"The effects of hypertension need to be targeted if you're going to reduce cardiovascular mortality gap between the two ethnic groups," he said. Kizer said that while more studies are needed to confirm the findings, the study could lead to the development of more drugs that can slow left ventricular hypertrophy.

Some studies already suggest that some high blood pressure medications, such as angiotensin receptor blockers or ARBs, help reduce heart thickening. A recent study, however, showed that the drugs worked better for Whites than Blacks.

Kizer said that could have been a statistical glitch, but it indicates that more work is needed to sort out strategies in how to treat hypertension in Blacks.

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Jerrie Merritt, Tel: 702-791-6207  
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