

# Cops backed in chase

WASHINGTON (AP) - Police may use tactics that put fleeing suspects at risk of death to end high-speed car chases, the Supreme Court said Monday in ruling against a Georgia teenager who was paralyzed after his car was run off the road.

In a case that turned in part on a video of the chase in suburban Atlanta, the court said it is reasonable for law enforcement officers to try to stop a fleeing motorist to prevent harm to bystanders or other drivers.

"A police officer's attempt to terminate a dangerous high-speed car chase that threatens the lives of innocent bystanders does not violate the Fourth Amendment, even when it places the fleeing motorist at risk of serious injury or death," Justice Antonin Scalia said in his majority opinion.

The court sided 8-1 with former Coweta County sheriff's deputy Timothy Scott, who rammed a fleeing

black Cadillac on a two-lane, rain-slicked road in March 2001. The nighttime chase reached speeds of up to 90 miles an hour.

Victor Harris, the 19-year-old driver of the Cadillac, lost control and his car ended up at the bottom of an embankment. Harris was rendered a quadriplegic.

The court, in a nod to modern technology, for the first time posted the dramatic video on its website.

Many large police forces have strict rules for when officers can begin high-speed pursuit, limiting chases to instances where there has been a felony crime committed, a misdemeanor crime involving a weapon, or suspected drunken drivers who are an obvious road hazard.

Harris was wanted only for speeding.

Joshua Dressler, an Ohio State University law professor and expert on the Fourth Amendment, said he did not think that police would relax

those policies. "The clear trend of police departments in major urban areas has been to limit police chases in general," Dressler said. "There have been so many injuries and deaths as a result of police chases and such great risk of harm to innocent bystanders."

More than 350 people died each year on average from 1994 to 2004 because of police chases, a group of Georgia police chiefs said in court papers in this case.

Yet officers now have less to fear from the tragic results of a car chase because of Monday's ruling, Dressler said. "This ruling may result in even faster chases and therefore perhaps increase the risk of harm not only to the speeder, but also innocent bystanders."

Innocent parties hurt in such incidents always have had a hard time winning lawsuits against police and Monday's decision will make (See Chase, Page 10)

# Waters: Test inmates for AIDS

By Dennis J. Freeman  
Special to Sentinel-Voice

LOS ANGELES (NNPA) - Democratic Congresswoman Maxine Waters has introduced bills in the House of Representatives, calling for insurance companies to cover the cost of HIV testing and testing for federal prisoners upon their incarceration and release.

"We believe that when you do this kind of testing, not only will you [diagnose] HIV/AIDS, but you can get people started on the kinds of medicines that they need in order to have long and healthy lives," said Waters.

The insurance bill, H.R.

822, would require insurance companies to pay for HIV testing in the same way they cover the cost of diabetes testing. H.R. 1943, the Stop AIDS in Prison Act of 2007, calls for mandatory HIV/AIDS testing for all inmates arriving and exiting a federal correctional facility.

Waters efforts are in response to the growing impact HIV/AIDS is having on minority communities. According to the Centers for Disease Control and Prevention, African-Americans account for half of all new HIV/AIDS cases. Racial and ethnic minorities comprise 69 percent of new cases, according to

the 2005 data released by the CDC. According to the Bureau of Justice Statistics, African-Americans made up 41 percent of all inmates in the prison system at the end of 2004.

"Congresswoman Waters always has been an unapologetic advocate for fighting AIDS in Black communities," said Phill Wilson, executive director of the Black AIDS Institute. "AIDS in America today is a Black disease. Current funding levels and HIV policies are not keeping up with the reality of AIDS in Black America."

Dennis J. Freeman writes for BlackAIDS.org.

# Malveaux

(Continued from Page 3)

cently, "serving as the 14th president of Bennett College for Women has been one of the greatest honors of my life. I deeply respect the mission of this ever so special institution and I will always feel close to the Bennett College family," she said.

"It is with full confidence in Dr. Julianne Malveaux that I will 'pass the baton' to her to continue to lead Bennett College to the height of her possibilities."

Malveaux received bachelor's and master's degrees in economics from Boston College and is the author of two column anthologies: "Sex, Lies, and



"Serving as the 14th president of Bennett College for Women has been one of the greatest honors of my life."

— Johnnetta Cole  
Past President Bennett College

Stereotypes: Perspectives of a Mad Economist" (1994) and "Wall Street, Main Street, and the Side Street: A Mad Economist Takes a Stroll" (1999). She is most recently the co-author of "Unfinished Business: A

Democrat and A Republican Take On the 10 Most Important Issues Women Face" (2002).

Source: Diverse: Issues In Higher Education and The Greensboro (N.C.) News-Record

# Health

(Continued from Page 1)

nation and genetics.

In addition, a lack of health insurance is highest among Blacks, and a lower number of African-American physicians contribute to the healthcare disparities for the Black population.

In 2004, the report states that nationwide, the uninsured among Whites was 11 percent, compared to 19 percent for Blacks. One reason for this disparity, the report states, is that among Blacks there are more part-time wage earners and, as a result, there

is no healthcare insurance provided by employers. This results in a higher disparity of disease and mortality rates due to a lack of testing, detection and treatment among Blacks, the report shows.

Gamell noted in his presentation that many Blacks are fearful of knowing the truth about their health.

"They don't have health insurance, so they can't pay for treatment. As result, they'd rather not know," he said.

Gamell urged the state and the county to come up with the funds to close the disparity in healthcare. The focus of healthcare among Blacks in Clark County said Gammell is "the elimination of disparity."

He said, "We must move the county to action. The highest county rates of HIV infection are among Blacks. We must move to a different level in the [Clark County] HIV situation, than what prevails in the nation," he said.

The Center for Disease Control reports in 2003, 68 percent of males and 8 percent of women in the U.S., were living with HIV/AIDS. In Nevada, during that same period, 21 percent of Blacks compared to 63 percent of Whites were infected with the disease.

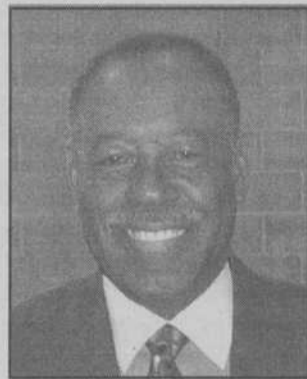
The 2005 the U.S. Census shows that Blacks made up 7 percent of Nevada's population compared to 59 percent of Whites. Considering that Blacks make up about 7 percent of the state's population, HIV/AIDS infection disparity between Blacks and Whites is noteworthy and

troublesome.

Guest speaker at the Urban League meeting was HIV/AIDS advocate UNLV, School of Public Health Asst. Professor Melva Thompson-Robinson.

"HIV is my passion. HIV in Clark County is a problem. Among Blacks in Clark County, HIV infection is 3 to 4 times higher than other races. Once they [African-Americans] find out they have AIDS, they don't come back."

This leads to an entire community at risk and wider spreading of the disease,



"The highest county rates of HIV infection are among Blacks. We must move to a different level in the [Clark County] HIV situation, than what prevails in the nation."

— Larry Gamell  
Nevada Minority Health Manager

according to health officials.

"Also, the risk is transmitted among children, which when HIV goes untreated results in pre-natal infection," she

said.

Gamell admonished Black church leaders, in particular, to become proactive in the healthcare crisis solution.

At one contentious point in the Q&A period, Gamell pointed his finger and repeatedly shouted at some church leaders to use their pulpits.

"Will you get healthcare information out to the community?" he asked. Over and over, Gamell repeated his rapid fire question until, an audible "yes" came from church ministers.

"Get the information out there," Gamell urges all concerned parties.

"Count and be counted. Raise your voices. Educate the community. This is the first minority report; we never had this before."

Gamell spearheaded the campaign resulting in the Nevada Office of Minority Health, which was established by the legislature in 2005. The mission of the state's OMH is to improve the quality of healthcare services for members of minority groups; to increase access to healthcare services; and to seek ways to provide education, to address, treat and prevent diseases and conditions that are prevalent among minority populations. The website www.health.nv.gov has information on the report and other OMH resources.

Parker Philpot contributed to this article.



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