## Separate and Unequal: Medical Apartheid in New York City

Two-hundred and fifty Bronx residents attended a rally on October 17, 2005, sponsored by the Bronx Health REACH Coalition and its lead organization, the Institute for Urban Family Health, to publicly release REACH's report, Separate and Unequal Care: Medical Apartheid in New York City.

Two clergy leaders of the Coalition, Reverend J. Albert Bush, Sr., of Walker Memorial Baptist Church, and Reverend Robert Foley, Sr., of the Cosmopolitan Church of the Lord Jesus, spoke of the importance of addressing this injustice and demanded that our elected officials make sure that people of color and people who are poor get the same high-

> quality health care that officials receive. Coalition member Milta Vega-Cardona spoke about her mother, who died at age 57 from preventable complications of diabetes because she never visited a



The Rev. J. Albert Bush, Sr., speaking as Rev. Robert Foley, Sr., looks on.

doctor who spoke Spanish and could explain how to manage her illness.

Dr. Neil Calman, president and CEO of the Institute, explained that the report cites numerous examples of segregation in the health care system, based on the link between race, ethnicity and insurance status. "People of color often receive a lesser quality of care," he said. "As a result, they have more preventable complications. They live sicker, and die younger."

The report outlines a number of ways in which the health care system fails to provide the same care to everyone, including differences in health insurance

coverage by race, the segregation of the poor and uninsured into different care systems, and inequities in payment by public insurance programs.

Milta Vega-Cardona.

The report also makes several specific recommendations, including calling on the New York State Department of Health to enforce managed care contracts and its own Patient Bill of Rights, which states that "patients have a right to receive treatment without discrimination as to race, color, religion, sex, national origin and source of payment." Other recommendations include changing the structure of Medicaid fee schedules to create equal access to quality care, mandating that hospitals collect patient race data, and requiring greater accountability for how charity care funds are used.



Neil Calman, MD.

The report is available on the Institute's web site, www.institute2000.org, under Policy Journal, or you may request a copy by calling the REACH office: 212-633-0800 ext 232.