

‘Community Conversations’ series culminates with dialogue on health



Health practitioners, fitness and wellness experts, and a number of professionals in the medical field convened at Impact Hub Baltimore on March 7, 2020 for the third and final community conversation for this series, themed “Vision for a Healthier Baltimore.” The three-hour forum featured seven panelists and guest speakers. Cassandra Vincent, moderator for the event interviews Dr. Letitia Dzirasa, Baltimore City Health Commissioner about various health issues. (See article on page 6) Photos: Dr. David Marshall, Morgan State Strategic Communication Chair

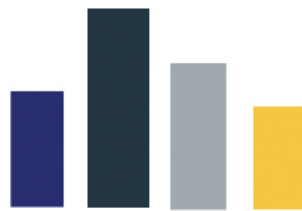
Ten Years Already!

By Cedrick Lee, Census Coordinator

It's that time again to be counted for the Census! Fun Fact: the concept of a Census has been around for millennia. In fact, the Bible records a Roman Census under Caesar Augustus. The U.S. Census is important for many reasons, especially federal funding: from education to housing, health, social services and much more, programs that many Baltimoreans find quite important to their daily lives.

The programs that receive funds are important, but also important to our communities is representation. There are two senators for every state, but representatives in the House of Representatives are apportioned by population size. As many communities of color know, representation at local, state and the federal level is important! The more representation that our communities have at all levels of government, the more our representative democracy works for us and becomes closer to the realization of the America that was laid by our founding fathers.

Shirley Chisholm once said, "don't measure America by its achievements but by its potential." Could you only imagine the potential that could be realized in the City of Baltimore with a near 100 percent total self-response rate?



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CENSUS 2020

Each person counted brings approximately \$18,000 over ten years of federal funding to Baltimore.

This year, Baltimore City's Department of Planning is aiming for a 73 percent total self-response rate, a five percent increase from the 2010 Census. The self-response rate is the percent of people who respond prior to census bureau employees knocking on their door.

As a millennial who was in the 10th grade at the time of the 2010 Census, I cannot recall ever seeing much advertisement or media around the census. This decade, it is going to be different! It's the first time ever the Census will be available online, making it easier for



people to respond from web accessible devices and the comfort of their own home. It's available on-line in 13 different languages, by phone in 60 different languages, and available through the mail in English and Spanish. This massive effort has made the Census more accessible to millions of Americans whose first language is not English.

The Census Bureau has identified 69 hard-to-count neighborhoods across Baltimore and five major demographics that do not usually participate in the Census. These groups have been identified as children under five; African Americans over 65; housing insecure; returning citizens; immigrants and low English proficient.

The Department of Planning is collaborating with 37 non-profits throughout Baltimore via the 2020 Census Community Grant to target populations. This grant program is unique in that it directly puts money into community organizations to provide outreach to those communities that are historically undercounted. All the non-profits selected have deep roots in the hard-to-count communities and have solid plans to educate these communities on why the Census matters. They all have the common goal of securing resources that people of these communities most desperately need. The community organizations are trusted messengers across the city to help us get a higher percentage of self-responses and the money that Baltimore deserves.

Your invitation to participate will be mailed to you on or between March 12 and 20! You can now respond to the Census online, over the phone, or with the form that will be mailed to you from the Census Bureau. The Census only takes 10 minutes, and to ensure that you don't have an in-person follow-up from the Census Bureau be sure to respond before April 30, 2020. Be sure to count everyone living in your house, even if they are only living there temporarily.

For more information, visit: <https://census2020.baltimorecity.gov/>

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The Annapolis Times

(USPS 5840) is published every Friday by *The Baltimore Times/Times of Baltimore*, 2513 N. Charles Street, Baltimore, MD 21218. Subscriptions by mail \$60 per year. Standard bulk postage paid at Baltimore, MD 21233.

Postmaster send address changes to:

The Baltimore Times
2513 N. Charles Street
Baltimore, MD 21218



Shape the future for your family.

Every 10 years, the census counts everyone living in the United States. It is important to count every person living in your home to make sure your community and others across the nation are accurately funded and represented for the next decade.

Count everyone, from grandpa to the new baby.

No matter who lives in your home, be sure to count them all in the 2020 Census. This includes grandparents, young children, foster children, and nonrelatives who are living with you. Information collected in the census will inform the allocation of more than \$675 billion in federal funding each year. That includes money for things like:

- > First responders
- > School meals
- > Medicare and Medicaid
- > Adoption assistance
- > Food assistance programs
- > Libraries and community centers

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Your personal information is kept confidential by law. Your responses can be used only for statistical purposes. They cannot be used for law enforcement purposes or to determine your personal eligibility for government benefits.

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The online census form is available in English and 12 additional languages. If you do not speak one of those languages, someone else in your home can complete the form for everyone in your home. If the adults in your home do not speak one of these languages, someone can translate for you. This includes a child in your home or a friend.

For more information, visit:

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Guest Editorials/Commentary

Disney Plus— for Health Care?

By Sally C. Pipes

Over 10 million people have signed up for Disney Plus since it launched last year. It's easy to understand why. The service gives subscribers access to hundreds of movies and television shows for just \$7 a month— no cable plan required.

Imagine if we applied that model to health care. For a flat monthly fee, subscribers could get everything from flu shots to lab tests "on demand"— no expensive, cumbersome insurance plan required.

This model already exists. It's called direct primary care— and Americans young and old, rich and poor alike are increasingly turning to it as a means of securing affordable, high-quality health care.

Under direct primary care, a patient pays a doctor a subscription-style fee in exchange for access to an array of services. Just a decade ago, there were only a handful of direct primary care practices scattered across the country. Today, over 1,000 serve around half a million people in 49 states.

The model has flourished in part because many doctors no longer want to deal with insurance. Nearly 75 percent of physicians spend at least 10 hours each week on paperwork. Bureaucratic tasks are the largest contributor to physician burnout, which affects roughly half of all family medicine doctors.

Burnout is serious. Physicians who experience it are more likely to make medical errors.

Direct primary care can ease doctors' workload, reduce risk of burning out, and give them more time to spend with patients. Direct primary care visits often last up to an hour— four times longer than the usual 15-minute visit offered in traditional practices.

Putting a doctor on retainer may sound like it's beyond the means of most Americans. But it costs less than the average cable bill. Direct primary care patients typically pay between \$50 and \$100 each month for a host of services. Many direct primary care providers also offer discounts on prescription drugs.

Consider Kansas City Direct Primary Care, where adults 26 and over pay \$65 a month for unlimited primary and urgent care visits and 24/7 access to a physician. Members also get home visits and access to reduced-price labs, medicines, and specialist services. For \$140 a month, two parents can get that same level of coverage for themselves and all children under 18.

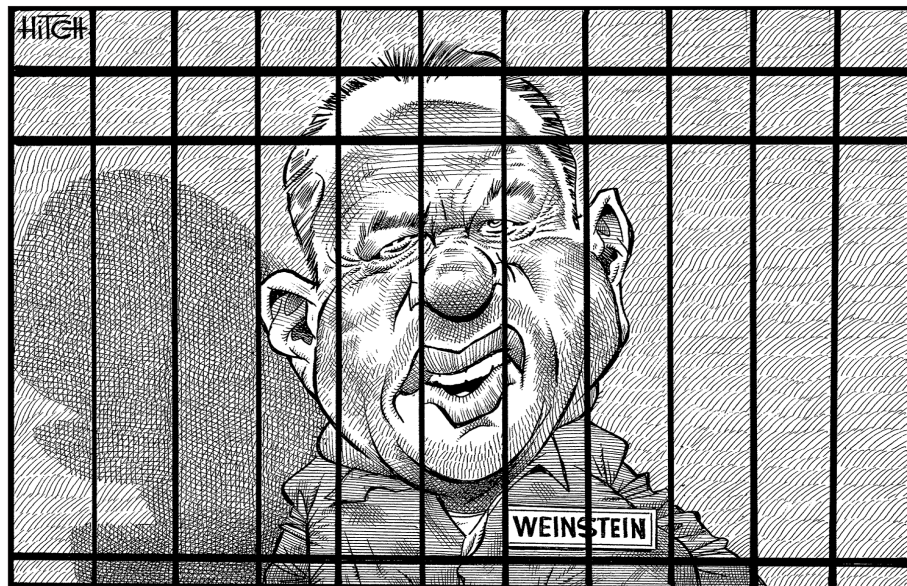
For some people, that's a much better deal than traditional insurance. The average lowest-cost plan for sale on Obamacare's exchanges this year features a \$331 monthly premium. Last year, family coverage on the exchanges ran \$1,154 a month, on average.

Those high premiums don't buy much in the way of medical services. Patients may struggle to find a doctor who will take their insurance. Once they do, they still have to shell out thousands of dollars to meet their deductibles— before they receive a dime from their insurers.

In other words, direct primary care could provide a worthy alternative to the expensive Obamacare status quo. Many patients could receive better care at lower cost by pairing a direct primary care arrangement with a high-deductible, catastrophic policy that they only tapped if they sustained a medical emergency.

The subscription model, has transformed how Americans watch movies, buy groceries, and more. As direct primary care shows, it can transform health care, too.

Sally C. Pipes is president, CEO, and the Thomas W. Smith fellow in healthcare policy at the Pacific Research Institute. Her latest book is False Promise, False Promise: The Disastrous Reality of Medicare for All (Encounter 2020). Follow her on Twitter @sallypipes.



SPEAKING OF CONTAINING A VIRUS ...

Commentary

Happy National Tired and Grouchy Week

By Thomas L. Knapp

On Sunday, March 8, 2020, millions of Americans woke up an hour early, having set their clocks ahead by an hour the night before, and dug in for a week or so of bleary-eyed, irritable attempts to tweak their bodies' natural sleeping and waking rhythms.

This fatuous semi-annual "spring forward, fall back" ritual, called "Daylight Saving Time," ranks high on my personal list of "dumbest ideas in the history of mankind."

Why do people put up with Daylight Saving Time and obediently change their clocks twice a year? You may have heard that it has to do with saving energy, or making sure children don't arrive home from school after dark or have more time to do farm work when they get home, or other such nonsense excuses.

In reality, the practice was first proposed by a George Hudson, a New Zealand postal worker and entomologist who wanted more daylight after his regular job to catch bugs, then later by William Willett, a British builder who hated having his golf games cut short by darkness.

More than a century later, is it fair to say

that Willett's tee times and Hudson's bug hauls were worth the 30 additional deaths (and associated \$275 million in costs) that come with "springing forward" every year (according to a 2017 study in American Economic Journal: Applied Economics)?

Or the billions of dollars in other costs, including, it turns out, increased rather than decreased energy use? Or, for that matter, the cost of the extra cups of coffee I have to add to my morning intake to jolt myself awake for the first week or two of getting up an hour early?

I don't think so. But then, I'm grouchy this morning. I wonder why that might be?

Changing our clocks back and forth on command doesn't magically alter the passage of time. Basing our schedules on periodic changes to the markings on those clocks, or vice versa, won't make our day/night-based circadian rhythms go away, or even become less relevant (ask anyone who's worked "graveyard shift" for an extended period— the body doesn't easily adjust).

As an alternative to conscripting everyone into these silly back and forth "Saving Time" games, individuals and groups should be left to adjust their own schedules to fit their own needs. Since I don't collect bugs or play golf, I don't need to get up an hour earlier in the spring and summer.

Learn and Teach Your Children about Anger:

If you can name it, you can tame it

By Dr. Linda McNair

The Buckeye Review Newspaper

Anger is an emotion and should not be ignored. Teaching children how to handle anger is better than telling them they are not angry and ignoring their hurts. Here is an example in preschool.

One toddler takes the other toddler's toy that he was playing with and he starts crying and yelling, "give that back to me." The teacher hears this and says, "Now, now you must learn to share. Stop crying and play with something else." At this point the teacher teaches the toddler, to ignore his hurt and pain, to move on and get over it.

The older this toddler becomes he continues to learn to stuff and suppress his hurt and pain. Some of the behavioral symptoms can be: breaking things, causing property damage, disregard of others property, verbal and/or physical aggres-

sion, road rage, frequent fights, etc. As time passes, he has learned ways to handle his anger inappropriately, by possibly becoming a bully and/or a very angry boy who turns into a very angry man. As a teenager or adult, he can be diagnosed with intermittent explosive disorder (IED). Uncontrolled anger can lead to other disorders such as: attention

requiring medication and or therapeutic interventions for years to come.

The toddler must first recognize when someone does something to cause bad or inappropriate feelings. By addressing those negative feelings with a trusted guardian, parent or friend, they learn to verbalize their feelings and are in touch with their emotions rather than wonder-

longer in adults because they have developed entrenched behavioral patterns.

According to an article written in the Washington Post (2015), one in ten Americans have severe anger issues and access to guns— that's almost 22 million Americans. If you stop and think about this; there are a lot of people who have not been taught that they are in charge of telling their own story and crafting the results they desire.

Here is a tip for children and adults. If you can name it, you can tame it. Feelings are noticed in your body before you verbalize them but once you say, "I'm angry" and notice the feelings associated with that emotion, they subside more readily than when they are not acknowledged. Knowing that you cannot change anyone but yourself you have to take charge and learn techniques to quiet the storm that is rage inside.

The choice is yours. Stop, think and breathe. This will give you an opportunity to think about your story. And remember, you are the star and the director of this production called life.

Dr. Linda is a licensed clinical social worker with over 30 years experience. She is a certified IBCT (Integrative Behavior Couples' Therapist) clinician. Linda along with her husband, Dr. M. Mike McNair founded "Pair of Docs Counseling." They do nouthetic counseling. This is where the Word of God is seen as the leading authority in the counseling session. They do private couple's counseling, seminars, conferences, coaching and premarital counseling. You can contact them through the Buckeye Review Publishing at 330-743-2250.

"Learning to deal with the above signs and symptoms can help toddlers avoid a difficult life. Controlling or managing anger can help them avoid the pit falls later. If a toddler goes without learning how to control their anger it can lead to requiring medication and or therapeutic interventions for years to come."

deficit hyperactivity (ADHD), oppositional defiance (ODD), anxiety, depression, bipolar, along with some personality disorders.

As a result of anger, the individuals will experience some physical symptoms such as tightness, tension and pressure in the head or chest. After an anger episode, tiredness, tremors, racing thoughts, inability to focus or concentrate, poor performance in school or at work, easily frustrated, moody, irritability, sadness and possibly blind rage.

Learning to deal with the above signs and symptoms can help toddlers avoid a difficult life. Controlling or managing anger can help them avoid the pit falls later. If a toddler goes without learning how to control their anger it can lead to

ing about the physical response.

Doing this can help the toddler break down their feelings and look at what has taken place from an honest standpoint. Don't ignore the negative feelings; talk about what he/she is feeling. Slow down their racing thoughts and action by having them taking slow deep breaths and communicate what is happening. By doing this, the toddler begins to heal and this will cause him/her to dig deep inside. The toddler will get a chance to hear and recognize what is happening and can learn ways to retell their story. They can begin to visualize the incident and figure out how they want things to turn out. Dealing with anger can easily be rectified earlier than later. Either way anger can be controlled it will just take

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‘Community Conversations’ series culminates with dialogue on health

By Demetrius Dillard

Publisher Joy Bramble and her colleagues could not have asked for a better finale to the Baltimore Times Community Conversations series.

Health practitioners, fitness and wellness experts, and a number of professionals in the medical field convened at Impact Hub Baltimore on March 7, 2020 for the third and final community conversation for this series, in particular, which was themed “Vision for a Healthier Baltimore.”

The three-hour forum featured seven panelists and Dr. Letitia Dzirasa, commissioner of health for the Baltimore City Health Department.

Following opening remarks from Bramble and moderator Cassandra Vincent, Anthony Sutton was given the floor. Sutton, a personal trainer with Brunch N’ Burn, led the guests through five light warm-up exercises they can do to begin their day.

Dzirasa, a native of Prince George’s County and resident of Baltimore for the past eight and a half years, sat in the front of the room with Vincent for a discussion on notable topics surrounding health in the local community.

Also, a Hopkins-trained pediatrician, Dzirasa shared her vision for a healthier Baltimore, which meant equitable access to quality medical care and services and taking a public health approach to community concerns.

She also provided tips for COVID-19 (coronavirus) prevention and preparedness, and updated the inquisitive audience on some of the initiatives and programs of the health department. In addition, Vinny DeMarco and Stephanie Klapper of the Maryland Citizens’ Health Initiative spoke briefly on health insurance programs that attendees could take advantage of.

Concurrent with the day’s theme, Baltimore City Councilman Zeke Cohen (District 1) spoke extensively on the trauma-related experiences that adversely affects youth. He noticed that there was no legislation in place to provide responsive care to individuals who had traumatic experiences, which prompted the proposal of the Trauma



Panelists: (Back row, l-r): Tsanonda Edwards, Above It All Inc.; Sha’Von Terrell, The Black Church Food Security Network; Brianna Billups, Fully Grown, LLC. (Front row, l-r): Quentin Vennie, wellness expert and author; Jenell Steele, registered nurse and fitness coach; Anthony Sutton and Will Walker, Brunch N’ Burn.

Photos: Dr. David Marshall, Morgan State Strategic Communication Chair

Responsive Care Act in February 2019. The bill, later renamed the Elijah Cummings Healing City Act, was signed by Mayor Bernard Young on Feb. 9, 2020 and calls for: (1) a city-wide task force, (2) training for all city agencies in the science, symptomology and responses for trauma victims and (3) each city agency to assess policies to reduce traumatization in Baltimore’s most vulnerable communities.

“I just wanted to make sure that we as a city are really responding effectively and that we’re not just ignoring this problem or putting a bandaid on a bullet wound,” Cohen said.

“I’m proud to say this bill was passed three weeks ago, which makes Baltimore a national leader in the movement for trauma-informed care.”

The panelists in attendance were: Sha’Von Terrell of the Black Church Food Security Network; Jenell Steele, a registered nurse and fitness coach; Will Walker and Anthony Sutton of Brunch N’ Burn; Quentin Vennie, a wellness expert and author; Tsanonda Edwards of Above It All Inc.; and Brianna Billups of Fully Grown, LLC.

After each panelist introduced them-

selves and the mission of their organizations, they too shared their vision for a healthier Baltimore along with their individual efforts to fulfill that vision.

Holistic health, wellness, Black health, and food disparities were among the main subject matters addressed during the panel discussion.

Eliseba Osore said she was drawn to the event because of her natural interest in engaging in health-related conversations in the city.

“I think any time you give folks a chance to come together and ask questions and talk, there’s an impact on the community,” said Osore, director of ShareBaby, a local nonprofit that provides diapers and clothing items for families in need.

“I feel like a lot of folks in our community want their voices to be heard, and so events and forums like this really give people that opportunity. So I think people, hopefully, will leave feeling more empowered or at least like they learned something.”

Similarly, Sade Brown attended the community conversation with an open mind ready to hear the various perspectives and insights for a healthier Balti-

more. She said she was captivated by Cohen’s advocacy toward treating trauma-related issues in the city.

“Councilman Cohen, hearing him speak about the bill and the things that he’s pushing, especially around youth trauma, definitely piqued some interest from me because I’m from Baltimore and I’ve experienced quite a bit of trauma myself,” said Brown, a yoga instructor.

“So for him to push that, it really piqued my interest to want to know more.”

If there’s anything that the Baltimore Times Community Conversations has proved, is that there is indeed remarkable work being done in the community but it goes unnoticed because it often happens in siloes.

“The fact that there’s so many young people who attended... this conversation, it tells me that we have a lot of young people interested in the Baltimore Times,” Bramble said.

“I think talking to each other in community in a non-threatening way, in a fun way, where everybody’s ideas are accepted... makes a big, big difference and it helps community.”



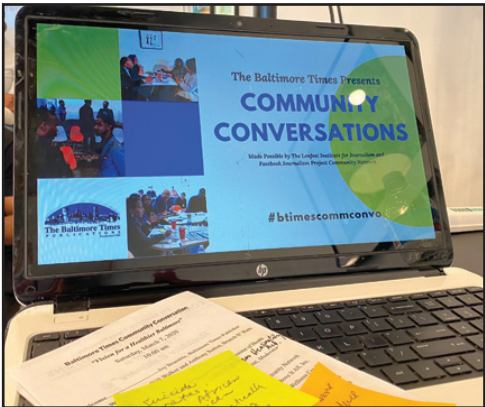
Baltimore City Councilman Zeke Cohen (District 1)



Stephanie Klapper and Vinny DeMarco of the Maryland Citizens' Health Initiative



Teara Booker, founder, Well With My Soul



Positive stories about positive people!

Ravens OL Marshall Yanda is a future Hall of Famer

By Tyler Hamilton

All good things come to an end. That's the likely thought process at the Baltimore Ravens facility when they learned of offensive guard Marshal Yanda's retirement. After 13 years in the NFL, Yanda is moving on to the next phase of his life with his wife Sharon and their children Graham, Libby and Logan.

Only three guards in NFL history have been selected to eight or more Pro Bowls and won a Super Bowl. Yanda joins former Dallas Cowboys guard, Larry Allen and former Pittsburgh Steelers guard, Alan Faneca as the only players to achieve that feat. Allen is already in the Pro Football Hall of Fame. Faneca will likely make it in soon Yanda should eventually follow the others into Canton.

The 2007 third-round pick spent the duration of his career with the Ravens. Yanda was widely considered to be the best interior offensive lineman in the game. He was selected to six consecutive Pro Bowls from 2011 - 2016.

A broken ankle cost him the 2017 season, but he came back as strong as he was before the injury making it to Pro Bowls in 2018 and 2019. Yanda has always been known for his toughness and technical expertise as a lineman.

Yanda was named to USA Football's 2014 All-Fundamentals Team, which honors 26 NFL players (11 offense, 11 defense and four special teams) that 'play with proper techniques, specifically when blocking and tackling, that fosters inherent safety benefits and better on-field performance.'

Yanda's technically sound Hall of Fame level play allowed him to make an impact beyond the football field.

Being named an All-Fundamentals Team player meant Yanda received an



Marshal Yanda has announced his retirement after 15 years with the Baltimore Ravens in the NFL
Courtesy Photo/NFL.com

equipment grant valued at \$1,000 from USA Football. He was given the opportunity to donate to the youth organization or high school program of his choice. Yanda selected his alma mater Anamosa (Iowa) High School.

Hall of Fame left tackle Jonathan Ogden was a veteran when Yanda joined the team and liked him from the start.

"When he got out there, he had sound technique, and he also had this toughness about him. That, 'I grew up on a farm, I bailed hay, and I'm just gonna out-tough you' mentality," Ogden told The Ringer in 2017.

Former Ravens teammate Matt Birk chimed in as well.

"I've played with guys in the Hall of Fame," Birk told The Ringer. "I've played with guys who are going to be in the Hall of Fame. He is right at the top of my list as far as complete football players that I had the pleasure of playing with."

Yanda's position was not one that offered a lot of glory. It's a thankless job. However, there are few Ravens players who have been able to garner as much respect in the locker room as Yanda. In five years, he will be eligible to join Ray Lewis, Ogden and Ed Reed as Ravens teammates in the Hall of Fame.

Marylanders warned about Coronavirus Disease Scams

Baltimore— Maryland Attorney General Brian E. Frosh is warning Maryland residents to be on guard against scams involving the Coronavirus Disease 2019 ("COVID-19"). Scammers are setting up websites to sell bogus health products that claim to prevent or cure COVID-19, and using fake emails, texts and social media posts about COVID-19 as a ruse to steal money and personal information.

"Scammers are taking advantage of people's fear of getting sick from COVID-19. Consumers can avoid being cheated by understanding how these thieves are trying to steal their personal information and money," said Attorney General Frosh.

Swindlers are posing as authorities, like the Centers for Disease Control and Prevention (CDC) or the World Health Organization (WHO). They send emails claiming to offer updated information about how people can protect themselves from COVID-19.

Unsolicited emails from the CDC, WHO, or other "experts" saying they have information about the virus are likely phishing attempts to get money or personal information, or may be attempting to download viruses or malware onto the recipient's computer. Marylanders are advised not to click on suspicious links online or in emails for information, but to seek information about COVID-19 from reliable sources

such as government health agencies. For the latest, most accurate information about COVID-19, Marylanders can go directly to the CDC (www.cdc.gov), WHO (www.who.it), or the Maryland Department of Health (www.health.maryland.gov).

There are no approved vaccines, drugs or treatment products specifically for COVID-19 available for purchase online or in stores. Pitches for any health product claiming to prevent or cure coronavirus are almost certainly fraudulent. The Food and Drug Administration (FDA) warns that fraudulent products not only fail to work, but they could also cause serious injury. Scammers may be promoting their fraudulent health products through newspapers, magazines, TV infomercials, email, social media sites like Facebook and Twitter, and online through websites and popup ads. Complaints against these fraudulent health claims can be filed with the Federal Trade Commission at www.ftccomplaintassistant.gov or the FDA (www.fda.gov).

Someone asking for donations— especially in cash, prepaid credit cards, gift cards, or bitcoin— to help victims of COVID-19, or for "research" into finding a vaccine or cure, is very likely a scammer. Sites like www.charitynavigator.org can be used to determine the legitimacy of a charity. Donors can also contact the Maryland Secretary of State's Office at 800-825-4510 to verify that a charity is registered in Maryland as required by law.

COVID-19 scams can be reported to our Consumer Protection Division by calling 410-528-8662, or by filing a report with WHO (https://www.who.int/about/report_scam/en/) or the FTC (ftc.gov/complaint).

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