

On Rounds

The University of Alabama
College of Community Health Sciences

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With 2003 Grads, CCHS Family Doctors Number Over 300

28th Class of Family Practice Residents Graduates

Dr. William Owings, CCHS Interim Chair of Family Medicine, presided at the 28th annual graduation ceremony of the Tuscaloosa Family Practice Residency on June 17, 2003. DCH Healthcare Authority and DCH Regional Medical Center hosted a dinner for the graduates and their families, which was followed by presentation of awards and special recognition.

William B. Deal, MD, Dean of UASOM, was the speaker. Associate Dean Marc Armstrong, MD, presented the William R. Willard Award to Julia



Dr. Armstrong congratulates Julia Boothe, who won the William R. Willard Award.

Lett Boothe, MD, the first year resident who most closely embodies the mission and goals of CCHS, and awards (in box at right) were presented. Chief Residents, Catherine Skinner and Calin Pernes, received

University of Alabama chairs in appreciation for their leadership. Dr. Armstrong, the first resident to enter the program and former residency director, received special recognition from the graduating class and the Department of Family Medicine.

(More pictures, p 4.)



Dr. Vijaya Sundar, Acting Chair of Internal Medicine, presented the Internal Medicine Award to Salih Faldon (l). Dr. Faldon also won the pediatrics award and the resident teaching award.

Internal Medicine	Salih Faldon
Obstetrics/Gynecology	Catherine Skinner
Pediatrics	Salih Faldon
Psychiatry	Ed Shackleford
R3 Conference Presentation	Larry Thead, Tom Linberg and Calin Pernes
Resident Teaching Award (presented by Society of Teachers in Family Medicine)	Salih Faldon
William F. DeShazo III Family Practice Award	Ed Shackleford

CCHS Mourns Death of Dr. Armstrong

Dr. Marc Armstrong died Sunday, December 7, at his home in Texas. During the past eight and one-half years until his retirement from CCHS December 1, Dr. Armstrong served as a faculty member in Family Medicine, Associate Dean for Clinical Affairs, Director of the Residency Program, and most recently Chair of the College's Building Committee. "Marc was a great friend, a skilled administrator, and a devoted physician and teacher," said Dean William Curry, MD. "He cared deeply about his patients and about those he taught and appreciated the weight of responsibility that falls to those of us who teach the art and science of medicine."



Dr. Armstrong in Red Suite

A memorial service for Dr. Armstrong was held December 14 at Daltons' Funeral Home in Lewisville, Texas, and a memorial service was held in Tuscaloosa on January 3.

Marc Andrew Armstrong, MD, son of a career army officer, grew up "all over the world," said his friend and mentor, Dr. Bill Owings, Interim Chair of Family Medicine. He graduated from high school in Highland Falls, New York, where his father taught mathematics at the US Military Academy at West Point. He received his BS in Chemistry from The University of North Texas in Denton in 1970, and his MD from Tulane Medical School in New Orleans in November, 1973.

He became the first resident to enter the newly established Tuscaloosa Family Practice Residency in January of 1974 and remained until April of 1975 when he entered the private practice of medicine with Dr. Owings in Centreville, AL.

Armstrong moved his private practice to Texas in 1976 and joined the faculty of University of Texas Southwestern Medical Center in Dallas in 1992, after 13 years in private practice and brief tours with the US Coast Guard and the homeless medical outreach program at Parkland Memorial Hospital in Dallas.

He returned to the University of Alabama in February of 1995 as Associate Professor in the Department of Family Medicine and Director of the Tuscaloosa Family Practice Residency, a position he held until June 1999. Since October of 1995, he had served as Associate Dean for Clinical Affairs while continuing as a valued member of the faculty.

"Dr. Armstrong was a caring physician, gentleman, and boss," said Dianne Kerr, Director of Nursing at Capstone Medical Center. "He was fully supportive of the CMC staff, and his decision-making was always prompt, polite, and gracious." She described Dr. Armstrong as "a tremendous motivator," saying that he always listened and had a great sense of humor. "He was admired and respected, and his death has been deeply felt," she added.

Dr. Owings said that Dr. Armstrong considered his greatest accomplishment at CCHS his role in working with many fine individuals in making the new building a reality. "The thing he most appreciates from his training here at CCHS," added Dr. Owings, "was the opportunity to work with mentors and teachers of the high caliber this Residency has always provided. I'm sure he would like to be remembered primarily as a good physician."

Cockrum Appointed Chief Medical Officer

Elizabeth Cockrum, MD, associate professor of pediatrics at CCHS, has been appointed Chief Medical Officer of CCHS/UA School of Medicine - Tuscaloosa. Dean Curry appointed Dr. Cockrum to replace Dr. Marc Armstrong, who retired November 1, 2003, after serving the College for eight years. "Her appointment was effective Monday, November 10," said Dean Curry in his announcement to faculty and staff. "She will report directly to the Chief Administrative Officer, Mr. John Maxwell."

"In this position, Dr. Cockrum will be the principal liaison between medical staff and clinic administration, as well as with the Capstone Health Services Foundation Board of Directors," said Dr. Curry. "She will serve as medical director of Capstone Medical Center, where she will appoint physician clinic directors in consultation with Department Chairs. She will have liaison and oversight responsibilities at Russell Student Health Center, although the medical staff of RSHC will continue to have its own medical director."

She will be the physician leader of our group practice, with responsibility for identifying and removing obstacles to excellent patient care. She will be the chief physician spokesperson for CCHS. Dr. Cockrum will continue her current teaching, research, and clinical responsibilities in the Department of Pediatrics.

Dr. Cockrum, a graduate of UA and the UA School of Medicine, did her pediatric residency at The Children's Hospital of Alabama in Birmingham. She joined the CCHS faculty in 1989. She was promoted to associate professor of clinical pediatrics in 1995. Cockrum has served as director of the pediatric clerkship for third-year medical students since 1991, and she also served as chair of the pediatric department at DCH Regional Medical Center from 1996-1998.

"Dr. Cockrum has the best knowledge base for care of pediatric patients I have ever encountered," said a colleague in a letter recommending her for the Outstanding Commitment to Teaching Award. "This knowledge is accompanied by an extremely keen clinical acumen. Together, these qualities make her an outstanding pediatrician, enabling her to provide students with the best learning experiences possible."

She instructs third- and fourth-year medical students at CCHS, a branch of the University of Alabama School of Medicine, in routine well child and sick care in the pediatrics outpatient clinic at the Capstone Medical Clinic and teaches pediatric emergency, in-patient, and newborn nursery care at DCH.



Dr. Cockrum

REFLECTIONS

by William A. Curry, MD, FACP, Dean

Moving Ahead in Difficult Times

Marc Armstrong was a clinical teacher of the classical sort. By that I don't refer to his bowtie, his ruffled "gentleman in a dustcoat" appearance, or even how impressively well-read he was. He was "classical" in the sense that he had a clear idea of what medical teaching was about. He could express that in many ways, from different perspectives, but it was always direct and concise.

Behind all those explanations was a fundamental assumption: effective teaching is about something bigger than either the teacher or the learner. Marc's shocking and untimely death, just a month into his retirement, was a blow to our college, his patients, and all who knew him. I miss Marc a lot, and I especially miss having him remind me of those fundamental



Dr. Curry in front of one of Dr. Armstrong's final projects, the College's new building, which will open in April when the Capstone Medical Center closes.

assumptions. Marc understood that what we believe is of ultimate importance because it shapes who we are and what we do.

What we do here at CCHS/UASOM – Tuscaloosa takes many forms. The one that makes us unique is our commitment to rural health. That mission leads us to rural-based research, to community outreach projects, to programs increasing the numbers of rural and minority students in medical school, to encouraging and supporting rural medical practice, and to participating in the public dialog about policy affecting rural health.

The productivity of our rural work has never been greater, but there are serious financial challenges. While the annual Alabama Conference on Rural Health is well-planned and well funded through grant, sponsorship, and fee income (the fifth meeting is April 28 – 30), and while the Institute for Rural Health Research continues to grow steadily in its contributions, the Institute needs better facilities and other infrastructure to realize its potential.

The widely recognized Rural Health Scholars, Rural Medical Scholars, and Minority Rural Health Pipeline Program face serious funding cuts. RHS and RMS lost their largest source when the legislature reduced such budgets after the September 2003 tax referendum defeat. These programs are essential to meeting our rural responsibility, and we are committed to their survival. Without enough money, though, there is no choice but to reduce their activities. That same referendum defeat led to a reduction in the UA state legislative appropriation for this fiscal year, causing us to reduce funding for departments and other programs. Next year's state funding for higher education remains a big question.

If what makes CCHS unique is rural work, the primary identity for the largest number of our faculty is – as for Marc Armstrong – that of clinical teacher. Finances here are threatened too. Besides state proration, we have had a major reduction in clinic income because of new national accreditation regulations limiting the hours resident physicians may work. Fortunately, we have recently secured significant increases in federal funding for our residency in partnership with DCH Regional Medical Center. This, and the economies of scale created by our integration with UA's Russell Student Health Center, help offset the losses and reductions, but only partially. Looming immediately ahead are anticipated reductions in the Alabama Medicaid Program, a major source of our clinical revenue.

To be responsible managers, we have taken the only immediate course that can keep our ship steady on such a stormy sea: we have reduced expenses further. But our path is not a retreat; we mean to continue our advances. After an intensive check-up of our clinical services, we are prescribing changes that will restore needed revenue and make us even stronger for the long term. The move to our new building in the spring will add momentum. The result will be an even more productive faculty doing an even better job of teaching and training Alabama's next generation of physicians and serving the special health needs of rural Alabama. Joined by committed staff, they will be supported by a resilient and efficient clinical enterprise and a growing research program, both of which make our faculty better teachers.

Marc Armstrong will not be here to join in the clarifying discussions and decisions, the planning and the doing, of the next few months. But we can remember that he left us an indispensable gift: the reminder that what is at stake is a great deal more than clinical income, research grants, or even better board scores.

What is at stake is what Robert Frost described when he wrote, "We dance round in a ring and suppose, / But the Secret sits in the middle and knows." It is in fact about "the secret of life," which as Curly in the movie *City Slickers II* says, is "just one thing" – the thing that each of us must figure out for ourselves. For CCHS, we and our predecessors have found that Great Thing to be the patient, the community of patients, the future generations of physicians who will serve them. That is why Marc loved being here and why he knew it mattered. May we never forget it.

- Bill Curry



UA and Public Health co-Host Rural Health Conference

The University of Alabama Institute for Rural Health Research will again be host for the Annual Rural Health Conference April 29-30, 2004, at the Bryant Conference Center on the University's campus in Tuscaloosa.

Pre-conference workshops will be held at the conference center on April 28.

The theme of the 2004 conference (the Fifth Annual Rural Health Conference) is **Working Together Today for a Healthier Tomorrow**. The Institute will host the event together with the Alabama Public Health Association Inc.

The conference will include three break-out session themes – Working Together with Communities, Working Together with Public Health, and Working Together with Health Professionals.

Keynote speakers will include Thomas J. Bacon, director of the North Carolina Area Health Education Centers Program and executive associate dean of the University of North Carolina at Chapel Hill School of Medicine; Donald E. Williamson, state health officer for Alabama; and Claudia R. Baquet, associate dean for policy and planning at the University of Maryland School of Medicine and a leading national expert on cancer in minority and low-income populations.

Each year, the Rural Health Conference draws hundreds of attendees, including health care professionals, community and business leaders, government officials, academic researchers, representatives of faith-based organizations and others who come together to find comprehensive and creative solutions to the health issues that impact our rural citizens.

For more information, visit the Rural Health Conference website at <http://rhc.ua.edu> or call the Institute for Rural Health Research at (205) 348-0025.



Lichtenstein's Research Receives Broad Coverage

Research by Dr. **Bronwen Lichtenstein**, a UA research scientist with a joint appointment in the College of Community Health Sciences' Institute for Rural Health Research and women's studies, has provided new insight into the reasons why blacks in the rural South are contracting AIDS at a faster rate than whites. Lichtenstein's conclusion that the increase is due to a combination of poverty, bisexuality, drugs, and domestic abuse was the subject of a long AP story that appeared in the *Birmingham News* and other newspapers across the state. Lichtenstein's work has also been covered in various online publications and professional journals. In 2003, Dr. Lichtenstein was author of "How AIDS Became a Race Issue: The Case of Alabama," published in *AIDS & Public Policy Journal*, 17 (2):59-74; and she contributed a chapter, "AIDS as a Social Problem: The Creation of Social Pariahs in the Management of an Epidemic," (Chapter 19) to *The Handbook of Social Problem: A Comparative International Perspective*, edited by George Ritzer and published by Sage Publications in Thousand Oaks, California. She also published "Stigma as a Barrier to Treatment of Sexually Transmitted Infection in the American Deep South; Issues of Race, Gender, and Poverty" in *Social Science & Medicine* 57 (12): 2435-2445. This article was called "state of the art" by scholars in the field, and E.W. Hook, III, Chair of Infectious Diseases at UAB, stressed its importance to the body of literature on sexually transmitted infection (STI).

Interest in her research sparked an invitation to speak at Indiana University on March 1, 2004, as part of the 10-year celebration of the opening of the Rural Center for AIDS/STD Prevention (www.indiana.edu/~aids) at there. RCAP, funded by CDC, began operations March 1, 1994, and officials of the Rural Center wanted to celebrate ten years with an open house and an outside featured speaker who works in rural AIDS prevention. Dr. Lichtenstein will also present a paper at the national STD Prevention Conference in Philadelphia, March 7-11, entitled "'We're the Best' Versus 'They're the Worst': Reconciling Staff and Client Views of STI Care."

Dr. Lichtenstein is a member of the Governor of Alabama's HIV Commission for Children, Youth, and Adults, which reported in 2003 that AIDS is now the leading cause of death in the United States among African-Americans between the ages of 25-44. Forty percent of all people living with AIDS in the U.S. are in the South, and 46% of the newly diagnosed cases live in the South.

Lichtenstein has two more publications in press: she completed an article, "African-American Men, Stigma, and STI Treatment in the Deep South," which will appear in the June issue of *Gender & Society*; and she has contributed an entry, "Men and Sexually Transmitted Infections," to *Encyclopedia of Men and Masculinities*, scheduled for publication in 2004.

Researcher says poverty drives spread of AIDS among blacks

Bisexuality, drugs, abuse of women create lethal mix, interviews reveal

By JAY REEVES
The Associated Press

TUSCALOOSA — Health officials have struggled for years to understand why blacks across the rural South are contracting AIDS at a faster rate than whites.

A research scientist at the University of Alabama has come up with an explanation, based on hundreds of clinical interviews conducted over nearly a decade: a deadly mix of bisexuality, abuse of women and drugs, all in an environment of oppressive need. "Poverty is the driving force,"



Bronwen Lichtenstein
Found that bisexuality is a key to spread of AIDS among blacks in the South.

Institute for Rural Health Research and Tuskegee University Work to Reduce Health Disparities in Alabama's Black Belt

Alabama's Black Belt is a region of the state that has borne extreme poverty and ill health for more than a century. People here die at higher rates than other Alabamians from cancer, heart disease and diabetes. Doctors and hospitals are scarce.

The University of Alabama Institute for Rural Health Research, part of the College of Community Health Sciences, is working to change that. Through a collaborative effort known as Project EXPORT, the IRHR and Tuskegee University are slowly chipping away at the health disparities that exist in a dozen Black Belt counties.

Together with communities in those counties and with a \$7.5 million grant from the National Institutes of Health, researchers at IRHR and Tuskegee work to discover why vaccination rates for elderly African-Americans are so much lower than rates for the general population, to increase breast and cervical cancer awareness and screening and to educate rural minority families about diabetes and how to care for those with the disease.

That kind of leadership and collaboration is the hallmark of the IRHR.

"In everything we do, we're working with communities," says John C. Higginbotham, PhD, Director of the University's Institute for Rural Health Research. "I want to emphasize that we're not working on folks, we're working with folks so that they have a voice and have the ability to have input, as well as a stake in what happens in their communities as we try to reduce the disparities."

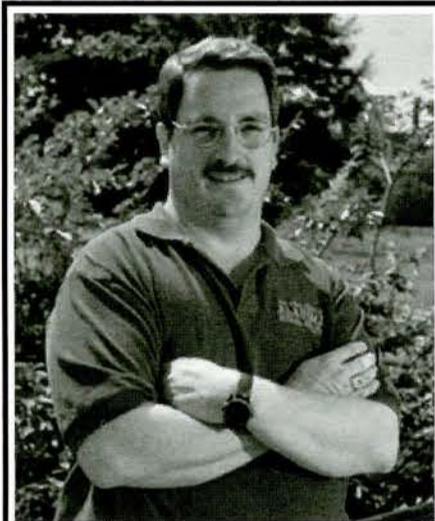
"When we work together, we can achieve our goals," says Higginbotham, who also serves as Interim Chair and Associate Professor for the Department of Community and Rural Medicine in the College of Community Health Sciences.

The U.S. Department of Health and Human Services has acknowledged in a July 2002 report that most current approaches to rural health research and care are fragmented and often ineffective. But here in Alabama, the IRHR has already begun to bring coordination and cohesiveness to efforts to reduce health disparities in Alabama's rural communities, particularly those in the Black Belt.

Created in July 2001, the IRHR works closely with six colleges and schools within The University of Alabama – the College of Community Health Sciences,

Capstone College of Nursing, the School of Social Work, Culverhouse College of Commerce and Business Administration, the College of Human Environmental Sciences and the College of Arts and Sciences – as well as with numerous partners in rural communities.

The mission of the IRHR is to bring about the highest attainable standard of health for rural citizens through research, education and outreach. The



Dr. Higginbotham

Institute pursues this mission through the combined strength of scientific knowledge, community support and informed public policy.

To date, the IRHR has been a participant in state and federal grants totaling more than \$17 million for research projects that focus on reducing health disparities in rural Alabama.

In addition, the IRHR serves as a resource for researchers, individuals and organizations working to improve the health of rural communities and can assist in identifying relevant topics for investigation, developing research methods, designing data collection instruments, collecting information through focus groups, interviews and surveys, and analyzing data.

The IRHR can also assist faculty and researchers with grant writing and management of research projects. Through the IRHR Grant Development Program, young faculty can learn more about grant writing and receive guidance in conducting and managing research projects from more experienced IRHR investigators and faculty.

And, the Institute hosts an annual Rural Health Conference that draws hundreds of attendees, including health care professionals, community and business leaders, government officials, academic researchers, representatives of faith-based organizations and others who

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"When we work together, we can achieve our goals," says Dr. Higginbotham, who also serves as Interim Chair and Associate Professor for the Department of Community and Rural Medicine in the UA College of Community Health Sciences – the University of Alabama School of Medicine, Tuscaloosa.

dialogue and work together to find creative solutions to health issues that impact Alabama's rural citizens. (See *Conference announcement, page 2.*)

"It is only when we work together as individuals, communities, universities and with government that we can eliminate disparities," Higginbotham says. "It is going to take us all."



CME to Focus on Rural Primary Care

"Continuing Medical Education (CME) serves not only our faculty, students, and residents," says Dr. E. Eugene Marsh, Associate Dean for Academic Affairs at CCHS. "It is a valuable resource to the medical community and to physicians practicing in rural areas." Dr. Marsh considers CME an important part of the mission of the college and hopes to build on the work of former CME Director Vicki Johnson, who will be devoting more time to advancement, development, and fund-raising for CCHS.

Dr. Marsh assumed responsibility for CME on January 1 and said he "plans to integrate CME programming into the fabric of our academic mission." He has solicited input from faculty, residents, students, and hospital staff about topics and format for CME programs. "We need to find the right blend between outside and in-house speakers," said Dr. Marsh. "Our faculty is an untapped resource," he said, citing the broad range of expertise at CCHS.



Dr. Marsh

The schedule will still include outside experts, but the CME focus will be topics pertinent to primary care. A strategic planning session in February will be devoted to CME and other academic issues. Dr. Marsh wants to involve faculty and others in finding new ways to deliver CME so that it meets the needs of practitioners at the times they need that information.

Dr. Marsh would be pleased to hear from alumni or other practitioners. To make suggestions or requests related to CME, contact Dr. Eugene Marsh at emarsh@cchs.ua.edu or Carol Boshell, Coordinator, Continuing Medical Education, Office of the Associate Dean for Academic Affairs, College of Community Health Sciences, Box 870326, Tuscaloosa, AL 35487-0326. Phone: (205) 348-1243.

The CME schedule is on the College's website: <http://cchs.ua.edu/departments/continuing/index.html>

Each year Rural Medical Scholars (shown below) spend the year prior to entry into medical school at The University of Alabama in special course work focused on issues related to rural primary care. In this year's class, five college seniors are completing a bachelor's degree in addition to RMS courses and field activities, and six graduate students are taking additional courses to prepare for medical school. All will earn a Certificate in Rural Community Health during this prematriculation year of study and will be entering the University of Alabama School of Medicine (UASOM) in August. Following two years of basic sciences in Birmingham, they return to the College of Community Health Sciences (CCHS), a UASOM branch campus to complete two years of clinical training. The program complements the rural mission of CCHS and was set up to meet the critical need to recruit and train primary care physicians for rural Alabama.

2003 Rural Medical Scholars

(front)

David Simmons, Geneva County
 Arrtie Patil, Bibb County
 Stephanie Dodd, Walker County
 Bethany Abrams, St. Claire County
 Kirk Miller, MS, MBA, Clay County

(back)

Timothy Prestley, Walker County
 John Crew, Talladega County
 Noah Lott, Cullman County
 LeeAnn McAliley, Coffee County
 Benjamin Miller, Marion County (alternate)
 Christopher Gilbert, MPH, DeKalb County



2003 Family Practice Residents at Graduation: (front row) Cathy Skinner, Erik Andreu, Tracy Lane, Tamara Hughes, Maggie Stewart Morr. (back row) Ed Shackelford, Dale Christensen, Salih Faldon, Calin Pernes, Phil Sundquist, Jonathan Polhemus, Larry Thead, Tom Linberg.



Dr. Salih Faldon (r) with Dr. Mike Taylor, Chair of Pediatrics, who presented the pediatrics award.



Dr. Ed Shackelford receives the DeShazo Family Medicine Award from Dr. Chelley Alexander (l).



Dr. Catherine Skinner (r) receives the OB/GYN award from Department Chair Dr. Dwight Hooper at the 2003 Family Practice Residency Graduation dinner in June.



Left: Chief Residents Calin Pernes and Catherine Skinner with Dr. Armstrong as he admires the gift of special appreciation he received.

Below: Dr. Alan Blum (r) presented excellence awards for R-3 conference presentation to Larry Thead (l), Tom Linberg, and Calin Pernes (second from right).



Dr. Eric Andreu accepts his certificate of graduation from Residency Director Sam Gaskins. He joins the alumni of the Tuscaloosa Family Practice Residency, whose graduates now total 303.



Dr. Jim Leeper (center), Professor of Community & Rural Medicine, presented Research Awards to Catherine Skinner and Ed Shackelford.

CCHS Supporters Honored by Alabama Rural Health Association

Fayette family physician **Richard Rutland** was recognized with the Rural Health Provider Exceptional Achievement Award by the Alabama Rural Health Association (ARHA) at its annual Rural Health Week luncheon held in Montgomery in October. **Marjorie Johnson** of Shorter, Alabama, received the Rural Volunteer Excellence in Service Award. Dr. **Don Williamson**, State Health Officer of Alabama, presented the awards.

The RURAL HEALTH EXCEPTIONAL ACHIEVEMENT Award is presented to a provider who both lives and works in an Alabama community which is rural (non-Metropolitan Statistical Area) and whose livelihood comes from delivering health care in an exceptional manner through direct services or in the administration of services-- making lasting contributions to a community through tireless efforts with an unselfish, compassionate, and cooperative attitude.

Dr. **Richard Rutland** is completing his 51st year in the practice of medicine. He closed his office practice in 1997 and immediately assumed the position of Medical Director at the 122-patient Fayette nursing home. He later provided similar services to Lamar County's only nursing home.

Before retiring, Dr. Rutland delivered over 2,000 babies, worked 70-75 hours a week, saw 25-35 patients daily at his office, made twice daily hospital rounds, and worked in the emergency room 7-8 nights per month. When he closed his office practice, he wrote each patient a personal letter before announcing his retirement in the newspaper.

Dr. Rutland used his days off for about six years to be Attending Physician at clinics in Berry, Alabama, and later in Kennedy, when these small towns had no doctor.

During the 1960's, Dr. Rutland was instrumental in the founding of the College of Community Health Sciences at UA and took time away from his practice to teach clinicals to family practice residents there. He served as interim residency director and started a rural preceptorship so that medical students and residents received some training in rural areas.

In 1981 Dr. Rutland was recognized nationally as "Family Doctor of the Year" by *Good Housekeeping* magazine and the American Academy of Family Physicians (AAFP). He received a "Certificate of Distinction" for 50 years of medical practice from the Medical Association of the State of Alabama, AAFP, and his medical school alma mater, Tulane University.

Dr. Rutland and his wife of 54 years, Nancy Babb Rutland, have four children: Richard O. Rutland, III, MD, of Gadsden; Craig D. Rutland, MD, of Nashville, TN; Cindy McBrearty of Fairhope; and Melissa Cathey of Washington state. Dr. Rutland served in the U.S. Navy from 1944-1952 in the Pacific and Korean Theaters. He is active in First United Methodist Church of Fayette; involved with local civic and educational organizations--being named Fayette County's "Man of the Year" in 1960; and is in numerous professional organizations.

See Dr. Rutland's remarks in boxed article.

The RURAL VOLUNTEER EXCELLENCE IN SERVICE Award is presented to an individual who both lives and works in a rural Alabama community and whose volunteer activities have achieved excellence in promoting the availability of rural health services especially to under-served populations. Nominees should be individuals whose civic activities have strengthened rural health care delivery through community leadership, creativity, and a concern for the underserved.

Marjorie Johnson, a 4th grade teacher at Macon-East Montgomery Academy in Cecil, Alabama, has served as a leader in the Women Involved in Farm Economics (WIFE) organization for years. She and other WIFE members have worked extensively with the Rural Pipeline Programs at The University of Alabama, the Rural Alabama Health Alliance, and others to create and support rural scholars programs at CCHS to recruit and nurture rural students who want to become rural physicians or other rural health care practitioners. With Mrs. Johnson's guidance, WIFE has provided rural field trip experiences and community service experiences for students in the rural scholars programs and assisted in other projects seeking to improve health care services in rural Alabama.

Mrs. Johnson and her husband, Ted, own and operate the Back Forty Restaurant in Shorter and the River Bottom Lodge in Statesville.

Primary care physicians practicing in rural Alabama have approximately twice the number of potential patients as their urban counterparts.

*Dale Quinney, Program Manager
Alabama Rural Health Association*

...rural medical practice requires a much broader range of skills than urban practice where specialists are abundant. Studies of medical errors show that mistakes are less likely to happen when information does not have to move from person to person. The care that a person will receive from a rural practitioner can be as good as one could receive anywhere.

*Dr. Wayne Myers, President
National Rural Health Association*



Dr. Rutland (left) and Marjorie Johnson with State Health Officer, Dr. Don Williamson.



Dr. Rutland

Remarks by Dr. Richard Rutland Alabama Rural Health Association Awards Luncheon October 31, 2003

Over the years I have received a few honors but none has had in it the word "rural." For me that is the magic word because I am a country boy from Eufaula when it had a population of 5000. Moving to Fayette continued my love affair with small towns and rural Alabama.

After 50 years of practice I could ramble on about many aspect of my professional life. I would like to focus on what has been my chief obsession, after the actual practice of medicine--training young people for rural family practice.

In 1966 when Dr. **Jon Sanford** of Fayette graduated from UAB, then the only medical school in the state, he and one classmate were the only two to enter rural practice. Since the 60's, through the efforts of many good people, things have changed considerably. My son-in-law, **Mike McBrearty**, was the first graduate of

the family practice residency of the University's College of Community Health Sciences in 1976. Since then, the total number of graduates from the Tuscaloosa program and its fellow program at the Huntsville University of Alabama branch is 500 to 600. The addition of the graduates of the other seven or eight family practice residencies in the state which later could bring the total up to 800 or more. Of these graduates it is estimated that half remained in the state, and of these about half settled in towns of under 25,000 people. What a dramatic improvement this represents for rural Alabama, but it is a work in progress.

I've learned over my years in medicine and working with medical education that training enough medical manpower with the proper mix of specialties can be a fragile thing. We would appear to have all the links in the education chain in place at the University to train family physicians for rural areas--working with high schoolers, with college premed students, with medical students, and finally providing some of the best family practice residency training in the country. But taking a look at the Convocation Issue of *On Rounds*, the CCHS publication which came out a couple of weeks ago, tells us that all is not well. Of the twenty-five fine looking medical students who graduate from the Tuscaloosa program, only one is entering a family practice residency. Interestingly, four are going into anesthesiology residencies.

Let me remind you that the vast majority of doctors practicing in rural Alabama are family doctors. And on turning the page there is another good looking group of young people, the usual number of twelve beginning their family practice residency in Tuscaloosa, but closer study again indicates that all is not well. Of the twelve, nine are foreign medical graduates; only three are graduates of a U.S. medical school. In a medical education program where the faculty goes to extremes trying to produce rural doctors for Alabama, it is likely the success rate with these two groups will be low. This must be shattering to the faculty.

I have recently spoken with **John Wheat** of the Tuscaloosa program and **Mike Harrington** of UAB, who both agree that the weakest link in the educational process of training rural doctors is getting U.S. medical graduates to choose family practice.

I won't attempt to read the minds of young Alabamians nor of young Americans generally when they sign a residency contract and commit themselves to their future area of practice. Most know that country doctors have long hours, heavy responsibilities, and the lowest remuneration of any group of doctors. And among most traditional medical school faculty who have so much influence on students, family practice is looked down upon. If by some miracle a significant percentage of UAB graduates decided to enter family practice residencies, there would be despair on the campus and much soul searching among faculty as to where they went wrong. Too bad I and other country doctors have not been able to communicate what a marvelous and rewarding life we have.

I would like to appeal to the Alabama Rural Health Association to use your influence on Alabama's youth and state medical schools to reverse this trend.

We need to train more doctors who are willing to go where the greatest needs are.

If you think that public pressure has no influence on this process, let me cite three examples to the contrary. In 1970 Governor George Wallace was in a runoff with Albert Brewer in the gubernatorial campaign. His polls told him that the number one concern of voters was the shortage of doctors; no one ever called Wallace a stupid politician. He immediately began promising the training of more doctors for the state. When elected, he called a special legislative session and money was appropriated for schools in Tuscaloosa and Huntsville.

Example #2 came when UAB felt threatened by the new medical school at the University of South Alabama and the planned schools for Tuscaloosa and Huntsville and withdrew their support. Governor Wallace insisted that the two schools proceed as planned and they did.

Example #3 occurred when last year's recipient of this fine award--Dr. **Neil Christopher**--while president of the Alabama Academy of Family Physicians, became exasperated with UAB's foot dragging in training family and rural physicians and made an appeal to the state legislature for help. This was a move that numerous presidents of the Academy before him, including me, had contemplated but not followed through on, remaining hopeful that they could reason with UAB administrators to take steps to meet the manpower needs of the state.

Let me say parenthetically that a good friend who has been on the UAB faculty for many years told me recently that he has never seen another major discipline dedicate as much time and effort toward meeting the medical manpower needs of the state as have family physicians. Neil sought the help the Speaker of the House **Jimmy Clark** and a million dollars a year was appropriated to create the Family Practice Rural Health Board which has done yeoman's service since.

Dr. Wheat told me last week that because of the Rural Scholars programs, the "pipeline" that he, Mrs. Johnson, and others have worked so hard on, there will be at least three and perhaps as many as seven rural students who will enter the Tuscaloosa residency next year.

The AAFP is throwing its considerable weight behind efforts to reverse these trends. And many of those 26 Tuscaloosa medical school graduates are entering residencies in internal medicine, pediatrics, and OB-GYN, and one in surgery...But the workhorse of rural Alabama medicine is the family doctor.

I consider UAB one of the state's treasures in research, subspecialty training, providing excellent medical care, and attracting favorable attention and federal grant money to our state. But without public and political pressure they will neglect the training of family physicians.

Let me close by saying how grateful I am to those who nominated and selected me for this award and to you, Dr. Williamson, for presenting it to me. I will be even more grateful if a few young people in the state take note and tell themselves how "cool" it would be to live the good life of a rural family doctor and received recognition for doing something one loves.

Thank you all.

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Lister Hill Society Board Members: (front) Alice Maxwell, president; Fuller Kimbrell; Betty Shirley; Madeleine Hill, Capital Campaign Drive Chairman; Wilmer Coggins, MD; Vicki Johnson. (back) Sam Gaskins, MD; Michael Taylor, MD; William W. Winternitz, MD; Eddie Sherwood; Tommy Hester, past president; Dean William Curry.

*This listing was computer-generated by the University's Development Office. We regret inaccuracies that may have accidentally occurred. Please let us know if there are errors or omissions. (205) 348-0093 or VJohnson@cchs.ua.edu



Notes from Alums

David Tuten (Residency grad, 1992) and his wife **Cindy** (center) have become medical missionaries with the International Mission Board of the Southern Baptist Convention. Following language study in Nairobi, Kenya, they will work at Kigoma Baptist hospital in Tanzania. They left the States for Africa on January 8, 2004. They were accompanied by their children, Paige, 14, and Tyler, 12. Their 20-year-old daughter, Amanda, is a senior at Judson College. You can contact the Tutens at: dtuten02@hotmail.com

David and Cindy Tuten, c/o Baptist Language Center, P.O. Box 52, Limuru, Kenya

Ed Shackelford, 2003 residency graduate, is now in Lewisburg, TN, a town of about 10,000 between Huntsville and Nashville. "I am in a group with a med/peds and an internist... very nice, and I've continued to learn a lot, though the q3 calls with 4 day weekend calls is a little long," he says. "I see probably about 60% adolescents and children, and 40% adults. I do both inpatient and outpatient; the hospital even has a small but well equipped 4-bed ICU. I have been busy enough that I have already seen some very atypical diseases and problems, and my main regret is that I didn't read a lot more in residency when I had more time."

His address is 769 Joyce Avenue, Lewisburg, TN 37091, and his office is at 1090 North Ellington Parkway. He still has his UAB e-mail address: shack@uab.edu.

Catherine Skinner, a 2003 residency graduate, sent greetings from Austin, Texas, where she is doing an obstetrics fellowship. She said she is planning to return to rural Alabama in the fall (still "negotiating," she said) and wrote to request the date of this year's Rural Health Conference to include in scheduling her CME activities for the year. The conference will be April 29-30, 2004, at the Bryant Center; and Leslie Zganjar, Assistant Director of the Institute for Rural Health Research at CCHS, sent her the information you can find on page 2 of this issue of *OnRounds*.



Please return the alumni update form on the back cover to share your news about yourself and your practice.



Host **Jack Warner** (center), surrounded by his renowned art collection, greets guests.

Lister Hill Annual Fundraiser

Westervelt-Warner Museum
NorthRiver Yacht Club

November 13, 2003



Elizabeth Rand, MD (l), Chair of Psychiatry and Behavioral Sciences at CCHS, **Dr. Susan Gaskins**, Professor, Capstone College of Nursing, and **Dr. Vijaya Sundar**, Interim Chair of Internal Medicine.



Dr. and Mrs. William Standeffer, left, visit with retired politician **Fuller Kimbrell**.



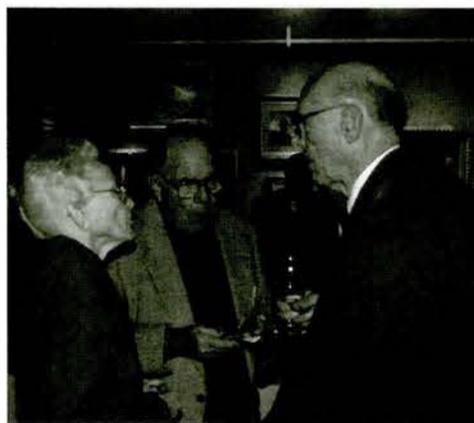
UA Vice President **Kerry Kennedy**, **Betty Shirley**, and **John Ferguson** take time out from getting acquainted to have their picture made.



Dean Bill Curry (left), **Vicki Johnson**, CCHS Director of Advancement, **Dr. and Mrs. Jon Sanford** of Fayette. **Dr. Sanford**, past president of the American Academy of Family Practice, earns **Dr. Rutland's** praise in remarks on page 5.



Bob Olin, Dean of Arts & Sciences, **CCHS Dean Emeritus Wil Coggins**, and **Dr. Bob Ireland**.



Elizabeth and George Hamner (front) visit with **John Shamblin**.



Dr. Earl Brandon, **Sam Jackson** **Dr. Pete Snyder** greets **Drs. Melissa and Bernad Kubajda**



Pete Snyder, MD, **Bali Sundar, MD** **John Slaughter** with **Fran Loper**



Dr. John Brandon and **Jimmy Harrison**



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Dr. Mike Taylor (l), Chair of Pediatrics, admires the **Wamer art collection**.



Sam Jackson, **Fran Snyder**



Rural Medical Scholar Arttie Patil, **Dean Olin**

