

HEALTH LEGISLATIVE ISSUES

The following pieces of legislation regarding health and minority populations may be relevant to readers of *Ethnicity & Disease*. Information on these bills was current when this issue went to press. We encourage readers to further investigate legislation of interest to their health disciplines.

S 621: CONGENITAL HEART FUTURES ACT

Congenital heart defects are the most common and most deadly group of birth defects and affect nearly 1% of all live births, ≈36,000 births a year. Childhood survival has risen from <20% in 1950 to >90% today. Because of the increase in childhood survival, the congenital heart disease population increases by an estimated 5% every year. Approximately 800,000 children and 1,000,000 adults in the United States are living with congenital heart disease and require highly specialized lifelong cardiac care. Less than 10%

of adults living with complex congenital heart disease receive recommended cardiac care. Many people with congenital heart disease are unaware that they require lifelong specialized health surveillance. Delays in care can result in premature death and disability.

Despite the prevalence and seriousness of the disease, federal research, data collection, education, and awareness activities are limited. The strategic plan of the National Heart, Lung, and Blood Institute completed in 2007 notes that “successes over

several decades have enabled people with congenital heart diseases to live beyond childhood, but too often inadequate data are available to guide their treatment as adults.” The strategic plan for the Division of Cardiovascular Diseases at the National Heart, Lung and Blood Institute, completed in 2008, set goals for congenital heart disease research, including understanding the development and genetic basis of congenital heart disease, improving evidence-based care and treatment of children with congenital and acquired pediatric

heart disease, and improving evidence-based care and treatment of adults with congenital heart disease. This bill would amend the Public Health Service Act to coordinate federal congenital heart disease research efforts and to improve public education and awareness of congenital heart disease.

Sponsor: Sen Richard Durbin (D-IL)

Introduced 3/17/2009

Referred to the Committee on Health, Education, Labor, and Pensions

HR 1380: JOSH MILLER HELPING EVERYONE ACCESS RESPONSIVE TREATMENT IN SCHOOLS (HEARTS) ACT OF 2009

This legislation would award matching grants to local educational agencies to purchase automated external defibrillators (AEDs) for use in their schools and provide training for at least 5 adult employees or volunteers at each school where an AED is to be used in its use and in cardiopulmonary resuscitation. This legislation also requires

grant applicants to demonstrate that the AEDs are integrated into the schools’ emergency response procedures and that emergency services personnel are notified of their locations. Grant priority is given to schools that lack an AED; typically have a substantial number of students, staff, and visitors present during the day; generally have a longer

wait for emergency medical services than other public facilities in the community; and have not received funds under the Rural Access to Emergency Devices Act.

This bill is named for Josh Miller, a 15-year-old high school football player from Barberton, Ohio, who suffered cardiac arrest during the last game of the

2000 season and died before he was reached with an AED.

Sponsor: Rep Betty Sutton (D-OH)

Introduced 3/6/2009

Referred to the Committee on Education and Labor

HR 1964: NATIONAL BLACK CLERGY FOR THE ELIMINATION OF HIV/AIDS ACT OF 2009

This legislation would make grants available to public health agencies and faith-based organizations to conduct HIV/AIDS prevention, testing, and related outreach activities to reduce HIV/AIDS in the African American community. It also provides family reunification services, mental health counseling, and

HIV/AIDS, sexually transmitted disease, and substance abuse testing and treatment to runaway or homeless youth or youth who are HIV-positive or at risk for HIV/AIDS.

This legislation would direct the Secretary of Health and Human Services to submit an annual report to congress and

the president on the effect of HIV/AIDS in the African American community and study and report on the status of the HIV/AIDS epidemic among African Americans. It also expresses the sense of congress with respect to National Black Clergy HIV/AIDS Awareness Sunday; prevention of, testing for, and

treatment of HIV/AIDS by all federal agencies; and HIV testing of federal inmates by the Bureau of Prisons.

Sponsor: Rep Charles B. Rangel (D-NY)

Introduced 4/2/2009

Referred to the Committee on Energy and Commerce

CORRECTION

Ethn Dis. 2009;19:172–178.

Onukwugha EC, Shaya FT, Saunders E, Weir MR. Ethnic Disparities, Hospital Quality, and Discharges Against Medical Advice among Patients with Cardiovascular Disease. *Ethn Dis.* 2009;19:172–178.

Author name correction

Ebere Chukwu Onukwugha corrected to Eberechukwu Onukwugha, PhD

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