

**From the Journals: Interview with Wayne Riley
May 1, 2007**

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JACKIE JUDD: Dr. Wayne Riley thank you for joining us. Give us some background on why the Journal decided to devote and entire issue to the subject of healthcare in the aftermath of Katrina and Rita as well?

WAYNE RILEY, M.D., M.P.H.: Meharry Medical College has been very fortunate to have published this wonderful Journal of the Healthcare for the Poor and Underserved since 1990; and if you look back over the time of the journal's existence there is no more cataclysmic event that has happened with regard to the healthcare infrastructure of the nation than what we experienced post-Katrina in New Orleans and in the city's that assisted Katrina evacuees in obtaining healthcare. We thought that this particular issue of the journal would hopefully impact policy change and issue a clarion wake up call to the nation in terms of healthcare difficulties faced by the communities all over the Gulf Coast and more particularly the city of my birth and the city I still love, the city of New Orleans.

JACKIE JUDD: One of the things that struck me about this issue was the incredibly wide breath of articles that are included having to do with dental care, mental health, the state of the hospitals generally, mobile medical care and it goes on and on and on.

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WAYNE RILEY, M.D., M.P.H.: Well that was by intention. Our editor and the authors who contributed really took an expansive view of the healthcare analysis of the Katrina situation and it extended so far to the other cities that were impacted by the Katrina evacuees.

For example, we have a wonderful piece about the needs assessment of Katrina evacuees in metropolitan Denver, Colorado; which again highlights the fact that while Katrina was a localized focused phenomenon within New Orleans and the Gulf Coast it had a broad effect on a number of communities all over the nation. We thought by high lightening just how one community grappled with it and some other communities as well it really punctuates the point that this disaster in the healthcare infrastructure damage that was visited upon New Orleans and the Gulf Coast has national implications.

JACKIE JUDD: You had a very close up view of the events as you were a resident then of Houston and treated many of the people who fled from New Orleans. Are you surprised, disappointed, did you expect us to be at the point where we are now in terms of the rebuilding efforts?

WAYNE RILEY, M.D., M.P.H.: It's my experience with Katrina as I wrote in my front piece in the journal has been both personal and professional. I was privileged to be among the cadre of physicians in Houston, Texas who took care of evacuees from New Orleans. I also experienced it personally

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that I housed eight members of my own family in my own home in Houston who fled Katrina. This event in our lives whether you are from New Orleans or not or privileged to be among the professionals who took care of patients is one that will always be seared into our memory and our collective consciousness because it really was a time when in particular the city of Houston and Harris County Hospital district which I formally practiced and led its medical board really came together and showed how a community could rise to the occasion and come to the aid of fellow citizens who were displaced and who were in need of health and dental care and mental health services and a wide range of activities that were engaged in at Meharry Medical College. So it's a very special era in my professional career that I'll never forget and I use it as a platform to articulate a broad vision of how we in America can have an improved healthcare infrastructure and a better healthcare system that deals with not only disasters but could also be the platform for dealing with health disparities which is something that Meharry Medical College is very concerned about.

JACKIE JUDD: As you go through this journal specifically can you tell us what in it you found encouraging about the progress made and then what essay in it did you possibly find highlighted some reason for discouragement?

WAYNE RILEY, M.D., M.P.H.: Well, I think the, I made the point in my piece in the journal that the response has been

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stuttering and frustrating to many of us who know New Orleans, who know the Gulf Coast and who feel a strong sense of connectiveness to that wonderful city and the wonderful region.

I think for example one of the papers talks about the spiritual dimensions of how older African American Katrina survivors dealt with this from a spiritual point of view. Now, again one could possibly say that is not really a medical issue but if you know the strength of the faith life in African American communities the spirituality was clearly one of the coping mechanisms employed by African American Katrina survivors to get through a very stressful time in their life.

There is another article on emergency preparedness among home healthcare providers that serve the poor. There is a wonderful piece by Brad Gray and Kathy Hibbert who talk about the challenges of the hospital infrastructure in New Orleans.

The mental health aspects, we had two or three papers on the mental health aspects and even one wonderful paper on the media use and information needs of the disabled during a natural disaster.

So we think this is a seminal issue in the history of the Journal of the Health Care for the Poor and Underserved. Yet again our intention as an institution and as under the leadership of Dr. Ginger Brennan that this would be a clarion call to the nation to really focus at least on restoring the healthcare infrastructure of the region as we continue to build

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the other aspects of the recovery in New Orleans and the Gulf Coast.

JACKIE JUDD: And you write in your own essay as part of that renewal of the city the medical, dental and healthcare renaissance of New Orleans should and must be a national priority. You write that, you talk about the need for a clarion call. I presume you think that the current efforts devoted to rebuilding the infrastructure aren't sufficient.

WAYNE RILEY, M.D., M.P.H.: No, I do not think they are sufficient. I think there have been some factless approaches to rebuilding the healthcare infrastructure. There has been some controversy about the plan whether to rebuild Charity Hospital which is the major safety net provider in New Orleans and the whole state of Louisiana. The VA hospital is not to be recoverable in its current form and there have been again some frustrating approaches to rebuilding the VA.

Again, my point and the point of the editor and many of the authors of these papers is that look this is a disaster that needs a concerted effort by state, local, federal government, philanthropy and really needs to be one of the underpinnings of the return of the region. No matter what happens in New Orleans if you build 10,000 houses and get rid of all the mobile trailers. If there is no healthcare infrastructure to serve the people who return then that recovery will be in some respects arrested development.

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JACKIE JUDD: Dr. Riley, thank you very much. It's a really fascinating and ambitious issue of the journal.

WAYNE RILEY, M.D., M.P.H.: Thank you. We are very proud to participate in this very important national dialogue and the pages of this wonderful journal.

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