



By summer 2017, greater access to health care will be a reality throughout our region.

# HealthImpacts

THE NEWSLETTER OF THE ANMED HEALTH FOUNDATION FALL 2016

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## Mobilizing technology for community-wide health

IT'S NO SECRET that digital technologies are driving the way we do virtually everything, from communicating on smartphones and tablets to digital access to music and movies to automated manufacturing and warehousing systems to advances in healthcare diagnostics and treatment that would have been unimaginable just a few years ago. It's become so commonplace, in fact, most of us now take "mobile access" for granted. We expect fast, easy access to what we need, when we need it – at home, at work, in transit, at any time of day or night.

So with all this mobility and connectivity, why would AnMed Health need a mobile diagnostic unit? Don't citizens already have ways to access top-notch medical care?

That's a complex question, and its answer involves a complex set of social, demographic, and, yes, technological factors, some of which are unique to our area, some of which are more universal, and some of which depend on how healthcare "access" is defined specifically. Here

are several key accessibility issues that AnMed Health's Mobile Diagnostic Unit is designed to address:

**Proximity.** Obviously, access to medical care often depends on where medical facilities are located. Anderson County covers 757 square miles, and with a population that's nearing 200,000, it's the ninth largest county in South Carolina. For the 38% of our citizens who live in rural areas – from Iva to Pelzer, Townville to Piedmont, Honea Path to La France, and everywhere in between – that's a lot of ground to cover, especially for those who do not drive or have access to reliable transportation.

Of our county's total population, 51.8% are women. The median age of those females is 40, the age at which most medical professionals advise women to begin having regular mammograms. Women with a greater than average risk or family history of breast or ovarian cancer are

The Foundation embarked on an ambitious goal – raising \$1.2 million to purchase and equip the unit. With roughly \$900,000 in hand, the AnMed Health Mobile Diagnostic Unit has been ordered and is being outfitted with state-of-the-art medical equipment.

sometimes advised to begin even earlier. In South Carolina, breast cancer is the most commonly diagnosed cancer in women, regardless of race or ethnicity. Greater access to mammograms for early detection is helping to dramatically improve women's long-term survival rates.

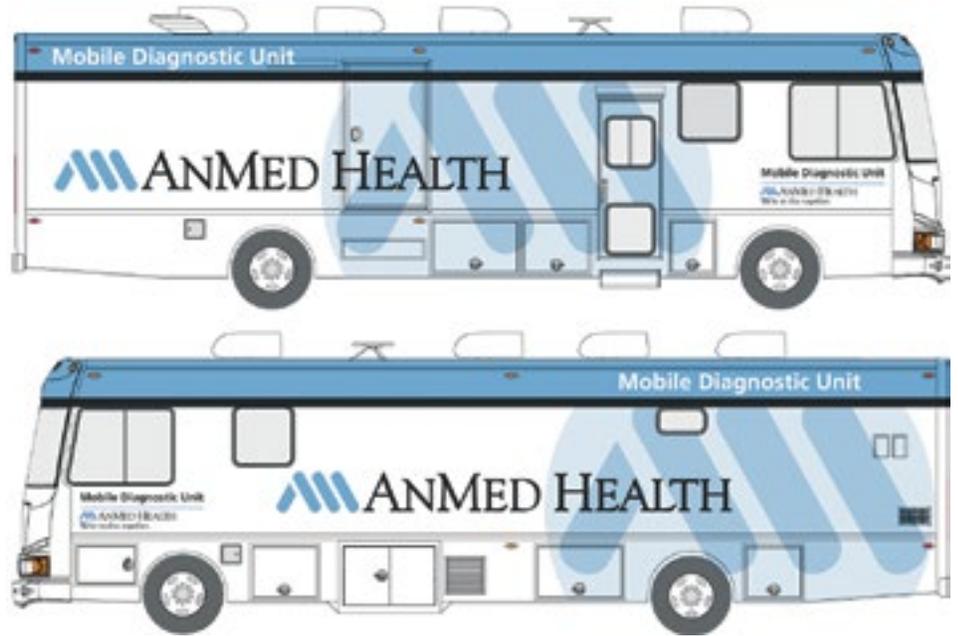
At the same time, 17% of Anderson County's population is aged 65 or older. Breast cancer is statistically associated with aging, but when breast cancer is detected and treated early, it is highly curable in older adults. In the US, nearly 1.5 million women aged 65 or older are breast cancer survivors.

While the region boasts a strong industrial, manufacturing and retail economy, many employees work inflexible schedules or unpredictable hours or juggle multiple jobs, making it difficult to make and keep screening appointments. Full-time workers, transportation providers, service-economy employees, family or child caregivers, and many other hard-working locals need the flexibility and access of on-site screening programs.

*AnMed Health's new mobile diagnostic unit will travel to congregations, communities, and workplaces to provide mammography and other screening opportunities to people who face time and transportation constraints that limit their access to preventive care. Most mobile mammograms can be done within 15-30 minutes.*

**Affordability.** More than 23% of 18-to-64 year olds in Anderson County are uninsured, and many more are underinsured. Even those with coverage may face high deductibles or co-pays that put routine screenings out of reach financially. Fear of needing high-cost prescriptions, treatments or therapies leads some people to avoid tests and screenings that might identify potential health problems. Embarrassment about existing medical bills, uncertainty about eligibility requirements, and lack of information about free screening programs, financial assistance and other resources also discourage people from scheduling screening appointments.

*AnMed Health's new mobile diagnostic unit will help eliminate the financial concerns that prevent people from protecting their health. AnMed Health works with Medicare, Medicaid and other third-party payers to fund operations and services, and AnMed Health Foundation's Cancer Care Assistance Fund, Robert B. Claytor Patient Assistance Fund, and other financial assistance funds help hundreds of patients each year receive care they could otherwise not afford.*



**Emotional safety.** For a range of valid reasons, visiting a medical facility is uncomfortable or intimidating for many people. Individuals may have had previous impersonal or disrespectful experiences in a medical setting. They may share cultural perceptions such as mistrust of authority, ethnic customs like a preference for herbal remedies or nontraditional treatments, or religious beliefs such as prescribed gender roles or modesty constraints. Language or other communications issues, educational and socioeconomic insecurities, even family dynamics – any or all of these factors can influence the decision whether or not to obtain medical screening.

*AnMed Health's new mobile diagnostic unit provides a safe zone with the operational and staffing flexibility to accommodate patients' needs for privacy, social support and respect. By offering screenings in familiar locales and in the comforting company of peer groups, the mobile unit attends to community and cultural needs with sensitivity and respect. Through courteous interactions and appropriate communications, the diagnostic unit's professional staff will build rapport and trust among Anderson's most underserved residents.*

**Flexibility.** The community is growing and changing, and medical needs will continue to change, as well. Advances in treatments and technologies will require new or different screening devices and diagnostic equipment to keep pace with medical science.

*AnMed Health carefully selected a mobile diagnostic unit with modular design features that allow cost-effective equipment upgrades and operational reconfigurations. AnMed Health's unit will initially focus on providing mammograms. Other screening capabilities may be added as funds become available.*



Auxiliary past president David Schonauer, left, and Board President Lee Luff present a check for \$100,000 to Ann Herbert, chairman of The AnMed Health Foundation.

## Auxiliary: Sharing is a two-way street

When AnMed Health Auxiliary presented a check for \$100,000 toward the purchase of a mobile diagnostic unit in early 2014, it spoke volumes about the generosity of those who volunteer their time and money to better the Anderson community. When the Auxiliary donated \$65,000 in 2015, the magnanimity of the unexpected gift left many speechless.

Board President Lee Luff calls it a kind of collective motivation. "Seeing and understanding the need made us all want to participate further to see that important goal reached," he says. "They say it takes a village... and for the Anderson community, we are the village."

With 125 active volunteers led by a nine-member Board, the Auxiliary is the Foundation's hands-on workforce, raising money mainly through two hospital gift shops and four annual pop-up sales. Since 1958, the Auxiliary has generated more than \$5 million for Foundation causes.

So why hasn't the Anderson community come together to meet the full \$1.2 million needed to put the MDU on the road? One factor might be misconceptions about the need, as well as about AnMed Health's financial position. "AnMed Health is a major employer here, so when Anderson needs something, it goes to AnMed Health for financial help," Luff says. "And AnMed Health has always provided services to those in need."

But the need for support goes both ways, Luff says. "This is something tangible we can do for the benefit of our fellow citizens."

"We should all want to participate."

## Breast Cancer

# Awareness is good. Action is better.

**AMONG WOMEN**, breast cancer is second only to skin cancer in occurrence. That's why using sunscreen is now second nature to many women, because it's one of the best ways to prevent skin cancer.

But too many of us don't realize that there are also important steps we can take to help prevent breast cancer.

According to the World Health Organization, fully one-third of all cancer cases are preventable. So while it's great to be aware of your breast cancer risk factors, taking action to reduce those risks is an even better way to take charge of your breast health.

Of course, not all risk factors, such as age, race, family history and inherited genetic changes, can be avoided, but some of the lifestyle changes you can make to avoid preventable cancers include:

• **Drink less alcohol.** Drinking alcoholic beverages leads to increased risk of breast cancer. For women, it's best to limit yourself to



less than one drink per day. Not drinking alcohol at all is even better.

• **Don't smoke.** Use of cigarettes and tobacco products is linked to increased cancer risk, especially in premenopausal women.



If you smoke, stop. If you don't, don't start.

• **Watch your weight.** Being overweight or obese increases the risk of developing breast cancer, especially if the weight is gained in mid-life or later. Talk to your doctor about the best ways to lose a few pounds and maintain a healthy weight.



• **Exercise more.** Physical activity not only helps you control your weight, it helps prevent cancer. As little as

30 minutes of brisk walking each day significantly reduces risks, and the more frequent and intense your exercise, the more protection it provides.



• **Breast-feed.** Breast-feeding for a total of at least one year seems to help protect women from breast cancer, most likely because nursing temporarily lowers hormone levels. Breast-feeding for longer offers even more protection.

• **Limit hormone exposure.** The younger a woman is when menstruation begins, and the older she is when it ends, the greater her risk of developing breast cancer. Because estrogen levels are lower during pregnancy, women who never become pregnant or become pregnant later than age 35 are also at greater risk. Taken for longer than 3-5 years, combination hormone replacement therapy (HRT/HT that combines estrogen with progestin) increases breast cancer risk, as well. Talk to your doctor about cumulative hormone

exposure and the most appropriate type, dosage and duration of therapy for you.

• **Eat smart.** Focus your diet on plant-based foods, such as fruits and non-starchy vegetables, whole grains, beans and legumes, and healthy fats and proteins, such as olive oil, nuts and seeds,



and fresh fish. Limit red meat, and avoid processed meats (like hot dogs, deli meats and sausage), fast food, and packaged foods, such as chips, cookies, fries and doughnuts. Choose smaller portions at mealtime and cut out sugary, starchy snacks. Your body will find many ways to thank you.

Not only can these healthy lifestyle changes reduce your cancer risk, they can help make treatment easier and recovery faster if you do develop cancer. Where's the risk in that?

\* SOURCE: Based on information published by the World Health Organization, American Cancer Society, Mayo Clinic and other cancer prevention organizations.

# Who is that young mother reaching out to her child?

By John A. Miller, Jr.  
President Emeritus, AnMed Health

**TODAY, HER NAME** is widely recognized as the founder of the hospital that is now AnMed Health, but in 1903, Virginia Lee “Jennie” Kramer Gilmer was a 27-year old mother in distressed labor with her second child. Frightened, she made a promise to herself and her city: Anderson would have a hospital. She shared her plans with a small group of women, and the Anderson County Hospital Association was born.

On August 20, 1908, Mrs. Gilmer’s vision became reality, when a 25-bed hospital opened and began its healing work. A century later, on August 20, 2008, a beautiful bronze mother-and-child sculpture was dedicated in her honor and in celebration of AnMed Health’s 100 years of service to our community.

The hospital Mrs. Gilmer envisioned has been a lifesaver for our region. But she’s not alone in leaving a valuable legacy. Others have contributed, sometimes quite literally and often very practically, as well. An excellent example is Charles Ezra Daniel, who served as a hospital trustee during the 1930s and 40s.

By 1944, the strains of World War II were causing severe shortages of staff and supplies. The weak depression and post-depression economy also brought more charity patients to the hospital. As the Board of Trustees undertook



Charles E. Daniel

to address the crisis, a strong visionary leader emerged. Charles Daniel, founder of Daniel Construction Company, stepped up.

Born in 1895 in Elberton, Georgia, Daniel moved with family to Anderson when he



Bronze sculpture of Jennie Kramer Gilmer, created by sculptor Zan Wells, dedicated in 2008, and inscribed, “Out of Whose Vision, Leadership and Love to Humanity was Born a New Hospital.”

was just three. He studied at The Citadel and served as a lieutenant in the infantry during World War I. Upon return to Anderson, he joined Townsend Lumber Company, married Homozel “Mickey” Mickel, and, in 1935, began Daniel Construction Company.

Though Daniel had moved his company’s headquarters to Greenville in 1942, he was inspired to action. He offered to have his now-thriving Daniel International Corporation build a new hospital at a cost of \$1 million, a bargain price, personally donated \$100,000, and enthusiastically raised money in the community. With help from The Duke Endowment, the goal was met, and the new eight-story building opened in 1947.

Like the man himself, the “Daniel Wing” towered over the city and remains at the heart of AnMed Health, its outline still visible from Fant Street vantage points.

Upon Daniel’s death, Samuel Prince, AnMed trustee and former dean of the

University of South Carolina School of Law, declared:

“To the great spirit of Charles E. Daniel, the Board of Trustees ...acknowledges a debt beyond our ability to pay. Working within the ambit of his soul, his vision and enthusiasm, the hospital grew.”

“We owe a debt of major gratitude to Charlie for his leadership and inspiration,” he continued. “His financial contributions were among the largest. He built all these buildings, did all of this construction work without a penny coming to him or his company beyond the actual cost of construction.”

We, too, are grateful for his selfless and enduring vision, much like that of the “Bronze Lady,” who started it all so many years before.



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To inspire generous charitable giving that strengthens and sustains excellent healthcare through the AnMed Health System.

AnMed Health Foundation is a 501(c)(3) not-for-profit organization that provides fundraising support for community programs and initiatives at AnMed Health. The Foundation welcomes donations from individuals, families and corporations to further our mission and to ensure that AnMed Health can continue to provide services that improve the health and lives of the people in our community.