

Children Help Themselves by Helping Others

BY SHERRY BOSCHERT

EXPERT ANALYSIS FROM THE ANNUAL MEETING OF THE AMERICAN ACADEMY OF PEDIATRICS

SAN FRANCISCO – Look around at the next black-tie fundraiser for your hospital. See any children?

Dr. Ronald Marino, director of general pediatrics at Winthrop-University Hospital, Mineola, N.Y., saw only adults at hospital benefit events. He realized



Cast a wide net for organizers and participants. 'You'll find that it just takes off on its own once it gets going.'

DR. MARINO

that involving children in supporting his department could be a win-win-win for the participants, the patients, and the community.

He picked one of his passions – swimming – as a focus for a new event and launched an annual swim-a-thon that has raised more than \$120,000 over the past 9 years. The funds benefit the hospital's Child Life Program, which gives pediatric patients the opportunity to talk at length with hospital physicians and staff about the tests and procedures they're facing in an effort to dispel some of their fears.

The money is a small part of the benefits produced by the swim-a-thon, he said.

The children who help organize and participate in the event learn ways to become involved in their community. They gain leadership and planning skills, get public speaking experience as they promote the event, and learn about health care careers from their adult co-

organizers. In addition, the children design the event logo and are involved in creating publicity materials, gaining practical experience. Dr. Marino said he has seen boosts to the children's pride and self-esteem, and the focus on swimming promotes their health and well-being.

A month or so after the day of swimming, an awards celebration for all who were involved features public recognition for participants, food, music, and a clown or superhero entertainer, followed by a tour of the hospital and its pediatric services.

"Kids really love seeing what nurseries look like, what the pediatric wards look like. They love seeing where their money goes," Dr. Marino said.

The event also has inspired some of the hospital's doctors, nurses, and staff to support children's health and development outside of the clinical setting. One of the nurse participants this year decided to mentor a child with Down syndrome separately from the swim-a-thon, to teach the child how to swim.

Swimming itself is a great equalizer, Dr. Marino added. Some children with disabilities that severely limit their motion

on land become more graceful in the pool. "So often in our society we're separated from people with disabilities," he noted.

Plus, because the usual signs of socioeconomic status are left in the locker room when swimmers shed their clothing for swim-suits, "it demonstrates that we're all the same,"

Dr. Marino said. In addition to getting 95 swimmers to take part this year, targeted outreach to the community has drawn people of all ages and races to participate in many different roles.

The swim-a-thon has attracted community support from corporations, life-guards, swim coaches, bands that play during the event, raffle donors, the medical school's pediatrics club, and many



Richard Obiol and his sons Jack and Justin participated in the swim-a-thon to raise funds for the Child Life Program.

volunteers who contribute in their own ways. One teenager who didn't swim made a slideshow to promote the swim-a-thon. Another nonswimmer started his own nonprofit organization to auction off sports memorabilia and donate the proceeds to charity, including the hospital.



Hospital staff Christian Burdick and Nicole Almeida, with a medical school volunteer (right), help run the swim-a-thon.

Swimmers are grouped in four categories by age, ranging from 4 years to more than 60 years of age. The minimal expenses of the event – for towels, pool rental, and some promotion – keep overhead low. Swimmers pay a small fee varying by age (from \$3 to \$10).

Physicians who want to start a similar event in their communities should pick one of their own passions as a focus, Dr. Marino advised: "For me, it was children, swimming, and community service. I put them all together." Try to make it a grassroots effort. Cast a wide net for organizers and participants, and build relationships in the process, he said. Start small, and be patient. "You'll find that it just takes off on its own once it gets going."

Events like the swim-a-thon help realize several aspects of the five key promises that our society should give to its children, Dr. Marino said – caring adults, safe places, a healthy start, an effective education, and opportunities to help others.

"Empowering kids strengthens our communities and ensures a brighter future," he said.

Dr. Marino said he had no pertinent conflicts of interest. ■

Primary Care Pay Is Much Lower Than Surgery, Specialty Care Pay

Primary care physicians receive the lowest reimbursement of all physician specialties, indicating a need for reforms that would increase incomes or reduce work hours for primary care physicians.

J. Paul Leigh, Ph.D., and colleagues at the University of California, Davis, used data from 6,381 physicians providing patient care in the 2004-2005 Community Tracking Study.

Medical specialties were divided into four categories: primary care; surgery; internal medicine/pediatric subspecialists; and an "other" category with physicians practicing in areas such as radiation oncology, emergency medicine, ophthalmology, and dermatology.

Wages of procedure-oriented specialists were approximately 36%-48% higher than those of primary care physicians, the investigators found.

Specifically, specialties with statistically higher-than-average wages perform neurologic, orthopedic, or ophthalmologic surgery, and use sophisticated technologies or administer expensive drugs in office settings, they found. Lower-paid specialties, meanwhile, were largely nonprocedural and relied instead on talking to and examining patients, they noted, adding that "the major exception is critical-care internal medicine."

Wages per hour for primary care physicians were about \$61, whereas surgeons earned about \$90 per hour and other procedure-oriented specialties earned close to \$88 per hour, the study said. Internal medicine subspecialists and pediatric subspecialists, meanwhile, earned slightly more than \$82 per hour (Arch. Intern. Med. 2010;170:1728-34).

—Jane Anderson

STATEMENT OF OWNERSHIP, MANAGEMENT and CIRCULATION (Required by 39 U.S.C. 3685). 1. Publication title: PEDIATRIC NEWS.; 2. Publication No. 0031-398X.; 3. Filing date: October 1, 2010.; 4. Issue frequency: Monthly.; 5. No. of issues published annually: 12.; 6. Annual subscription price: \$109.00.; 7. Complete mailing address of known office of publication: International Medical News Group, 60 Columbia Rd., Bldg. B, Morristown, NJ 07960.; 8. Complete mailing address of headquarters or general business office of publisher: International Medical News Group, 60 Columbia Rd., Bldg. B, Morristown, NJ 07960.; 9. Full names and complete mailing addresses of Publisher, Editor, and Managing Editor: President, IMNG, Alan J. Imhoff, IMNG, 60 Columbia Rd., Bldg. B, Morristown, NJ 07960; Executive Director, Editorial, Mary Jo M. Dales, IMNG, 5635 Fishers Lane, Suite 6000, Rockville, MD 20852; Managing Editor, Catherine Cooper Nellist, IMNG, 5635 Fishers Lane, Suite 6000, Rockville, MD 20852.; 10. Owner: Elsevier Inc., 360 Park Ave. South, New York, NY 10010.; 11. Known bondholders, mortgagees, and other security holders owning or holding 1 percent or more of total amount of bonds, mortgages or other securities: None.; 12. Tax Status: N/A.; 13. Publication name: PEDIATRIC NEWS.; 14. Issue date for circulation data below: September 15, 2010; 15. Extent and nature of circulation: Average no. copies each issue during preceding 12 months: a. Total number of copies (net press run) 51,333; b. Legitimate paid and/or requested distribution (by mail and outside the mail) (1) Outside County Paid/Requested Mail subscriptions stated on PS Form 3541. 27,023; (2) In-County Paid/Requested Mail Subscriptions stated on PS Form 3511. 0; (3) Sales through dealers and carriers, street vendors, counter sales, and other Paid or Requested Distribution Outside the USPS. 0; (4) Requested copies distributed by

other mail classes through the USPS. 0; c. Total paid and/or requested circulation 27,023; d. Nonrequested distribution (by mail and outside the mail). (1) Outside County Nonrequested copies stated on PS Form 3541. 24,266; (2) In-County Nonrequested copies stated on PS Form 3541. 0; (3) Nonrequested copies distributed through the USPS by other classes of mail. 0; (4) Non requested copies distributed outside the mail. 265; e. Total nonrequested distribution. 24,530; f. Total distribution. 51,554; g. Copies not distributed. 0; h. Total. 51,554; i. Percent paid and/or requested circulation. 52.4%; No. copies of single issue published nearest to filing date. a. Total number of copies (net press run) 51,357; b. Legitimate paid and/or requested distribution (by mail and outside the mail) (1) Outside County Paid/Requested Mail subscriptions stated on PS Form 3541. 23,570; (2) In-County Paid/Requested Mail Subscriptions stated on PS Form 3511. 0; (3) Sales through dealers and carriers, street vendors, counter sales, and other Paid or Requested Distribution Outside the USPS. 0; (4) Requested copies distributed by other mail classes through the USPS. 0; c. Total paid and/or requested circulation 23,570; d. Nonrequested distribution (by mail and outside the mail). (1) Outside County Nonrequested copies stated on PS Form 3541. 27,192; (2) In-County Nonrequested copies stated on PS Form 3541. 0; (3) Nonrequested copies distributed through the USPS by other classes of mail. 0; (4) Non requested copies distributed outside the mail. 595; e. Total nonrequested distribution. 27,787; f. Total distribution. 51,357; g. Copies not distributed. 0; h. Total. 51,357; i. Percent paid and/or requested circulation. 45.9%; 16. Publication of Statement of Ownership for a Requestor Publication is required and will be printed in the November 2010 issue of this publication. 17. Signature and title of Editor, Publisher, Business Manager or Owner: Alan J. Imhoff, President, IMNG.