[B.E. 100s]

JACKSON SECURITIES GROWS WITH MERGER

Union with Chicago-based Berean Capital combines business strengths and provides greater geographic coverage

ollowing a trend of expansion moves by other **BE 100s** companies, Jackson Securities L.L.C. (No. 7 on the **BE INVESTMENT BANKS** list with \$36.4 billion in total managed issues) merged with Berean Capital Inc. to form a firm with greater geographic coverage.

Announced June 8, the merger plans to capitalize on Jackson Securities' expertise in municipal bonds and its clients on the East Coast and in California and on Berean's strength in institutional brokerage and research services from clients located mostly in Midwestern and Southern states. The combined firm maintains the Jackson Securities name.

"What we're trying to do is build an institution that will stand the test of time and will continue to thrive if something happens to one or both of us," says Dudley Brown Jr., co-chair and CEO of the combined firm. Jackson Securities was founded by former Atlanta Mayor Maynard H. Jackson, who died in 2003. Brown founded Berean in 1991.

The new firm, with 40 employees, is headquartered in Atlanta and retains a strong presence in Chicago.

Looking at the way other large banks have been choosing to grow, such as the merger of J.P. Morgan Chase & Co. and Bank One Corp., Brown and Reuben McDaniel III, president and CEO



of Jackson Securities, say it didn't make sense for minorityowned firms not to put egos aside and form stronger companies with greater expertise in more business lines.

"Adding personnel to grow is very inefficient," McDaniel says, "because it takes months for them to get up and running." Both Brown and McDaniel say they would consider looking at further merger or acquisition opportunities for future expansions.

McDaniel expects the municipal bond business to remain strong at least through the end of 2005 because municipalities continue to take advantage of low interest rates to finance infrastructure projects. While the equity markets have been unstable in 2005, the increase in trading volume over the years provides an opportunity for the institutional trading side of the business, Brown says.

"If I can capture a percent or half of a percent [of trading volume], the numbers look quite good," Brown says.—Philana Patterson

[AROUND THE NATION]

TAKE A LOVED ONE FOR A CHECKUP

National campaign urges blacks to address healthcare disparity

One of the best gifts you can give a loved one is a trip to the doctor. The annual Take a Loved One for a Checkup Day is challenging African Americans to take charge of their healthcare needs and turn around some of the disparities in medical treatment.

"The program is designed to help people go to the doctor to make sure they are evaluated," says Dr. Olethia Chisolm, a specialist in internal medicine at the Houston-based Kelsey-Seybold Clinic, one of the medical facilities participating in the campaign.

Hosted by radio personality Tom Joyner, Take A Loved One for a Checkup Day is part of a national campaign sponsored by the U.S. Department of Health and Human Services that encourages individuals to see a healthcare professional on Sept. 20, 2005.

As it stands, there are significant differences between white and African American patients. Compared with whites, African Americans are more likely to be seen by physicians who had less experience (i.e., fewer years since completing training), according to a study titled Patient Race/Ethnicity and Quality of Patient-Physician Communication During Medical Visits.

The most glaring finding in the study, however, is that physicians are more likely to dominate the conversation when treating black patients, notes Dr. Rachel L. Johnson, an author of the study.

Johnson reported that during an average visit, physicians talked



43% more than black patients and 24% more than white patients. "Patient-centered communication, including greater patient input into the medical dialogue, has been associated with better patient recall of information, treatment adherence, satisfaction with care, and health outcomes," the report concludes, stating that the overall tone of medical visits for African Americans is less positive than it is for whites. Experts are hoping their campaign will change that.

"If nothing else, it's a conversation piece to make people aware of their healthcare needs," says Chisolm. —Brenda Porter