



NATIONAL PARTNERSHIP FOR ACTION (NPA) BLOG

Stay informed! On the NPA Blog, health equity leaders share their thoughts on pressing issues, news, and events related to the reduction of health disparities. Recent contributors include Regional Health Equity Council (RHEC) members. Click below to read recent posts:

- [Winning the Battle Against Health Disparities Through New Technology](#), by A.J. Chen, Co-Chair of the Region X Health Equity Council
- [From Corrections to Affordable Health Care: Empowering Our Returning Community Members](#), by Sheila Thorne, Co-Chair of the Region II Health Equity Council Cultural Competency Subcommittee
- [Ahead of the Curve: the Southeastern Health Equity Report Card](#), by Amirah Abdullah, Intern with the Southeastern Health Equity Council (Region IV)



Join the conversation by sharing these blog posts on social media and adding your comments on the NPA Blog website. If you would like to submit a blog post, please email Julia Krieger from Campaign Consultation, Inc. at krieger@campaignconsultation.com.



REGIONAL HIGHLIGHTS

Connecting with Youth in New England

To raise awareness about RHEC priorities and recruit youth to the council, the New England RHEC has been reaching out to organizations and institutions that serve youth, including the APHA (American Public Health Association) in November 2013 and the SNMA (Student National Medical Association) in January 2014. Currently, the RHEC is drafting outreach materials for universities, colleges, and nonprofits, to raise awareness of their youth recruitment efforts, and to educate these important stakeholders about health disparity issues in New



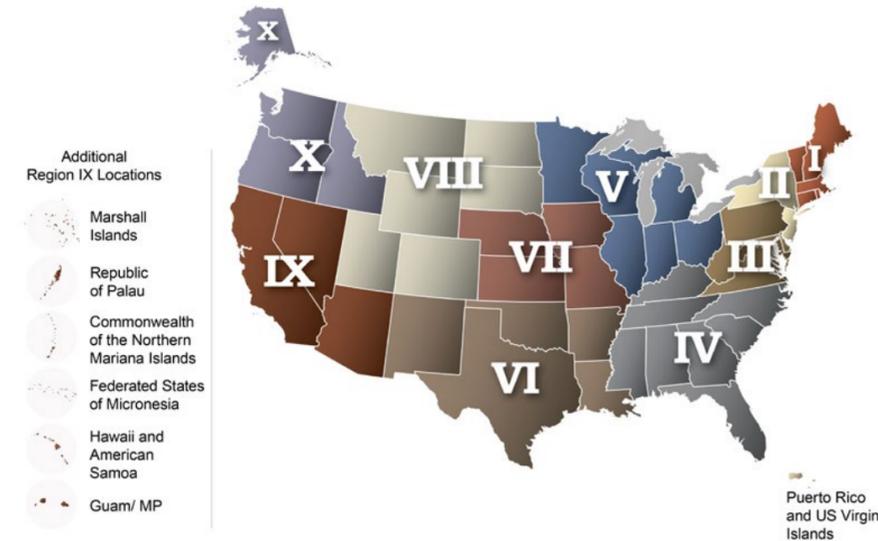
England, e.g., school dropout rates and other social determinants of health, as well as the role of youth empowerment and education in promoting healthy living.

Harnessing Data for Change: the SHEC's Health Equity Report Card

The **Southeastern Health Equity Council (SHEC)**, which represents the states in Region IV, has developed a health equity report card that presents findings on gaps in health care access, healthy food access, and cultural competency within the Southeastern region of the United States.

REGIONAL HIGHLIGHTS (cont)

10 REGIONAL HEALTH EQUITY COUNCILS



Among the key findings:

- Insurance rates among racial and ethnic minorities in the Southeast are lower than the national average.
- All of the Southeastern states scored an “F” in food security and scored poorly in their rates of fruit consumption, physical activity, obesity, and diabetes.
- Currently, no state law in the eight states covered by the SHEC requires cultural competency education for healthcare professionals.

The findings make a compelling case for Medicaid expansion, food-financing programs at the state and regional level, and the establishment of mandatory cultural competency education for health care professionals.

SHEC will use this information to spark discussion among public- and private-sector decision makers

about the systemic changes needed to achieve health equity. Visit the [SHEC website](#) to read the report card, register for the health equity report card webinar, and sign up for the SHEC email listserv.

Countdown to March 31, 2014: Bringing Affordable Care Act (ACA) Outreach and Education to Communities in Need

As the deadline for ACA enrollment approached—March 31, 2014—the Regional Health Equity Councils geared up their outreach and education efforts in communities across the nation.

- From October through December 2013, the **Region II Health Equity Council (RHEC II)** teamed up with radio stations WTHH, WKXW, and WRFY—in greater Philadelphia and across New Jersey—to disseminate a

Public Service Announcement (PSA) on the Affordable Care Act. The 60-second PSA used approachable and empowering language to educate uninsured populations in these areas about the benefits of the ACA. It directed listeners to the www.healthcare.gov website and hotline for more information. The 60-second PSA was shared on-air and streamed online.

- In collaboration with Bergen Community College (BCC) in New Jersey, **RHEC II** reached out to the “young invincible” demographic (18-34 years) with a “Community College Champions for Coverage” event, held on February 17. It was held at the Meadowlands Campus of BCC, a critical location for this type of outreach, since only 50% of BCC’s 17,000 students have health insurance. The RHEC worked with faculty members and student leaders to engage Latino, Korean, Veteran, and LGBT (Lesbian, Gay, Bisexual, and Transgender) student groups, and their faculty sponsors. Students designed T-shirts, posters, and banners to promote the event. For the 200 students who attended, it was an opportunity to learn how the Affordable Care Act benefits young people, and to sign up for health insurance coverage, with help from navigator organizations.

REGIONAL HIGHLIGHTS (cont)

- From April 10–23, the **SHEC** partnered with the Church of Christ's 29th Annual Winnie Jewel Wright Health Fair, where the SHEC disseminated information about oral health, nutrition, obesity prevention, and the Affordable Care Act (ACA). Over 2,000 participants registered to attend the event, which was held in Nashville, Tennessee. Health insurance navigators from the Tennessee Primary Care Association helped attendees to find an appropriate health plan, while SHEC representatives assisted in sharing information about the ACA. Among SHEC's outreach partners: Critical Learning Systems, Inc.; the DentaQuest Foundation; the Tennessee Primary Care Association; Healthy Kids & Teens, Inc./Camp Get Fit Foundation; and the Meharry College of Medicine School of Dentistry.
- In Ohio and Michigan, the **Great Lakes Regional Health Equity Council (Region V)** designed a social media campaign to encourage "young invincibles" to enroll in the insurance marketplace. With the help of Facebook and other social media, the project is educating young people about the ACA, using creative messages, videos, infographics, and other appealing design elements. Through this effort, the Great Lakes RHEC aims to create a network of community champions who will serve as ACA resource persons at the grassroots level.
- On February 12, the **Heartland Regional Health Equity Council (RHEC VII)** partnered with Grace Hill Health Center to provide ACA education to approximately 20 students, during a wellness fair at Harris-Stowe State University. As an ongoing effort prior to March 31st, the RHEC collaborated with Grace Hill Health Center and Harris-Stowe Free Tax Clinic to educate community members about the ACA and enroll them in insurance plans while they are waiting to be assisted with tax preparation. The Heartland RHEC, in collaboration with the City of St. Louis Health Department, also is reaching out to small businesses to notify them about opportunities for their employees to sign up for health insurance.

Lessons Learned, Planning Ahead: Charting a Course for 2014

Between October 2013 and January 2014, several RHECs hosted their Annual Review and Planning Sessions (ARPS) to review the prior year's activities—the successes and challenges—and map out their agendas for the coming year. Among the priorities and focus areas emerging from the RHECs:

- The **Region II Health Equity Council (RHEC II)** identified youth engagement and empowerment, health data and infrastructure, and ACA outreach as priority areas. They will continue working on an

- environmental scan of regional, state, and local data in 2014.
- The **SHEC** revised its mission statement to reflect the council's focus on policy. Their primary audience is regional policy/decision makers and funders. To that end, the council will work on the following activities in 2014: increasing funding for food financing initiatives in each state, incorporating culturally and linguistically appropriate services (CLAS) and best practice standards into healthcare professional certification and licensing requirements in each state, and scheduling events to raise awareness about the benefits of enrolling in the Affordable Care Act.
 - The **Great Lakes RHEC's** priorities for the year include ACA awareness, public policy, and strategic planning. They also will seek new RHEC members in 2014.
 - **RHEC IX** came out of their annual session re-invigorated, focused on health information technology, community health workers, and a regional environmental scan of data.

REGIONAL HIGHLIGHTS (cont)

- In 2014, the **Region X Health Equity Council (RHEC X)** plans to strengthen their communication efforts, focus on workforce development, finalize a regional blueprint for action, and expand their membership. Workforce development goals include a regional assessment of ongoing efforts to recruit minority nursing students, and a collaboration with the American College of Healthcare Executives to increase the diversity of applicants for healthcare management positions.

Connecting the Dots: the Heartland RHEC's Environmental Scan

The **Heartland RHEC (Region VII)** has released its environmental scan of local, state and regional data on health disparities and the social determinants of health. Key findings include:

- Unique regional challenges and disparities, such as a shortage of health care facilities, prevalence of tornadoes in rural impoverished areas, and high rates of obesity and poverty.
- Assets that can be leveraged, including a regional health care system with a solid national rating, relatively low unemployment, and high education levels among the region's foreign-born population.

The Heartland RHEC will use this information to encourage public policies and actions that promote health equity and eliminate health disparities. The environmental scan is available on the [Heartland RHEC website](#).

Wired For Change: RHEC Websites Now Online

Information is an important lever for change. The **New England RHEC**, the **SHEC**, the **Heartland RHEC** and **RHEC X** have launched websites to keep partners, communities, and other stakeholders informed of RHEC activities in the region. The websites also provide an online forum for RHECs, partners, and stakeholders to share information on regional health equity. Please visit your region's website to track the RHECs' efforts, contribute to the RHEC in your region, and learn more:

- [New England RHEC \(Region I\) website](#)
- [Southeastern Health Equity Council \(Region IV\) website](#)
 - [Heartland RHEC \(Region VII\) website](#)
 - [RHEC X website](#)



NATIONAL HIGHLIGHTS

Partnership for Youth: Health Education for a New Generation

The **Office of Minority Health** signed a Memorandum of Understanding (MOU) that will allow OMH and NPA partners to use Stanford University's "Public Health Advocacy" curriculum in their efforts to educate youth about health disparities and the social determinants of health. The curriculum is a product of the Stanford Medical Youth Science Program (SMYSP), part of the Prevention Research Center at Stanford's School of Medicine. Under the MOU, SMYSP experts will be available to help NPA partners adapt the curriculum for their youth education programs. The MOU also covers train-the-trainer sessions for NPA partners. The Stanford Medical Curriculum helps high school students to understand health disparities. Specifically, the goal of the curriculum is to familiarize youth with the concept of the social determinants of health, the challenges to good health, opportunities to improve health, and positive actions that lead to better personal and community health.

A Call to Action: Youth NPA Partners Needed!

The **Federal Interagency Health Equity Team's (FIHET's) Youth National Partnership for Action (yNPA) Workgroup** is seeking non-federal organizations who are interested in implementing the yNPA as a model program.

Typically, a youth NPA partner represents an organization that provides extracurricular, training/education, or development programs to youth and future leaders. Partners may include high schools, graduate and undergraduate programs, and youth empowerment or leadership programs. Federal and non-federal agencies are eligible, as are boards of education and nonprofits focused on youth (K-12). Partners may use and adapt the SMYSP curriculum under the MOU developed by the Office of Minority Health, in partnership with Stanford University School of Medicine.

The NPA aims to strengthen and broaden all levels of leadership that address health disparities in the United States. The yNPA strategy for achieving this goal is to:

- Prepare young people to become future leaders and practitioners by educating them about health disparities and the social determinants of health; and
- Engage youth in health equity work.

For more opportunities on partnership, please contact the FIHET yNPA workgroup co-chairs, Diane Adger-Johnson (Dadger@niaid.nih.gov) and Mia Bailey (Mia.Bailey@acf.hhs.gov).

FIHET Data Project: The Facts at Your Fingertips

The **FIHET Data Workgroup** is identifying publically available federal databases on health disparities research and programs. This collaborative effort involves

staff from federal agencies such as the U.S. Department of Health and Human Services, the Veterans Administration, U.S. Census Bureau, Department of Transportation, and the Environmental Protection Agency.

The workgroup has assembled and characterized over 100 federal datasets. The final compendium will highlight federal data sets that can be studied for insights on the social determinants of health and health disparities. It also will increase meaningful use of the data and stimulate data collection to address specific gaps related to health disparities and the social determinants of health.

NPA Partner Activities

The **National Conference of State Legislatures (NCSL)** maintains a comprehensive and user-friendly **legislative tracking system** for bills that, if enacted into law, would affect health disparities. The NCSL system also tracks legislation on the social determinants of health, and bills aimed at increasing health equity.



In addition, NCSL has created a **new policy briefing** for legislators and legislative staff, to raise awareness about the health care needs of the nearly five million people in the U.S. who fall into the "Coverage Gap"—those with incomes below 100% of the federal poverty level (FPL). These individuals—over half of which are people of color—live in states without Medicaid expansions; not only are they ineligible for Medicaid, they are too poor to qualify for ACA subsidies to purchase health insurance through the exchanges or health care marketplaces, according to a **study** by the Kaiser Family Foundation (KFF). NCSL's briefing breaks down the Coverage Gap by race/ethnicity and by state, and discusses the consumer costs of health disparities.

The **Mississippi Rural Health Association (MHRA)** is partnering with the **Southeastern Health Equity Council**, and will serve as a fiscal sponsor for the SHEC. The partnership is the product of several months of discussions that revealed how closely their missions are aligned: both groups are striving to achieve health equity. Having finalized the partnership in July 2013, the MHRA and SHEC look forward to working together to eliminate health disparities in the Southeastern U.S.

UPCOMING CONFERENCES AND EVENTS

- April 2014 is Minority Health Month! This year's theme, "Prevention is Power: Taking Action for Health Equity," highlights the concept of prevention as the key to reducing health disparities and achieving health equity. To learn more about Minority Health Month activities, tools, and resources, visit minorityhealth.hhs.gov.
- Explore the connections between community planning and health equity during the American Planning Association Conference, April 26–30 in Atlanta, Georgia. Every year, more than 5,000 planners and related professionals convene to discuss topics including urban revitalization, environmental planning, health equity in the built environment, safety, and access to healthy food. For more information, visit the American Planning Association website.
- Día de la Mujer Latina will host the "Expanding the Role of Community Health Workers in Advancing Health Equity Summit," April 25–26, 2014, in Houston, Texas, at the Foundation of Praise Center. The conference will cover topics in Spanish and English, including: essential health benefits in the ACA, patient navigation, and the social determinants of health. For further information, please contact Venus Gines, Executive Director of Día de la Mujer Latina, Inc., and co-chair of the **Southwest RHEC (Region VI)**, at venusgines@gmail.com.



FEDERAL FOCUS: USDA TACKLES HEALTH DISAPARITIES

Almost sixteen million children live in households with food insecurity; for many of them, school meals may be the only healthy food they eat all day. The [U.S. Department of Agriculture](#) is working to end hunger and improve health in the United States by harnessing the nation's agricultural abundance through 15 federal programs, such as the Supplemental Assistance Program (SNAP), Women, Infants and Children (WIC), and the National School Lunch Program (NSLP).

In 2010, USDA launched the [StrikeForce](#) for Rural Growth and Opportunity, to ensure that rural America's underserved communities have equal access to all USDA programs. Since then, StrikeForce teams have fanned out across 20 states, working to increase investment in rural communities through intensive outreach: providing heightened funding, technical assistance, and other resources in poverty-stricken communities. By increasing access to healthy food in high-poverty areas, the USDA is helping to reduce health disparities in rural America.



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To find out more about the NPA and to learn how you can get involved, please contact us at npainfo@minorityhealth.hhs.gov

TRIBAL HIGHLIGHTS

The 2014 American Indian Unity Conference was held in Raleigh, North Carolina, March 13-15, 2014. The purpose was to present an action agenda that will bring together the voices and resources of American Indians and non-Indians alike, to continue addressing the economic, educational, social, cultural, political, spiritual, and health needs of American Indians.

In partnership with Gregory A. Richardson, Executive Director of the North Carolina Commission on Indian Affairs, the **SHEC** provided an ACA Awareness booth at the event. It was managed by staff from Enroll America, and featured an ACA navigator from Legal Aid in Triangle, North Carolina, who helped participants sign up for health insurance.



In the NPA Spotlight: OsteoCHAMPS

This section highlights outstanding and innovative efforts to address critical health disparities. In this month's spotlight: Michigan State University's OsteoCHAMPS (**Osteopathic Careers in Health And Medicine Program Services**) program. Started in 2000 with one Detroit high school and a seed grant from Michigan State University's College of Osteopathic Medicine (MSUCOM), OsteoCHAMPS aims to draw more disadvantaged youth into healthcare professions, to serve communities in need.

The program is economically and geographically diverse: many income brackets are represented, and participants hail from big cities like Detroit, and rural towns like Muskegon and Pontiac. Most participants are young, African-American females from urban communities.

OsteoCHAMPS activities run year-round, starting with a two-week summer academic session on the MSU campus for rising 10th and 11th graders who are considering health-related careers. The program includes an intensive pre-college curriculum that covers chemistry, math, writing, physics, and human anatomy—essential areas of study for health professionals, and subjects about which some students initially expressed anxiety. This program builds their confidence as it builds the core competencies they need to succeed.

Participants are paired with college students who serve as tutors and counselors, helping participants with homework and planned



extracurricular activities, and introducing them to college life. They also are mentored by osteopathic medical students ("Big Siblings") who demonstrate how to do a medical exam; each participant receives a "Doctor Kit" equipped with instruments for physical examination. Working in teams, students conduct research and present findings on topics such as head injuries, bullying, electronic waste, and cardiovascular disease.

In addition to the summer academic session, OsteoCHAMPS provides an undergraduate admissions seminar for 12th graders, offers academic advising and tutoring for undergrads at MSU, and visits schools in partnering communities. Since its inception, 466 students have participated in the program, with 103 returning for a second summer. Of those participants, four have graduated as physicians, 30 have become nurses, and five have earned other graduate degrees. Many OsteoCHAMPS alumni currently attend medical school, professional school, or a four-year college or university. Several program graduates report having returned to Detroit and Muskegon to work with low-income populations and give back to their communities.