Engaging Our Communities: The Importance of Addressing Health Inequities Early in Life

The United Hospital Fund: The *Pediatrics for an Equitable Development Start (PEDS) Learning Network*
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Director, Office of Minority Health & Health Disparities Prevention
Anyone who does anything to help a child is a hero to me.” —

Fred Rogers, television personality
Office of Minority Health and Health Disparities Prevention

- Works across the Department’s programs to advance policies and support programs and initiatives that promote high quality, accessible, patient-centered, and culturally and linguistically appropriate care for all New Yorkers.

- Partners with government systems, public and private agencies, and communities to identify and realize opportunities towards eliminating health disparities and achieving health equity.

- Works with The Minority Health Council (MHC) to develop policies to address the broader social and economic factors that lead to poor health.

- Identifies “Section §240 Minority Areas” (Counties or service areas with non-white populations of 40% or more), to facilitate focusing resources to those areas.
Office of Minority Health and Health Disparities Prevention

The Office of Minority Health (OMH) in New York was established by Public Health Law in 1992 and became operational in 1994. The New York OMH is charged with the following responsibilities:

• Promote, support, and conduct research to improve and enhance the health of minority populations.
• Serve as a liaison and advocate on minority health matters in conjunction with the Minority Health Council.
• Assist medical schools and state agencies to develop comprehensive programs that increase the diversity of the health care workforce.
• Integrate and coordinate state health care grant and loan programs.
• Promote and support community strategic planning to improve health equity and health care services within minority communities.
• Assess the impact of programs, regulations, and policies on minority health services.
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<td>- First Nations Planning Initiative</td>
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<td>- Akwasasne Drop-In Center</td>
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New York State by Race & Ethnicity

- Hispanic or Latino: 18.9%
- White: 55.9%
- Black or African American: 14.3%
- Asian: 8.2%
- Other race: 0.4%
- American Indian and Alaska Native: 0.2%
- 2 or more races: 1.9%

Source: U.S. Census Bureau, 2014-2018 American Community Survey 5-Year Estimates
Obesity: Higher among Hispanics/Latinos

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<th>Category</th>
<th>Percentage</th>
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<tr>
<td>New York State</td>
<td>27.1%</td>
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<tr>
<td>Hispanic or Latino</td>
<td>29.4%</td>
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<tr>
<td>White non-Hispanic</td>
<td>26.3%</td>
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Source: 2019 BRFSS
Diabetes: Higher among Hispanics/Latinos

- New York State: 10.5%
- Hispanic or Latino: 12.8%
- White non-Hispanic: 8.5%

Source: 2019 BRFSS
Asthma (Currently): Higher among Hispanics/Latinos

Source: 2019 BRFSS
Addressing Social determinants

https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health
“You grow up in a community with abandoned homes, a jobless rate of over 25 percent, underfunded schools, and you stand outside your home, look at the city's gleaming downtown skyline, at its prosperity, and you know your place in the world.”

— Alex Kotlowitz, *An American Summer: Love and Death in Chicago*
Dimensions of Diversity

- Age
- Mental / Physical Abilities and Characteristics
- Race
- Ethnicity
- Gender
- Sexual Orientation
Health Literacy
Cultural Competence
Racial and Health Equity
Language Access
Promoting Health Equity

Patient centered care is communication based and the frontline to addressing issues contributing to health disparities.

When we do not speak the language of the patient we must use an additional set of skills to continue to provide excellent, patient-centered care.

Clear and culturally and linguistically appropriate communication is key to the provision of quality health services.
Examples from the field
Clear messages?

Is this culturally appropriate?
Clear messages?

What does a safe sleep environment look like?

- Use a firm sleep surface, such as a mattress with a safety-approved crib, covered by a fitted sheet.
- Do not use pillows, blankets, sheepkins, or crib bumpers anywhere in your baby’s sleep area.
- Keep soft objects, toys, and loose bedding out of your baby’s sleep area.
- Do not smoke or use any smoke around your baby.
- Make sure nothing covers the baby’s head.
- Always place your baby on his or her back to sleep, the legs and arms relaxed.
- Dress your baby in light sleep clothing, such as a one-piece sleeper, and do not use a blanket.
- Baby should not sleep in an adult bed, on a couch, or on a chair alone, with you, or with anyone else.

For more information on safe sleep guidelines, contact the Consumer Product Safety Commission at 1-800-638-2772 or visit https://www.cpsc.gov.
Measurement?
Effective Communication?
“A person's a person, no matter how small.”
— Dr. Seuss
Thank You!

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