



**Department  
of Health**

# **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*  
September 24, 2020**

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Director, Office of Minority Health & Health Disparities Prevention

# Office of Minority Health and 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

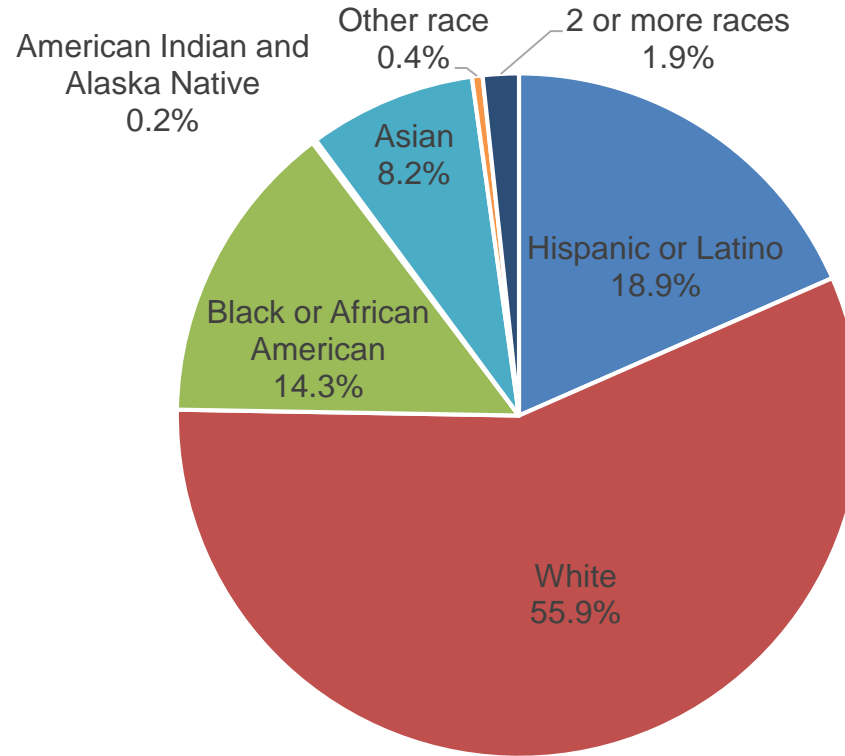
The Office of Minority Health (OMH) in New York was established by Public Health Law in 1992 and became operational in 1994. The New York OMH is charged with the following responsibilities:

- 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.

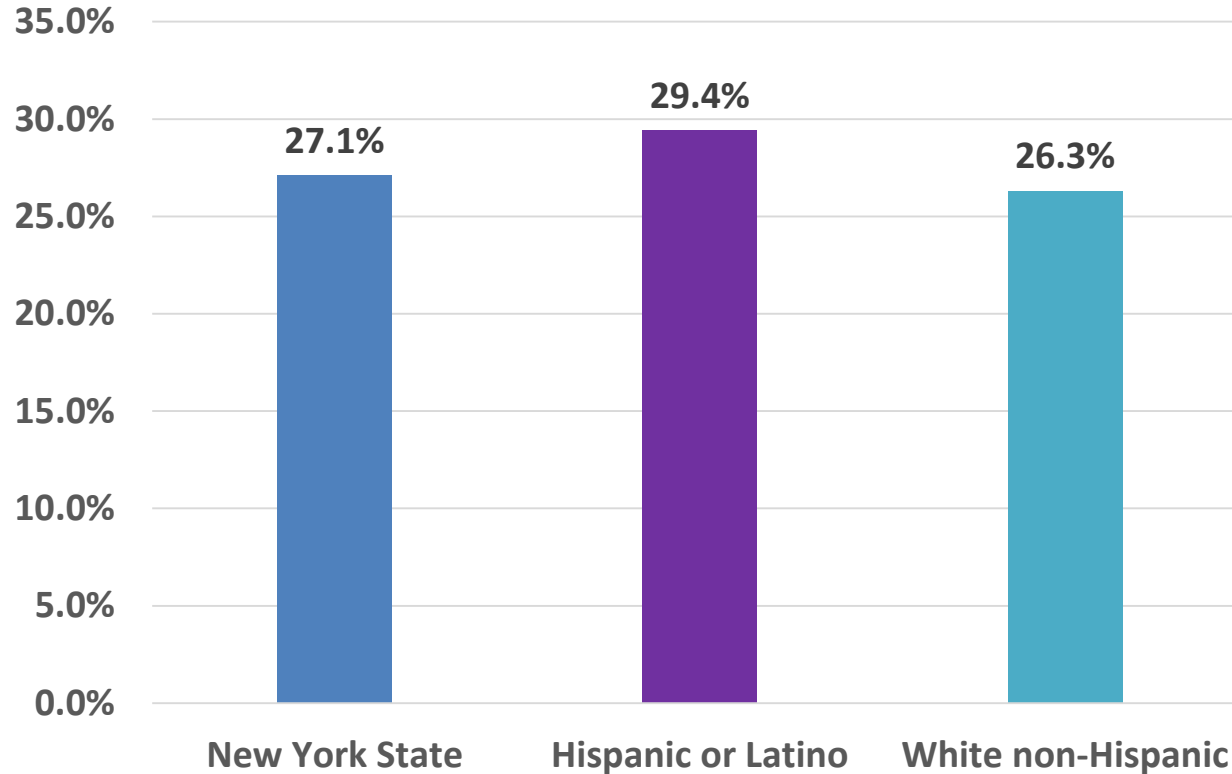
OMH-HDP Core Programs	OMH-HDP Operational Tasks and Projects	DOH Initiatives, Projects and Requests	External Initiatives, Projects and Requests
<p>State Partnership Program</p> <p>Latino Health Outreach Initiative</p> <p>Minority Male Wellness Initiative</p> <p>Mentorship in Medicine and Other Health Professions</p> <p>First Nations Programming</p> <ul style="list-style-type: none"> <li>First Nations Planning Initiative</li> <li>Akwasasne Drop-In Center</li> </ul>	<p>Mentorship Program</p> <p>Minority Health Council</p> <p>OMH-HDP eNewsletter</p> <p>Health Equity Reports</p> <p>Contract Management</p>	<p>Cultural Competency Assessment</p> <p>Prevention Agenda</p> <p>CHA/CHIP Reviews</p> <p>RFA/RFP Development &amp; Application/Proposal Reviews</p> <p>Other Inter-agency collaborations (planning, facilitation, presentations, etc.)</p>	<p>National Association Of State Offices of Minority Health</p> <p>Health Literacy in Schools</p> <p>Albany City School District Pre-K Programming: Obesity Prevention and Stress Reduction</p> <p>Troy City School District Pre-K Programming: Obesity Prevention</p>



# New York State by Race & Ethnicity

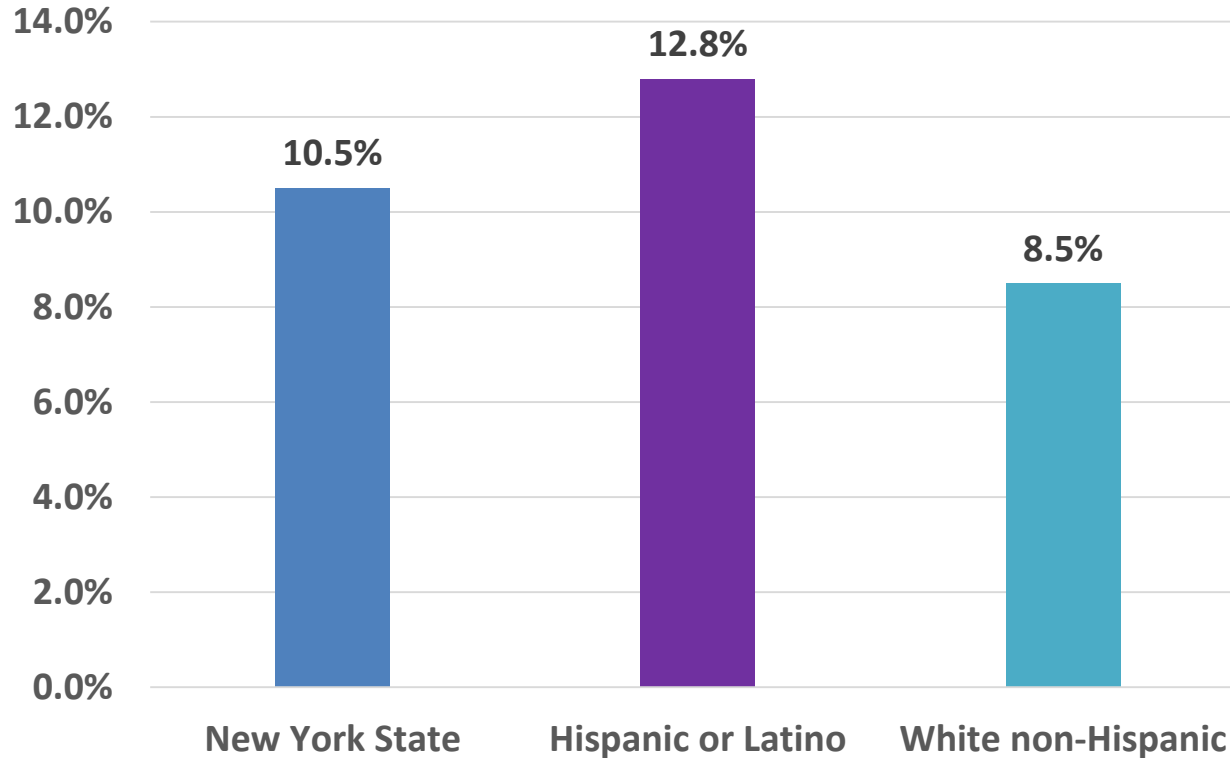


## Obesity: Higher among Hispanics/Latinos



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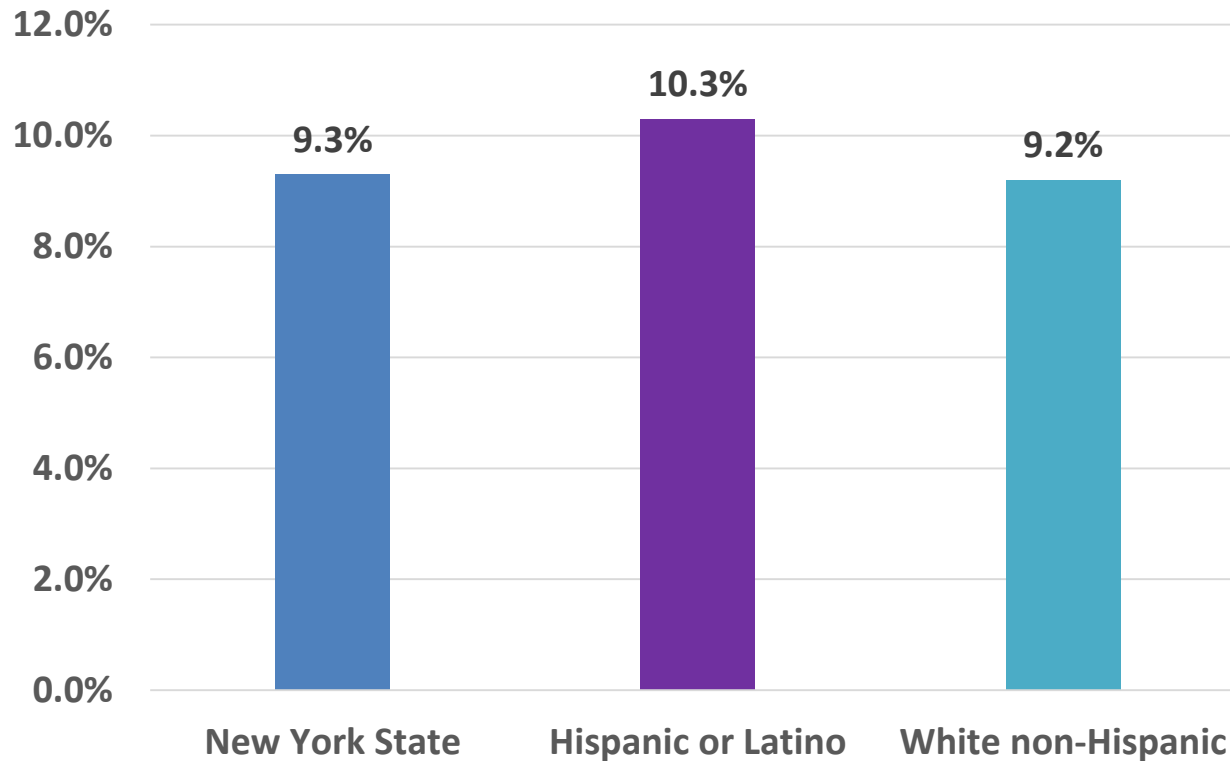
## Diabetes: Higher among Hispanics/Latinos



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## Asthma (Currently): Higher among Hispanics/Latinos



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# Addressing Social determinants

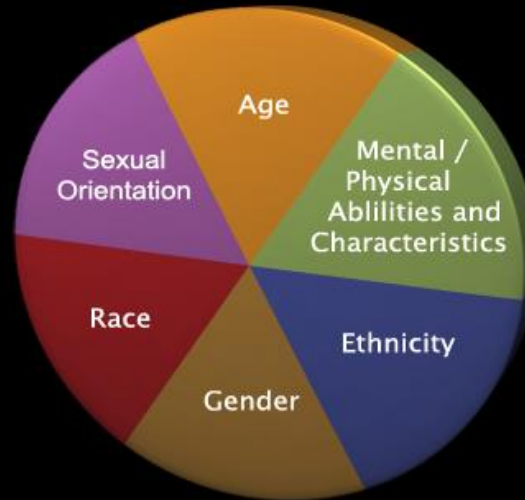


<https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

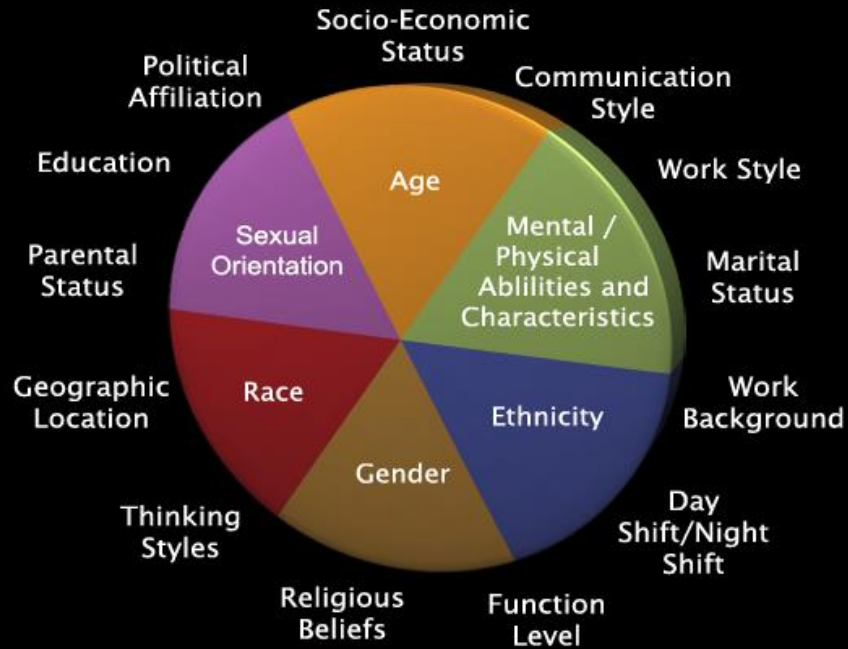
“You grow up in a community with abandoned homes, a jobless rate of over 25 percent, underfunded schools, and you stand outside your home, look at the city's gleaming downtown skyline, at its prosperity, and you know your place in the world.”

— Alex Kotlowitz, [An American Summer: Love and Death in Chicago](#)

## Dimensions of Diversity



## Dimensions of Diversity



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*

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# Clear messages?

**Safe Sleep for Babies**  
*Infants can die when they are not sleeping safely.*

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*A Baby Sleeps Safest When He or She Is...*

**A**lone  
**B**ack  
**C**rib



Safety-approved crib

Firm mattress, with a Fitted Sheet

Sleep clothes, no blanket

On back

No smoking around baby

Nothing but baby in crib

**Questions? Parent Helpline:**  
**1-800-CHILDREN (1-800-244-53736)**

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Visit our website for more info:  
[ocfs.ny.gov](http://ocfs.ny.gov)

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Is this culturally appropriate?

# Clear messages?

## What does a safe sleep environment look like?

*Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Causes of Infant Death*





Use a firm sleep surface, such as a mattress in a safety-approved\* crib, covered by a fitted sheet.

Do not use pillows, blankets, sheepskins, 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 let anyone smoke around your baby.

Make sure nothing covers the baby's head.

Always place your baby on his or her back to sleep, for naps and at night.

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 crib safety guidelines, contact the Consumer Product Safety Commission at 1-800-638-2772 or <http://www.cpsc.gov>.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 Division of Field Operations  
 Eunice Kennedy Shriver National Institute of Child Health and Human Development



## သင်သည် မြန်မာနိုင်ငံမှာလာပါသလား။

သင်သည် (အော်လဘာနီ) Albany ဖြူတွင်နေထိုင်ပါသလား။

သင့်ကျန်းမာရေးအကူအညီပေးမှု (Medical) ရရှိပါသလား။

(သို့) ကျန်းမာရေးအာမခံ (Insurance) မရှိခြင်း။

ကျွန်ုပ်တို့ သည် သင်၏ကျန်းမာရေးဖြူ စောင့်ရှောက်မှုအား တိုးတက်လာစေရန် ကြိုးပမ်းဆောင်ရွက်နေပါသည်။



ကျန်းမာရေးစနစ်ကူးပြောင်းရေးဆိုင်ရာ ဌာနမှ သင်၏ဆရာဝန်များနှင့် ဆေးရုံထဲမှ ရရှိသော ကျန်းမာရေး ခြုံငုံစောင့်ရှောက်မှုအား မည်သို့ တိုးတက်ကောင်းမွန် လာအောင် ဖြူလုပ်ပေးသည့်သင့်၏သင် မြင်ချက်အားသိရှိလိုပါသည်။

### ကျွန်ုပ်တို့ နှင့်တွေ့ဆုံရန် သင့်အားဖိတ်ကြားအပ်ပါသည်

စနေနေ့၊ စက်တင်ဘာလ ၂၄ ရက် ၂၀၁၆

အချိန် - ညနေ ၄:၀၀ - ၆:၀၀

Lutheran Church of the Holy Spirit

57 Hurlbut St., Albany NY

ကရင်နှင့်မာစတာမြန်မာ့ဘာသာပြန်ပေးမည်။

သင်၏ပါဝင်ကူညီမှုအားကျေးဇူးတင်သည့်အနေဖြင့် ညနေစာနှင့် အတူ (Price chopper) လက်ဆောင်ကပ်များ သင့်မိသားစုအတွက် ကျွန်ုပ်တို့ စီစဉ်ထားပါသည်။

မေးခွန်းများရှိပါက

Questions? Call or text Betsy Campisi: 518-596-4984

or email Wilma Alvarado-Little:

Interpreter@walvarado-little.net



Burns Interling session Flyer\_Burmese



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# Measurement?



# Effective Communication?



“A person's a person, no matter how small.”  
— Dr. Seuss

# Thank You!

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