How to Use This Presentation

Presentation updated 01.31.2023

This presentation was originally developed for use by an AHE 1.0 team – their MCO partner presented this PowerPoint to the plan's executive leadership team to earn and strengthen buy-in.

AHE has used adaptations of this presentation over time with other organizational executive leadership teams and found it to be a useful tool for working towards leadership buy-in on equity activities.

AHE teams may be interested in adapting this presentation for their own activities around earning and sustaining buy-in.
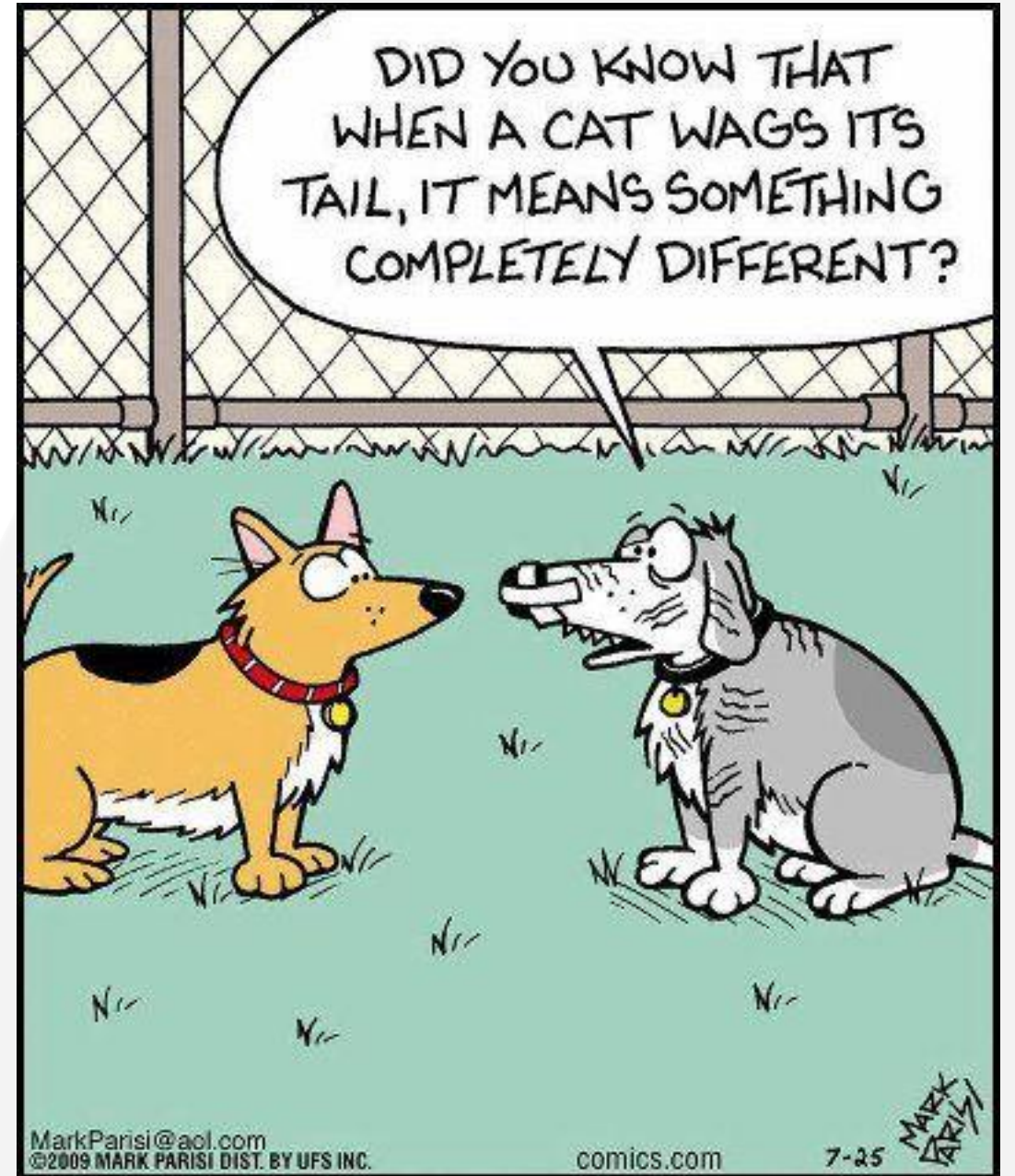
AHE Advancing Health Equity

Key Concepts and Definitions

"Nothing is so simple that it cannot be misunderstood."
-Gypsey Teague, Author

"The single biggest problem with communication is the illusion that it has taken place."
-William H. Whyte, Journalist/Author

Equity vs. Equality

EQUALITY:
Everyone gets the same – regardless if it's needed or right for them.

EQUITY:
Everyone gets what they need – understanding the barriers, circumstances, and conditions.

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Health Equity

Health Equity is everyone having a fair and just opportunity to be as healthy as possible—this requires improving access to the conditions and resources that strongly influence health.

Health equity for those groups who have been excluded or marginalized requires a focused commitment to eliminating **health disparities**, which are measurable differences in health.

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Braveman P, Arkin E, Orleans T, Proctor D, Plough A. What is Health Equity? Robert Wood Johnson Foundation. Published May 1, 2017. https://www.rwjf.org/en/library/research/2017/05/what-is-health-equity-.html.

Institute of Medicine Quality Framework

Crosscutting Dimensions	Components of Quality Care	Type of Care		
		Preventive Care	Acute Treatment	Chronic condition management
E Q U I T Y · V A L U E	Effectiveness			
	Safety			
	Timeliness			
	Patient/family-centeredness			
	Access			
	Efficiency			
	Care Coordination			
	Health Systems Infrastructure Capabilities			

Why Now?

Health inequities persist:

- Health disparities across race, ethnicity, sexual orientation, gender identity, and other characteristics continue to persist and have not gotten better

- Health inequities are caused both by societal structures – like structural racism and other forms of structural discrimination – and by interpersonal structures – such as bias in provision of healthcare.
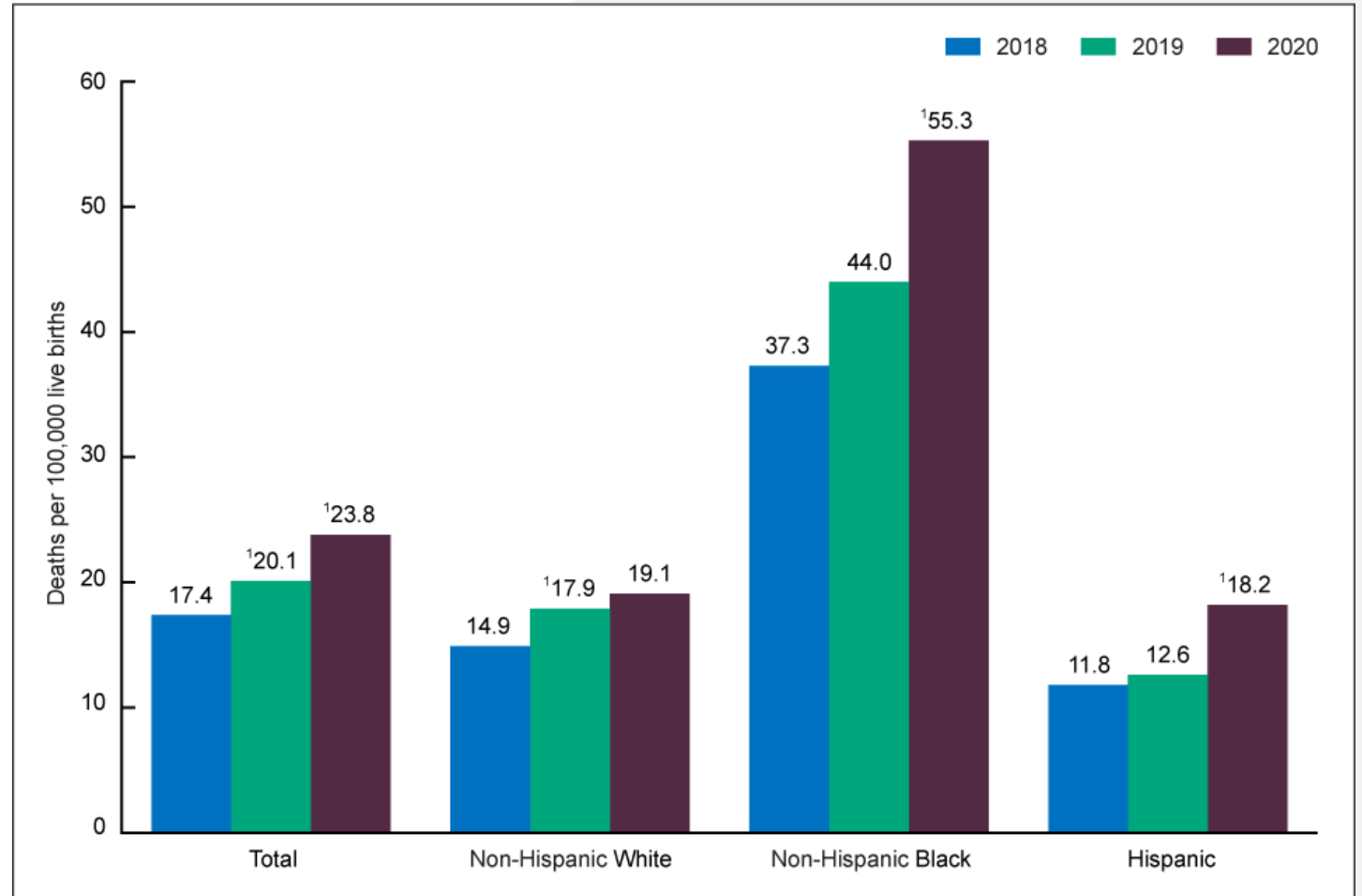
There is now more attention than ever on advancing health equity—a "window of opportunity" to make big changes:

- Federal and state regulators are expecting and mandating health equity activities

- Healthcare organizations are testing innovative care delivery changes and payment reform models to advance health equity

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US Maternal Mortality, 2018-2020

Deaths per 100,000 live births

	2018	2019	2020

- Total: 17.4, [1]20.1, [1]23.8
- Non-Hispanic White: 14.9, [1]17.9, 19.1
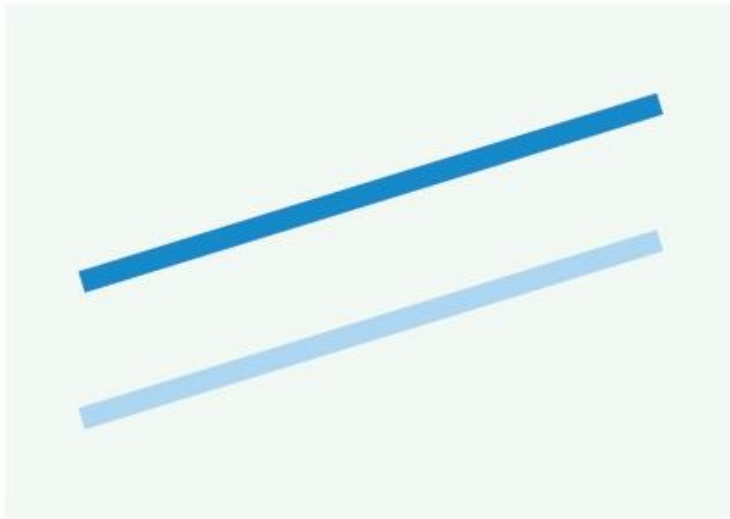- Non-Hispanic Black: 37.3, 44.0, [1]55.3
- Hispanic: 11.8, 12.6, [1]18.2

[1]Statistically significant increase in rate from previous year ($p < 0.05$).
NOTE: Race groups are single race.
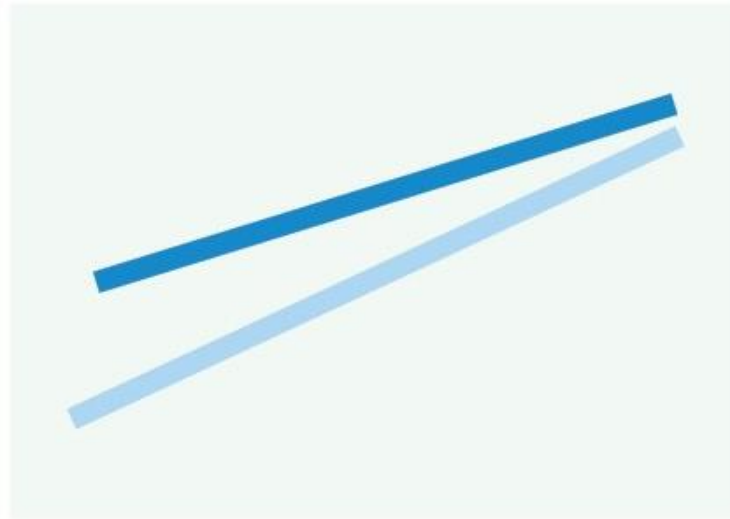SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.
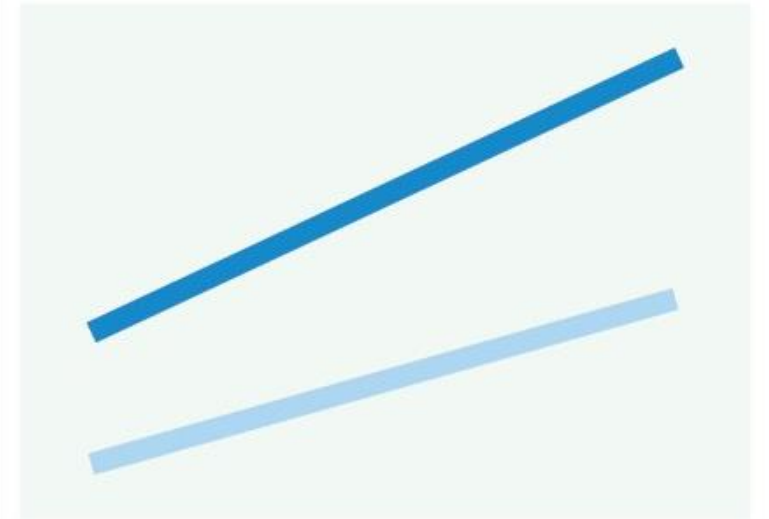
Tailoring Interventions is Key

NEUTRAL

More of the same

NARROWING

Reduces differences

WIDENING

Has differential impact

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Equitable Healthcare

- High-quality, equitable care does not mean providing each person the exact same care. It means addressing *individual needs,* informed by the person's culture, language, and prior experiences.

- Develop long-term partnerships with patients/members. They can identify priorities and co-develop initiatives, especially those addressing systemic racism and health disparities.

- Measure, monitor, and address key health and community-level disparities.

- Create cross-sector collaborations with community-based organizations to address social determinants of health

Advancing Health Equity

The Cycle of Socialization, Culture, and Difficult Conversations

Culture
Shared experiences and commonalities that have developed and continue to evolve in relation to changing social and political contexts based on multiple social group memberships in the context of oppression

Socialization
through family, friends, community, peers, schooling, media, work, religious institutions, government, legal system, healthcare system, etc.

World View
A person's understanding of the world around them, shaped by their culture and socialization

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Why Focus on a Culture of Equity?

Advancing Health Equity is based on a long history of health equity work:

- Grants program (2006 - 2018)

- Developing The Roadmap to Advance Health Equity (2010 - present)

- Technical Assistance Program (2011 - present)

- Literature Reviews

- Work at UChicago Medicine

All efforts pointed to the importance of organizational culture in order to make a lasting difference in advancing health equity

- *How it is done* is just as important as *what is done*

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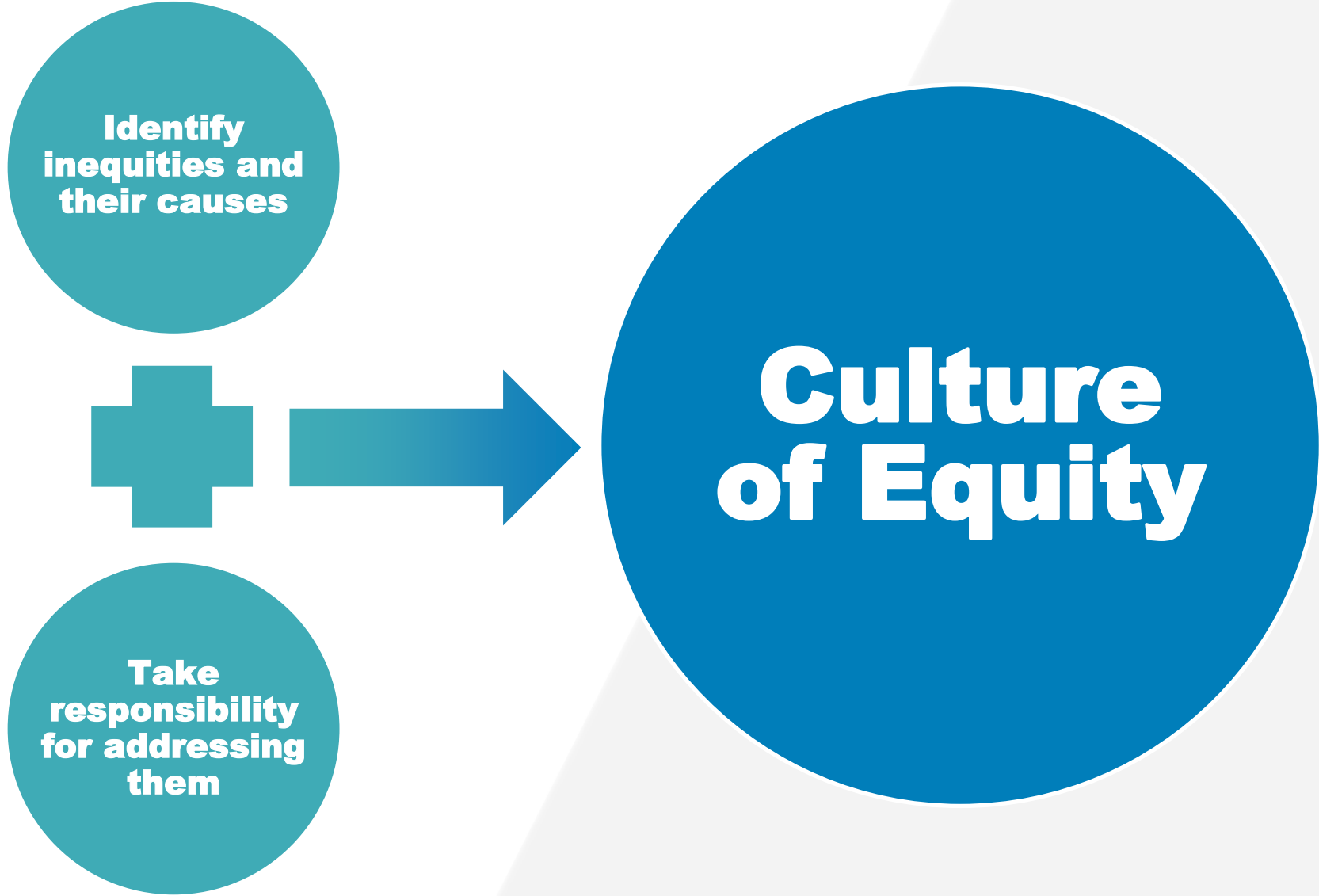
Creating a Culture of Equity

How it is done is just as important as what is done

Five interconnected strategies to build a culture of equity:

1. Ground diversity, equity, and inclusion efforts in critical theory

2. Ensure training goes beyond cultural humility to include critical consciousness

3. Strengthen relationships so they can act as change vehicles

4. Empower an implementation team that embodies a Culture of Equity

5. Aligned equity-focused cultural transformation with equity-focused operational transformation

Culturally Appropriate Care

Individuals and the organizational cultures are at various levels of awareness, knowledge, and skills for providing culturally and linguistically appropriate care

To consistently move in the right direction, organizations need to:

- **Demonstrate** behaviors, attitudes, policies, and structures that enable personnel to work effectively cross-culturally

- Have a defined set of equity-focused **values and principles**.

- Create a strategy and action plan for strengthening how the culture and policies reflect equity-focused values and principles

This will look different for every organization.

Cross,1989 & National Center For Cultural Competence

National Standards for Culturally and Linguistically Appropriate Services (CLAS)

GOVERNANCE, LEADERSHIP, AND WORKFORCE

- Governance and leadership that promotes CLAS and health equity through policy, practices, resource allocation;
- Recruit, promote, support diverse governance, leadership, and workforce;
- Educate and train on culturally and linguistically appropriate policies and practices

COMMUNICATION AND LANGUAGE ASSISTANCE

- Offer timely, no cost language assistance to all who need it;
- Inform about the availability of language services;
- Ensure competence and training for language service providers:
- Provide easy-to-understand print and multimedia materials

ENGAGEMENT, CONTINUOUS IMPROVEMENT, AND ACCOUNTABILITY

- Establish goals and management accountability, infuse through organizational planning and operations;
- Conduct ongoing assessments and continuous QI;
- Collect and maintain demographic data to monitor impact of CLAS on health equity and outcomes;
- Partner with community to design, implement, and evaluate practices and services for cultural and linguistic appropriateness;
- Communicate CLAS implementation process to all stakeholders

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A Roadmap to Advance Health Equity

advancinghealthequity.org

Advancing Health Equity: Leading Care, Payment, and Systems Transformation (AHE) is a national program supported by the Robert Wood Johnson Foundation and based at the University of Chicago. AHE 's mission is to discover best practices for advancing health equity by fostering payment reform and sustainable care models to eliminate health and healthcare inequities.

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