



HEALTH EQUITY E-NEWS

Winter, 2014



**Welcome from the Office of Health Equity
Director, Dr. Hector Ortiz**

Greetings for the new year!

I am very excited to present the Health Equity quarterly newsletter in a new electronic version this month. Each issue will offer current information about the programs and activities being conducted through the Office of Health Equity (OHE) and our many partners located around the state. You will also find links to upcoming events and organizations that support our mission of reducing health inequities in the commonwealth.

2013 was an eventful year for our office, with great strides made in the creation of an advisory committee, cultural competency trainings and successful events conducted throughout the state. I would like to take this opportunity to thank our partners for their continued support and welcome all readers to join us in our efforts.

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NEWS

Hispanic Heritage Month Recognized in Harrisburg



Hispanic Heritage Month was celebrated nationally from Sept.15-Oct. 15, 2013. Locally, the OHE participated with the Interagency Cultural Celebration

Task Force to conduct events in honor of this observance. A reception was held in September at the Pennsylvania State Museum, bringing together many state agency directors, community leaders, executives from local service organizations and commonwealth employees.

In October, the 2nd annual **Fiesta en la Plaza** event was held in Soldiers' Grove across from the capitol fountain. Despite weather challenges, community leaders, commonwealth employees and local high school students came together to experience the variety of cultures represented.



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2012 Health Disparities Report Launch and Reception



In December, at a reception for OHE partners and distinguished guests, the 2012 Health Disparities Report was unveiled.

Rachel Schmidt, an intern for Pennsylvania Department of Health (PADOH) in 2012, was the lead researcher and author of the report, which is a snapshot of health inequities in Pennsylvania. Speakers included John Lovelace, President of UPMC for You and Dr. Carrie DeLone, PADOH physician general, who highlighted the major health disparities that affect unrepresented and vulnerable populations. Ms. Smith addressed the audience as well, stressing the importance of social determinants of health in creating health disparities. Please see next page for a summary of findings from the report.

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MARCH

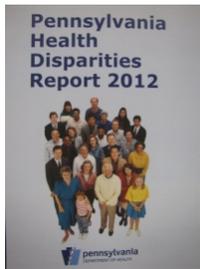


APRIL



[National Minority Cancer Awareness Week \(April 15-21, 2014\)](#)





2012 Health Disparities Report Summary

One of the goals of the OHE is to create awareness and address fundamental factors that create and sustain health inequities in Pennsylvania. The 2012 Health Disparities Report makes great strides in that effort, with detailed data outlining where disparities exist so partners, stakeholders and community-based organizations can develop evidenced-based programs to bring about change. Anyone working in a healthcare capacity or developing health-related programs or standards will find the report invaluable in ensuring that their programs meet cultural competency standards.

Among some of the report's most notable findings:

- Transgender men and women experience numerous health problems related to discrimination and violence. In a recent study, 25 percent of respondents were denied medical care because they were transgender, over half experienced violence in their homes and approximately one third had attempted suicide.
- In Pennsylvania, prison inmates are at high risk for exposure to infectious agents due to cramped quarters, poor environments and the behavioral choices of inmates.
- More than half of all prisoners in the U.S. have a specifically defined mental health illness.
- Compared to all other ethnic groups, Asian-Americans have significantly lower screening rates for breast, cervical and colon cancers, which is especially concerning because Asian-Americans are the only ethnic group in the U.S. to have cancer as the leading cause of death.
- The prevalence of hepatitis B virus (HBV) infection in the U.S. is significantly higher among Asian/Native Hawaiian/Pacific Islanders population.
- Obesity rates among Hispanics/Latinos rose from 27 percent in 2004 to 36 percent in 2009. Studies show that many in this population live in poverty and cannot afford the higher cost of nutrient-rich, low-calorie foods.
- The top four cancers diagnosed in 2008 among Pennsylvania's Hispanic/Latino populations were male prostate, female breast, colorectal and lung.

To read the full report, please visit our website [here](#).

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Cultural Competency Taskforce

A Cultural Competency Taskforce (CCT) has been formed to systematically integrate evidence-based cultural and linguistic competency practices into health department policies and strategic plans in order to create a better understanding of diversity, inclusion and cultural differences to improve public health outcomes for all commonwealth citizens. This mission will be accomplished through the development of a training curriculum that creates awareness and understanding of cultural competence and Culturally and Linguistically Appropriate Services (CLAS) Standards among PADOH staff.

CCT members will include representatives from the bureaus/offices of Community Health, Health Equity, Communicable Diseases, Emergency Preparedness, EMS, Family Health, Epidemiology, Health Promotion and Risk Reduction, Health Planning, Equal Employment Opportunity, and Human Resources.

PADOH employees will be encouraged to attend face-to-face trainings beginning September 2014, and by January 2015, online trainings should be available for managers and those who do not have direct interaction with the public, as well as PADOH affiliated partners, contractors, grantees and stakeholders.

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Pennsylvania Health Equity Tactical Plan

The OHE's Advisory Committee, consisting of representatives of various stakeholder organizations, has developed a five-year tactical plan that will provide direction for this office and the partner activities we support.

The following objectives support the plan's goal of improving health equity and access for underserved populations:

- Improve access to quality health care, preventive services and wellness activities that impact leading chronic diseases;
- Advance the awareness and application of CLAS Standards;
- Build cultural bridges for greater collaboration, diversity and professional development;
- Leverage technology to help identify and address health inequities; and
- Develop and deploy marketing and communication strategies and tools.

Pennsylvania is the sixth largest state in the U.S., with an estimated population of 12,604,767 in 2009 (PA State Data Center). It is estimated that, by 2030, 25 percent of the total rural population will be 65 years old or older. The African-American and Hispanic populations are projected to increase by 8.47 and 38.8 percent, respectively, while the Caucasian population is expected to increase by only 0.57 percent. In light of this increasing racial diversity, it is necessary for Pennsylvania to address disparities in healthcare access in more culturally competent ways.

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CDC Health Disparities and Inequalities Report

The Centers for Disease Control and Prevention (CDC) has been examining and reporting on key factors that currently affect health and lead to health disparities in the United States. Four main findings from their research are:

- Cardiovascular disease is the leading cause of death in the United States. Non-Hispanic black adults are at least 50 percent more likely to die of heart disease or stroke prematurely than their non-Hispanic white counterparts.
- The prevalence of adult diabetes is higher among Hispanics, non-Hispanic blacks, and those of other or mixed races, than among Asians and non-Hispanic whites.
- The infant mortality rate for non-Hispanic blacks is more than double the rate for non-Hispanic whites.
- Men are far more likely to commit suicide than women, regardless of age or race/ethnicity, with overall rates nearly four times those of women. For both men and women, suicide rates are highest among American Indians/Alaska Natives and non-Hispanic whites.

Click [here](#) to see the full CDC report.

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UPCOMING EVENTS

RHP Medical Interpreter Training to be Offered in Spring of 2014

After receiving a positive response to our first medical interpreter training, RHP, in collaboration with the Health Federation of Philadelphia, has scheduled two new training sessions to occur in the spring. Up to 25 participants in each session will follow an extensive curriculum and rigorous assessment to receive their qualification as a medical interpreter.

Medical interpreters help reduce health disparities by providing increased access to culturally and linguistically appropriate healthcare services for those populations with limited English proficiency.

Central Pennsylvania training: March 12-14, Doubletree Resort by Hilton, Lancaster, Pennsylvania

Western Pennsylvania training: April 9-11, Allegheny Dept. of Human Services, Pittsburgh, Pennsylvania

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2014 Black History Month Celebration, Celebrating “Civil Rights in America”

The commonwealth Interagency Cultural Celebration Taskforce will be holding two events to celebrate Black History Month. The first will be a VIP reception at 5:30 p.m. on Feb. 20, 2014, at the Pennsylvania State Museum. The second event will be a Black History Month Public Program at 11:30 a.m. on Feb. 27, 2014, at The Forum Place in Harrisburg, Pennsylvania.

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2014 Statewide Health Equity Conference

OHE will be hosting the 2nd biennial Statewide Health Equity Conference Aug. 21-22, 2014. The planning committee will hold its first meeting Jan. 29, 2014, from 2-4 p.m. in Harrisburg, Pennsylvania. If you are interested in attending the committee meeting, please contact the OHE at 717-547-3481.

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ANNOUNCEMENTS

PA eShare Refugee Health Assessment System

OHE's Refugee Health Program (RHP) has been working on new electronic software called the Pennsylvania eShare Refugee Health Assessment System. This system will hold all health assessments for newly arrived refugees in Pennsylvania. Medical providers in the RHP will be able to enter health assessments into this electronic system instead of submitting paper copies. RHP partners can look forward to using this software in the coming months.

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Want to Become a Medical Provider for RHP?

To better serve the commonwealth's refugee population, the RHP continually encourages medical providers to partner with the RHP. Becoming a RHP provider is especially important to those physicians and medical practices whose mission includes outreach to underserved populations. For more information about the Pennsylvania RHP, please visit our website [here](#) .

If you know of a healthcare provider that may be interested in partnering with the RHP, please contact Theresa (Reese) Clark at theclark@pa.gov.

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Did You Know?

Health Disparities affect many different populations of people, including people with disabilities, LGBT individuals, rural/urban residents, females, males, different races/ethnicities, homeless individuals, refugees/immigrants and older adults. The OHE works with partner organizations throughout the state to address these health disparities.

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Share Your Story

If you are interested in submitting an upcoming event for your agency or you know about an organization using best practice, evidence-based programs to combat health inequities, please contact our office at kbaney@pa.gov.

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