

RI DIABETES HEALTH EQUITY CHALLENGE

Supporting the community during the COVID-19 pandemic – WAVE 2

WELCOME!

05/14/2021



RI DIABETES HEALTH EQUITY CHALLENGE

Supporting the community during the COVID-19 pandemic – WAVE 2

WHAT ONE WORD DESCRIBES HOW YOU
ARE COMING TO THIS SPACE?



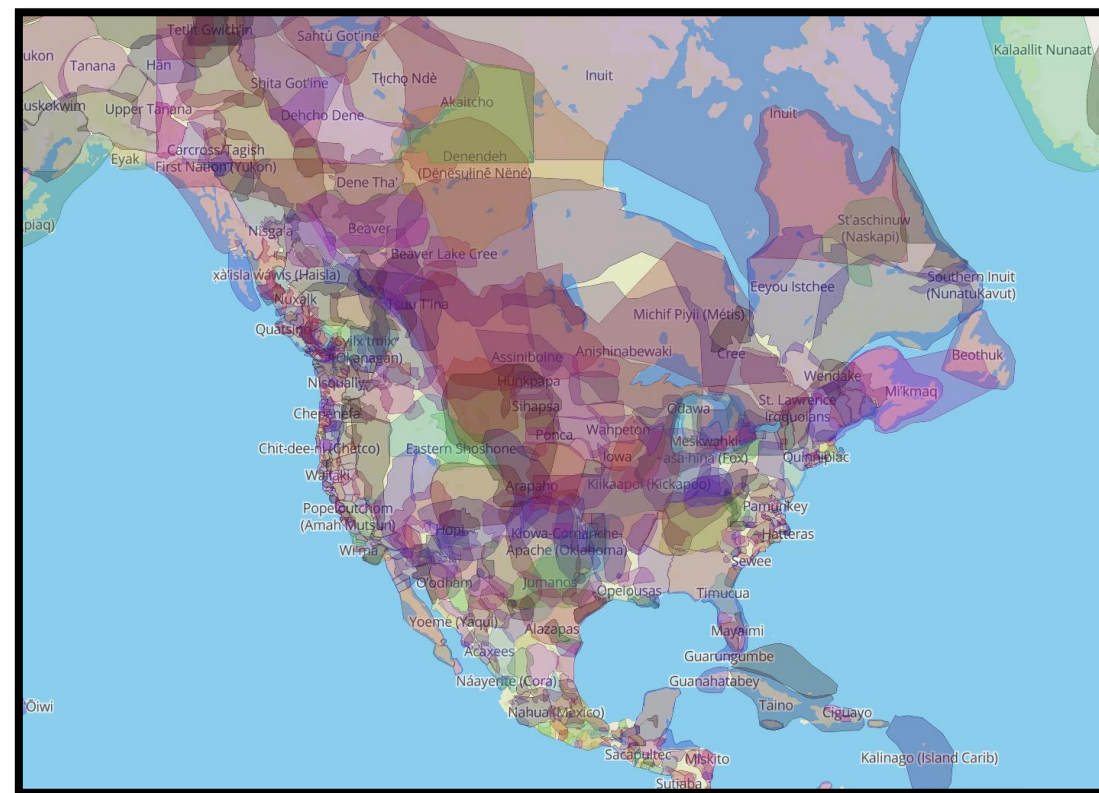
100 Million
Healthier Lives



LAND ACKNOWLEDGEMENT

Together, we acknowledge indigenous peoples, on whose ancient and sacred land we live, work, and play. As a community, we recognize the ever-present systemic inequities that stem directly from past wrongdoings, and we commit ourselves indefinitely to respecting and reconciling this long history of injustice.

<https://native-land.ca/>



AGENDA

1. Welcome / Grounding
2. Team updates
 - Project updates (Charter – Strategy – Challenge Opportunity)
3. Equitable COVID-19 Response
4. Next Steps

RI DIABETES HEALTH EQUITY CHALLENGE WAVE 2

Wave 1

- March-Sept 2020



Wave 2

- Dec-June 2021

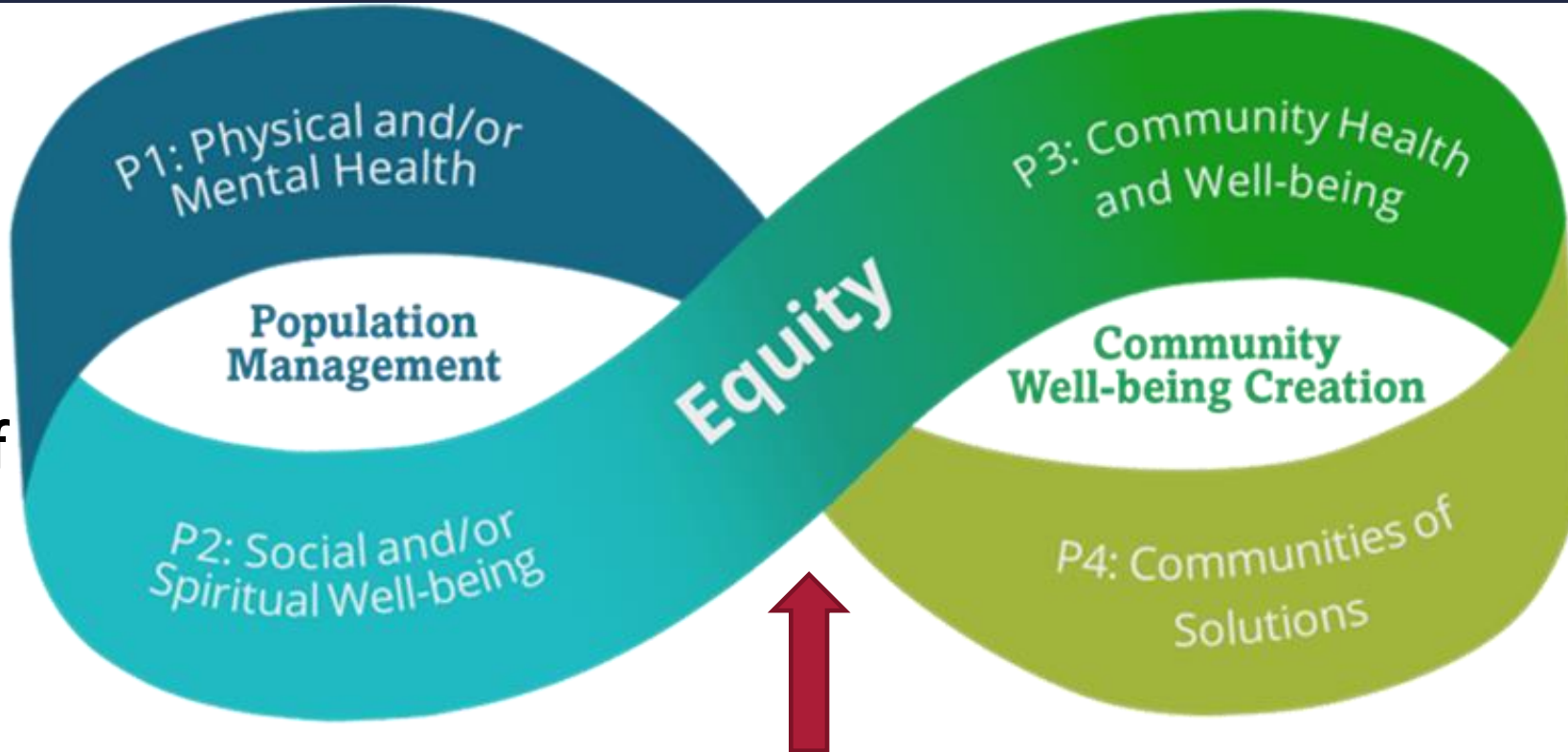


Rhode to Equity

- June 2021

FOUR PORTFOLIOS OF POPULATION HEALTH ACTION

Improving the health and wellbeing of **people**



Improving the health and wellbeing of **places**

Improving the systems that drive (in)equity



Community Health Team



EAST PROVIDENCE

HEZ

HEALTH EQUITY ZONE

EBCAP Team Update

05-14-21



Pawtucket/ Central Falls Team

May 15, 2021



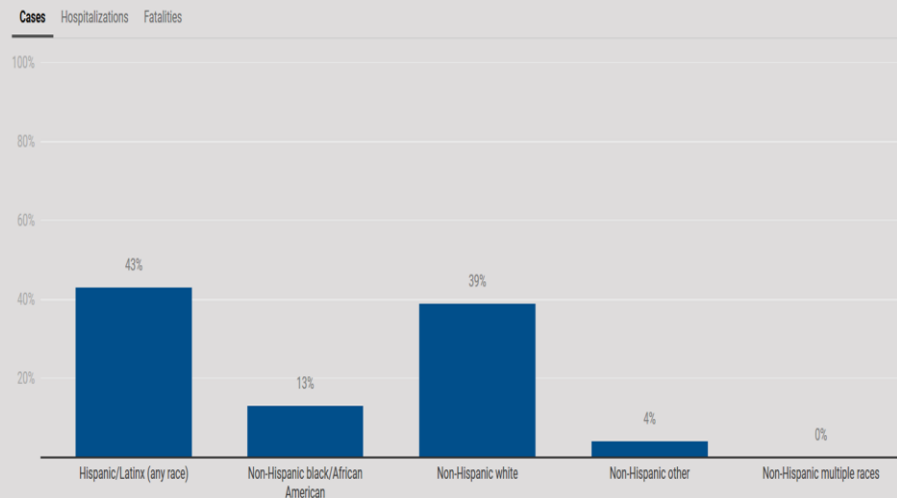
ADVANCING HEALTH EQUITY IN THE CONTEXT OF COVID USING A PATHWAYS APPROACH



Applying this to improve COVID-19 outcomes IN RHODE ISLAND

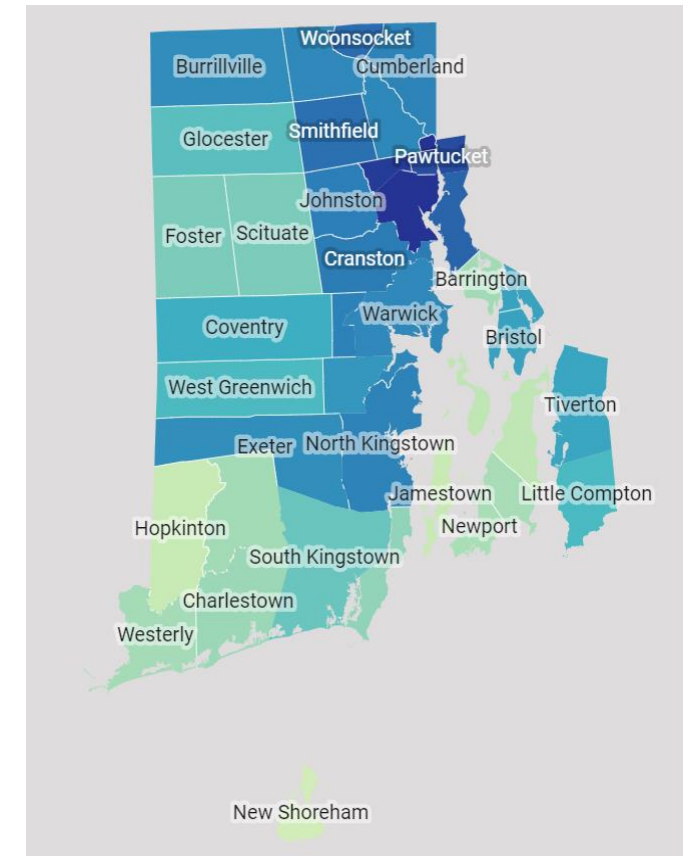
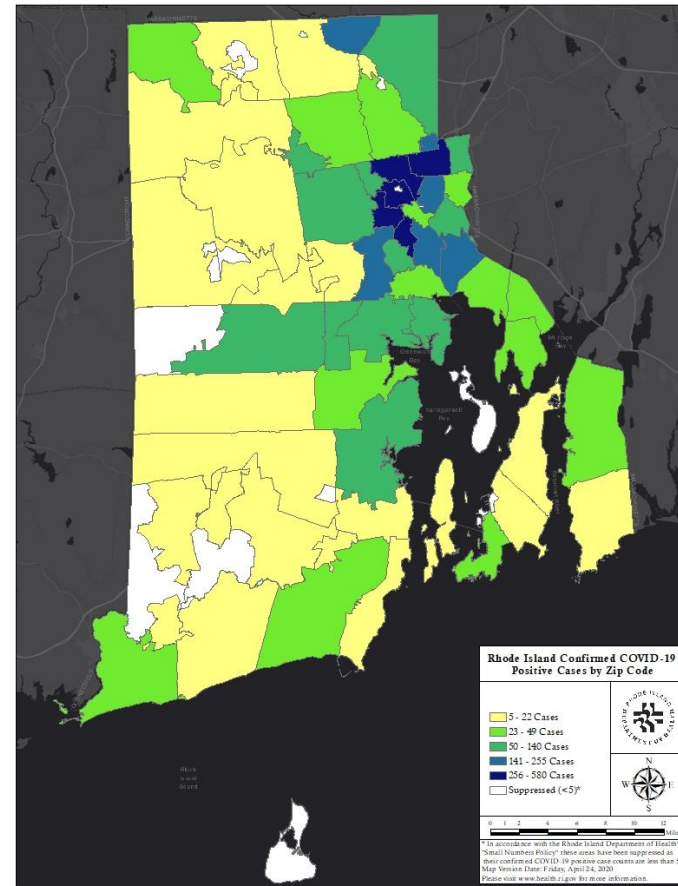
Percent of COVID-19 Cases, Hospitalizations, and Fatalities by Race/Ethnicity

Click below to see Hospitalizations and Fatalities



Note: Percentages do not include cases with unknown or declined demographics or those that are pending further information.

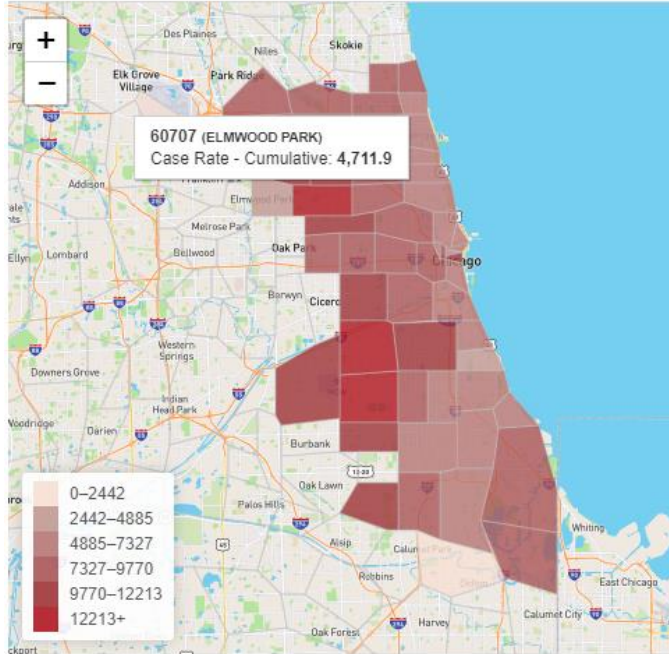
Chart: Rhode Island Department of Health • Source: RIDOH • Created with Datawrapper



<https://ri-department-of-health-covid-19-data-rihealth.hub.arcgis.com/>

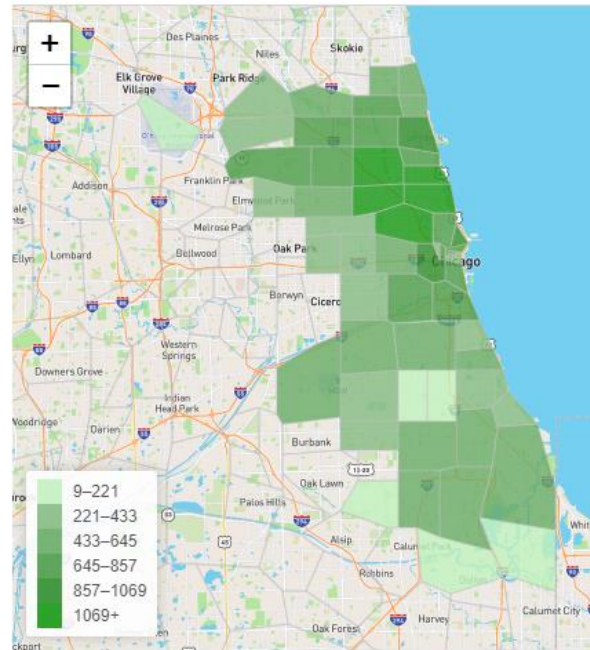
Case Rate per 100k Population

Source: Chicago zipcode correlations



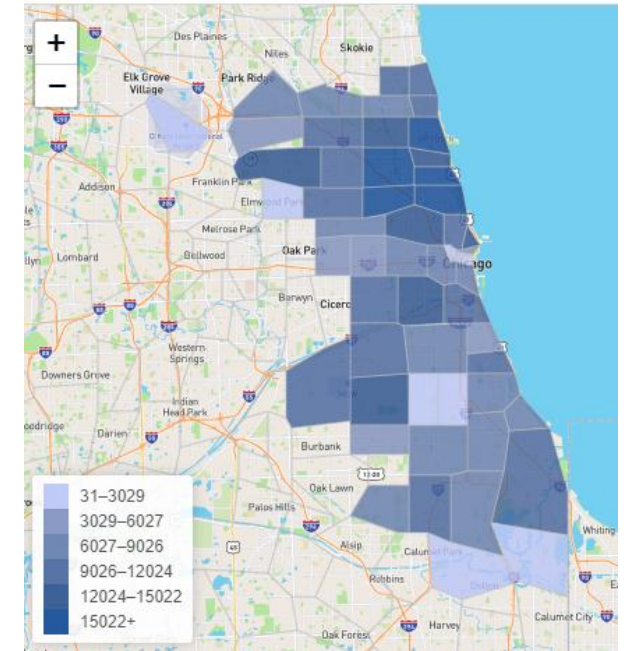
Number of Loans

Source: Chicago zipcode correlations



Total Doses

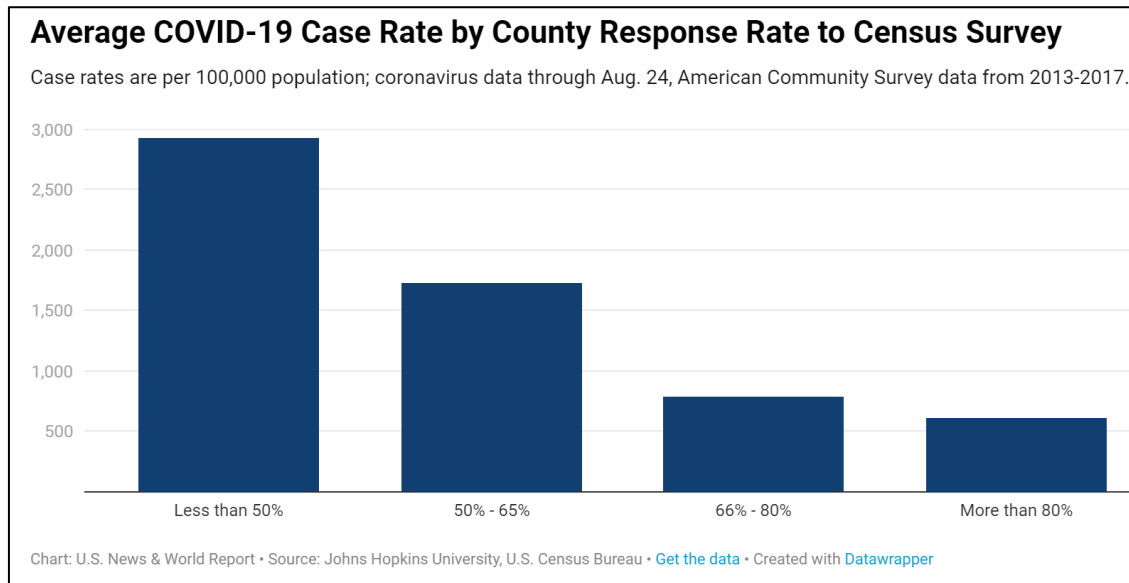
Source: Chicago zipcode correlations



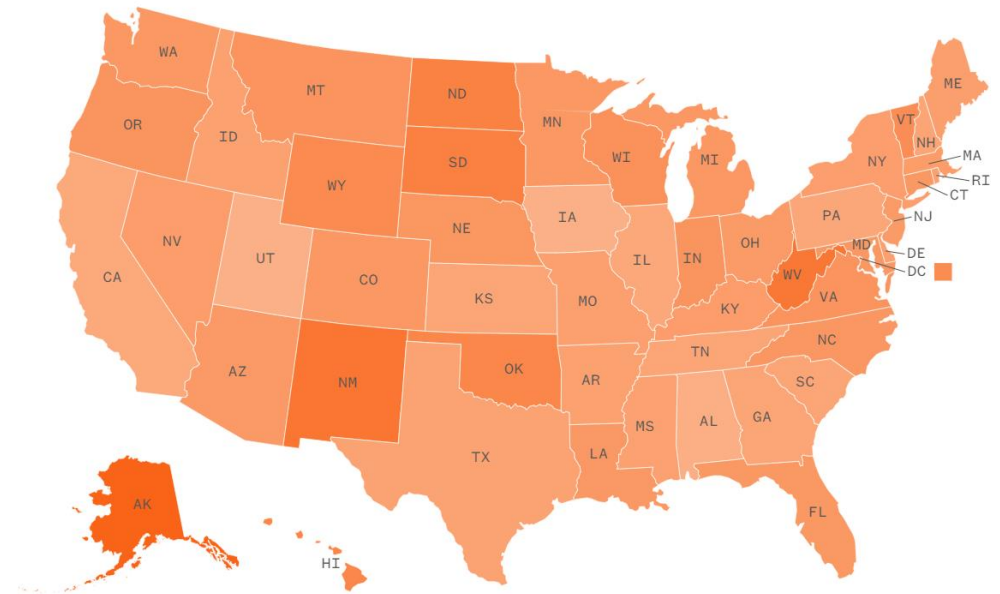
THE NEW REDLINING – COVID CASES, PAYCHECK PROTECTION PROGRAM LOANS, AND VACCINATIONS IN CHICAGO

CIVIC CAPACITY IS PROTECTIVE

Civic engagement and COVID cases



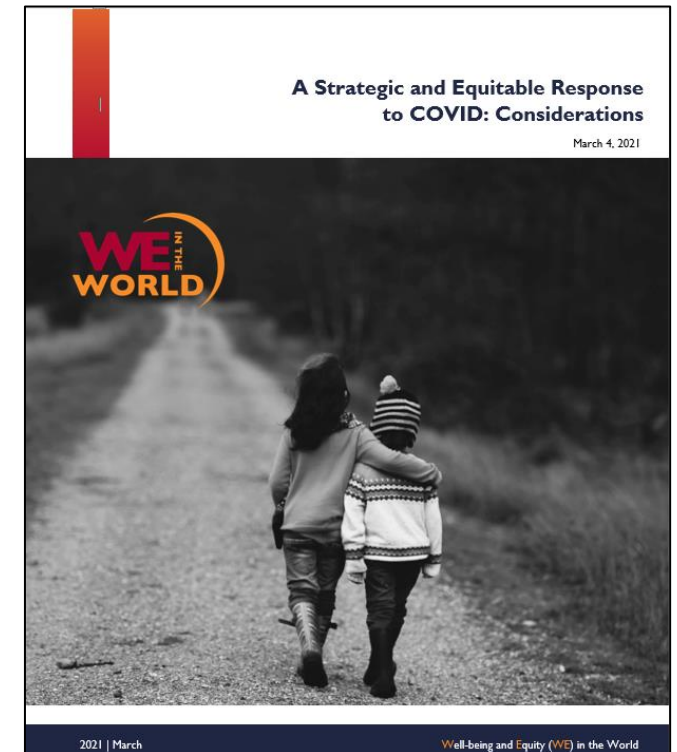
Vaccine rollout reflects civic capacity



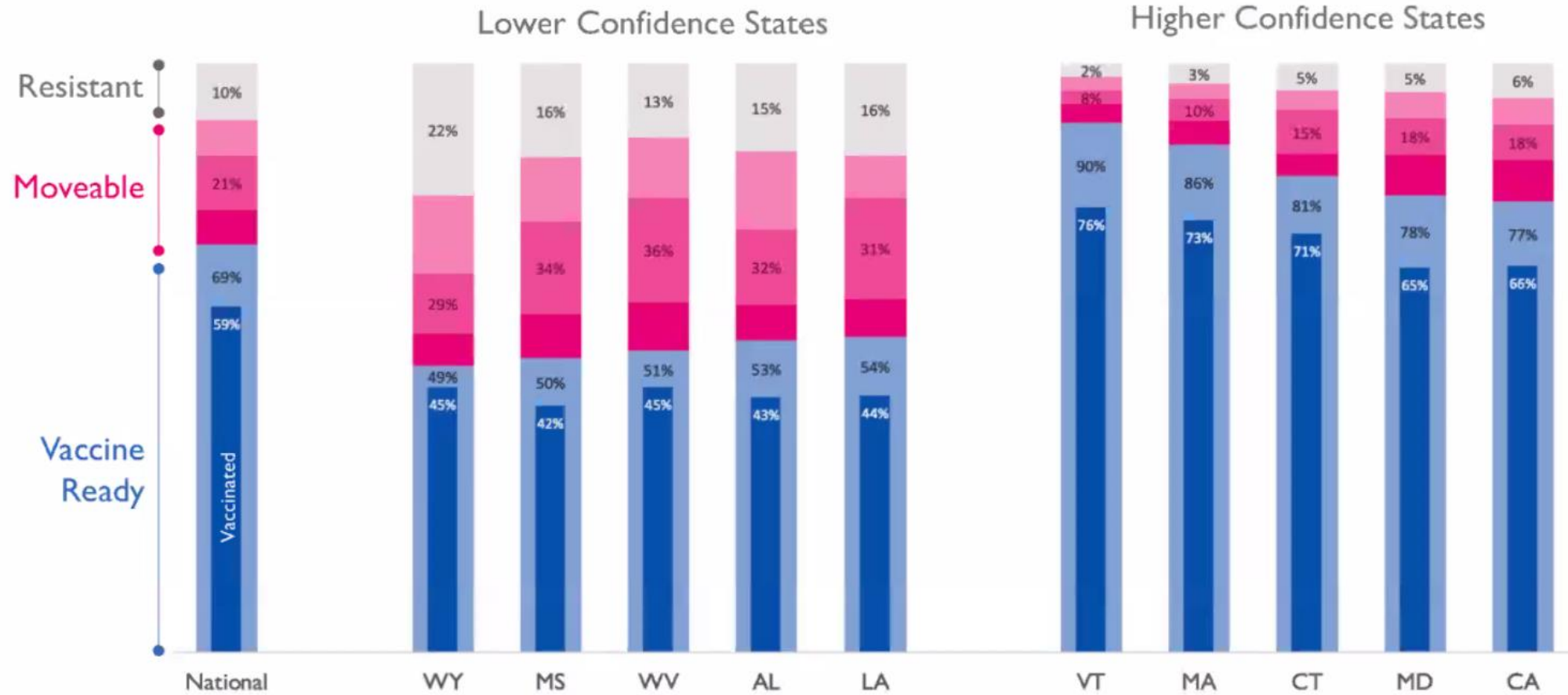
WHY TRUST—AND TRUSTED MESSENGERS-- MATTERS: A DIALOGUE WITH ABENI BLOODWORTH

BRIEF FOR COVID TASKFORCE ON STRATEGIC AND EQUITABLE RESPONSE TO COVID

1. COVID-19 is a connected “syndemic” which requires a coordinated strategic response across sectors to address physical, mental and social health together.
2. The Corona crisis will re-draw the redlining maps of the past century if we do not apply an equity-first approach to the response.
3. Use this as an opportunity to build community-based infrastructure for a primary health and well-being system that also serves as a new job bill.
4. Leverage and build trust messengers and local webs of trust. Support these with national, multi-local webs of trust which can support rapid scale-up of strategies that work.
5. Use this as an opportunity to chart a path toward long-term equitable recovery, resilience and renewal.




Where do we go from here



IMPLEMENTATION GUIDE FOR A TRUSTWORTHY AND EQUITABLE COVID RESPONSE

1. Directly engage people and communities who are at risk through trusted messengers and connecting them with resources
2. Build community infrastructure and processes to be resilient and to change underlying policies and systems in real time
3. Create support system for effectiveness, equity and scale

An Implementation Guide for a Trustworthy and Equitable COVID Response



Offered by:






-  The Center for Popular Democracy
-  Latino Health Access
-  Migrant Clinicians' Network
-  Well-being and Equity (WE) in the World
-  Well Being In the Nation (WIN) Network

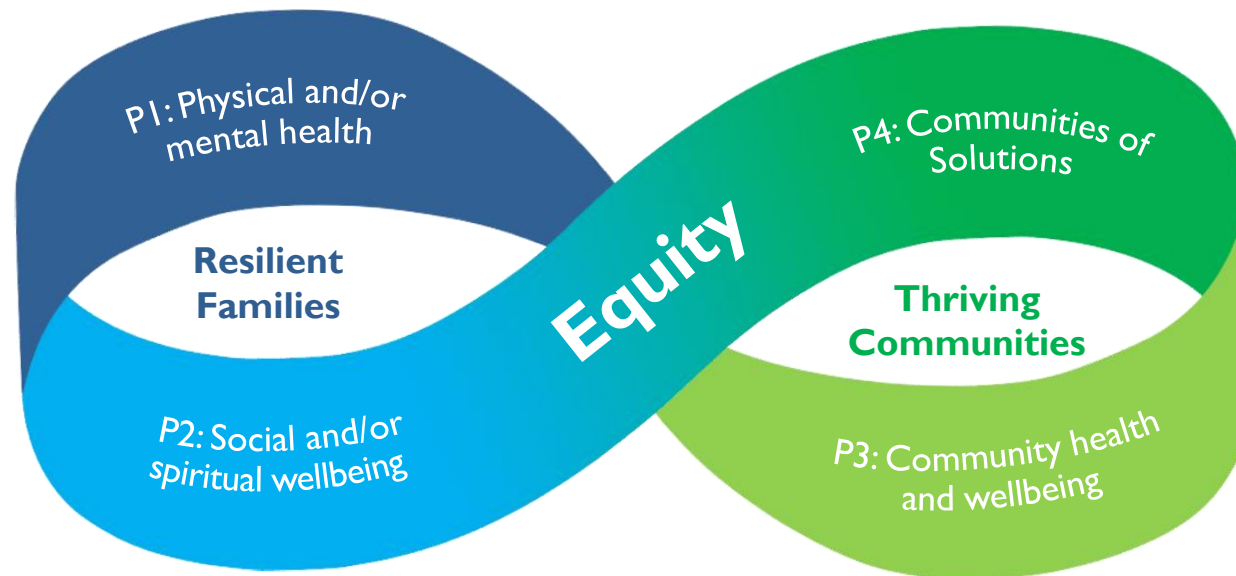
Photo by Nathan Dumlao on Unsplash

A BALANCED PORTFOLIO OF UPSTREAM, MIDSTREAM, DOWNSTREAM, AND GROUNDWATER INTERVENTIONS

Health, well-being and equity

Downstream
(medical needs for
people we reach)

Midstream (social
needs for people we
reach)



Groundwater –
address root causes
and legacies

Upstream- change
underlying community
conditions for SDOH

METROHEALTH, CLEVELAND

Downstream

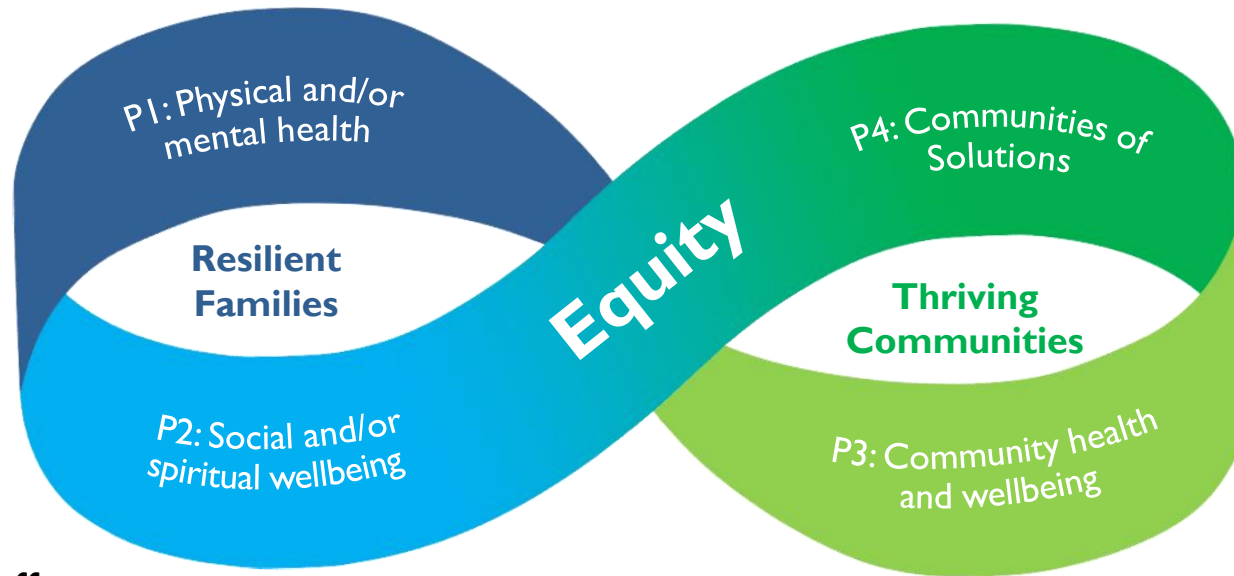
High functioning primary care

Drive-Up Vaccine Service Available at Middleburg Heights Health Center



Midstream

Pay increases for frontline staff
Addressing social needs in primary care (60,000), Pathways hub
Hiring pipelines and policies
Financial literacy



Groundwater –
Undesign the Red Line and Cleveland Circle initiative

Upstream

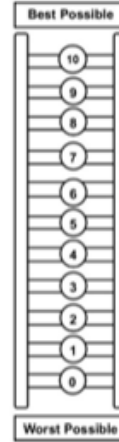
STEM school
Partnership - Better Together partnership

**WELL BEING IN THE NATION (WIN)
COVID Assessment – BRIEF**

A. OVERALL OUTCOME – TO ASSESS IF THRIVING, STRUGGLING, OR SUFFERING

Please imagine a ladder with steps numbered from zero at the bottom to ten at the top. The top of the ladder represents the **best possible life for you**, and the bottom of the ladder represents the **worst possible life for you**.

1. On which step of the ladder would you say you personally feel you stand at this time?
Worst possible 0 1 2 3 4 5 6 7 8 9 10 Best possible
2. On which step do you think you will stand about five years from now?
Worst possible 0 1 2 3 4 5 6 7 8 9 10 Best possible



Thriving, Struggling, Suffering determination:

- **Thriving** (highest category): Item 1 \geq 7 AND Item 2 \geq 8
- **Suffering** (lowest category): Item 1 \leq 4 AND Item 2 \leq 4
- **Struggling**: All other response combinations

B. SOCIAL NEEDS ASSESSMENT – FOR EFFORTS TO IDENTIFY AND RESPOND TO UNMET SOCIAL NEEDS

3. Do you need help with any of the following at this time? (Please select ALL that apply and then mark which ones are urgent.)

Need help

- Food
- Housing
- Utilities
- Healthcare
- Finances
- Transportation
- Loneliness or social isolation
- Personal safety
- Employment
- Childcare
- Other
- I don't need help with any of these

Urgent

- ~~Food~~
- ~~Housing~~
- ~~Utilities~~
- Health care
- ~~Finances~~
- ~~Transportation~~
- Loneliness or social isolation
- Personal safety
- ~~Employment~~
- ~~Childcare~~
- ~~Other~~

4. If we need to get back to you, what is the best way to reach you (circle)?

Call/Text/WhatsApp () _____

Email/other: _____

**WELL BEING IN THE NATION (WIN)
COVID Assessment – BRIEF**

C. EQUITY – USED TO ASSURE PEOPLE WHO MIGHT BE AT RISK OF A POOR OUTCOME ARE SUPPORTED

5. What is the ZIP Code where you live? _____ 6) Your age _____

6. Do you identify as (Please select all that apply):

- American Indian, Alaska Native, or Indigenous
- Asian or Asian American
- Black or African American
- Hispanic, Latino/a/x, or Latin American
- Middle Eastern
- Multiracial or Multi-ethnic
- Native Hawaiian or Pacific Islander
- White
- Race or ethnicity not included above (Optional, please state): _____
- Prefer not to answer

7. Do you identify as (Please select all that apply):

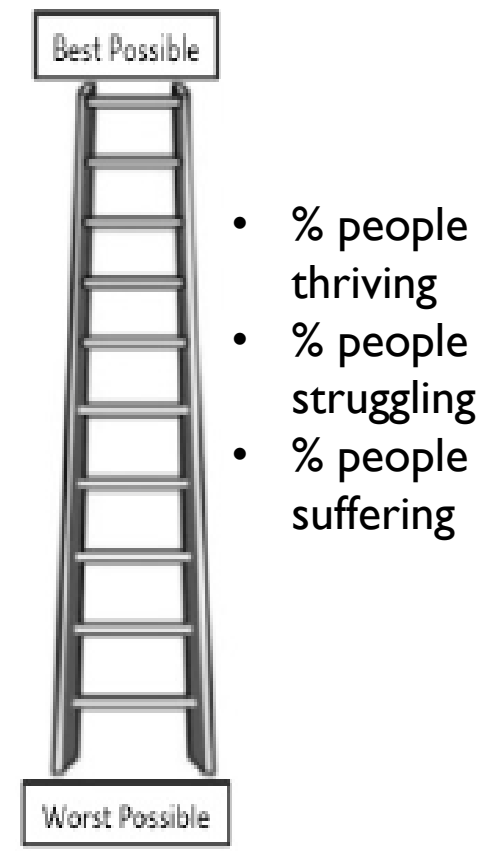
- Man (cisgender or transgender)
- Woman (cisgender or transgender)
- Non-binary or gender non-conforming person
- Different identity (Optional, please state): _____
- Prefer not to answer

8. This question helps us identify additional resources that may be available to support you. Which of these, if any, do you identify as? (Please mark all that apply).

- An unpaid caregiver (of child(ren) <18 years old, person(s) with health problem or disability, and/or an older adult(s))
- Essential worker outside of healthcare who is not working from home (e.g., teacher, childcare worker, grocery or convenience store worker, trash collection, manufacturing, utilities, food service, transportation)
- Healthcare worker (including pharmacy, dentistry, home health worker)
- Person living or working in correctional or detention facility
- Person living or working in nursing home or long-term care facility
- Person experiencing homelessness or housing insecurity
- Person living alone
- Person living in a home where more than one person sleeps in a room
- Person who identifies as LGBTQ
- Person dealing with anxiety, depression, or other mental health diagnosis including trauma or PTSD
- Person who smokes cigarettes/cigars
- Person who uses drugs or has a substance use disorder
- Person with medical condition that puts you at high risk for severe COVID-19 (e.g., cancer, chronic kidney disease, COPD, diabetes, Down Syndrome, heart disease, immunocompromised, pregnant, obese, sickle cell)
- Person living with a disability
- Other high-risk group not included above (Optional, please state): _____

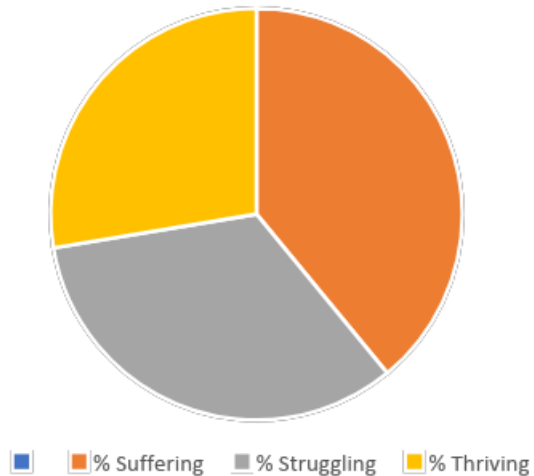
ORGANIZING YOURSELF TO IMPROVE THE WELL-BEING OF PEOPLE: DELAWARE

1. Understood who might be in the highest risk, rising risk, and “everyone” categories
2. Used a few simple questions to risk stratify and rapidly assess risk and needs
 1. Overall well-being and hope
 2. Financial well-being
 3. Loneliness
 4. Social supports
 5. Housing, legal needs
 6. COVID symptoms
3. Planned for what happens to anyone who screens positive including “outreach failures”



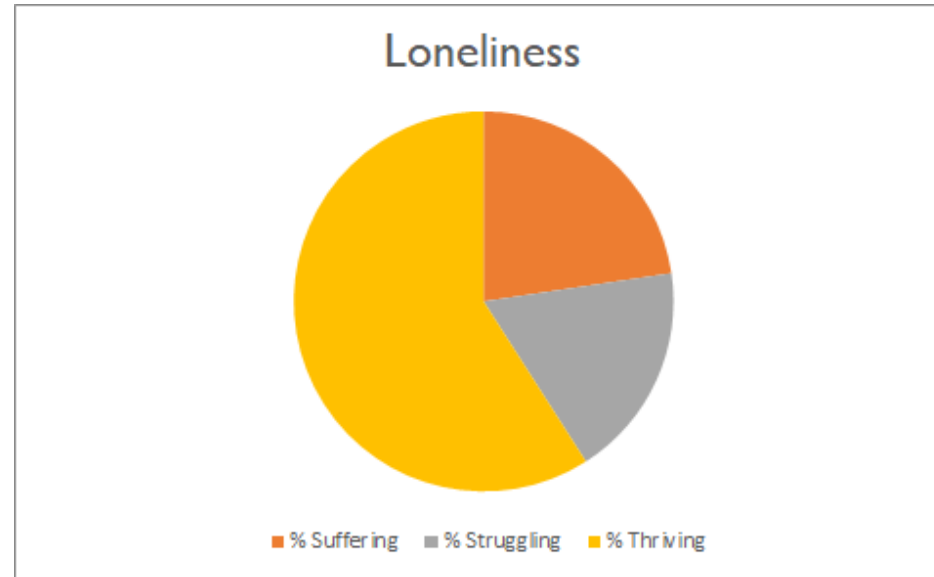
What contributes to poor health and well-being for people with mental health and addiction issues in Delaware in the context of COVID?

Financial security



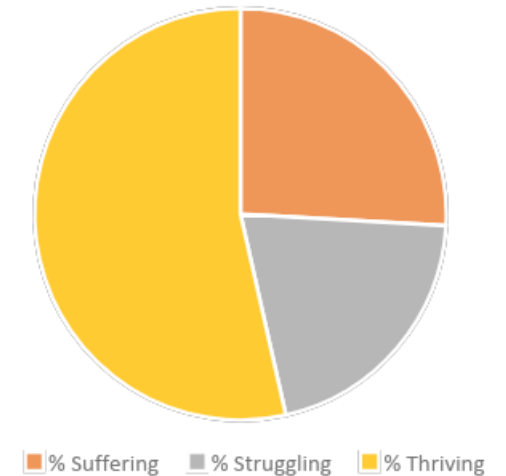
n = 430

Loneliness



n = 456

Social Support



n = 454



DELAWARE HEALTH AND SOCIAL SERVICES
Division of Substance Abuse and Mental Health

Internal data, DSAMH and WE in the World. All rights reserved.



100 Million
Healthier Lives

DELAWARE OUTCOMES



Get Tested



Current
Restrictions [↗](#)



Unemployment
Assistance [↗](#)

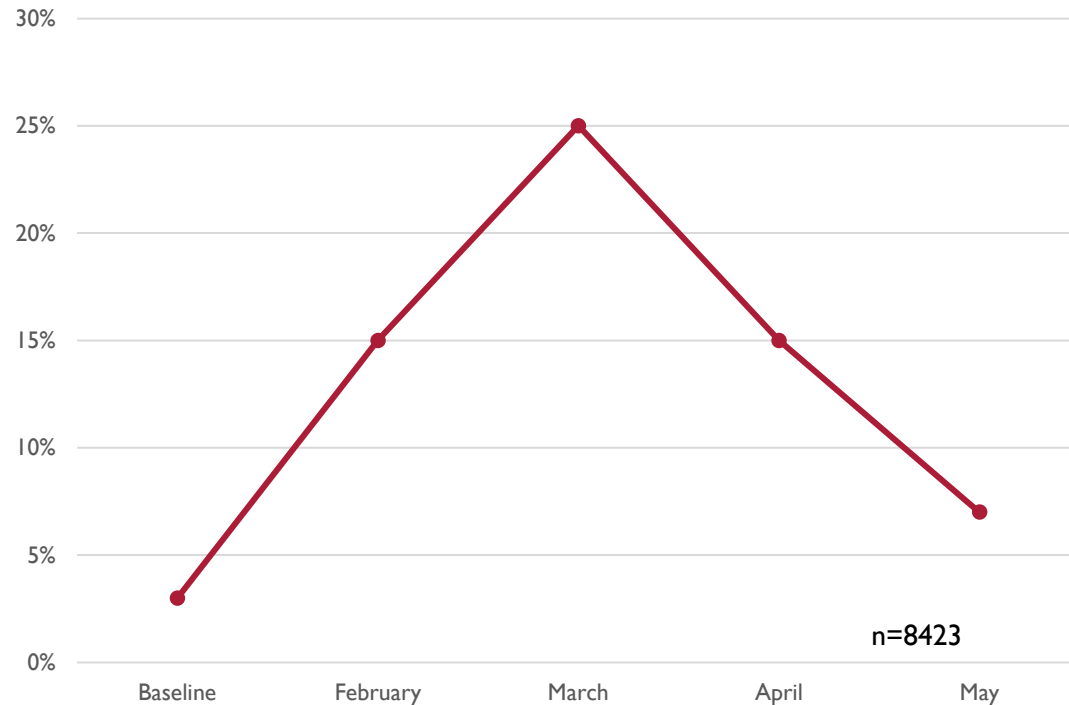


Relief and Support



FAQ

% Patients who are Suffering



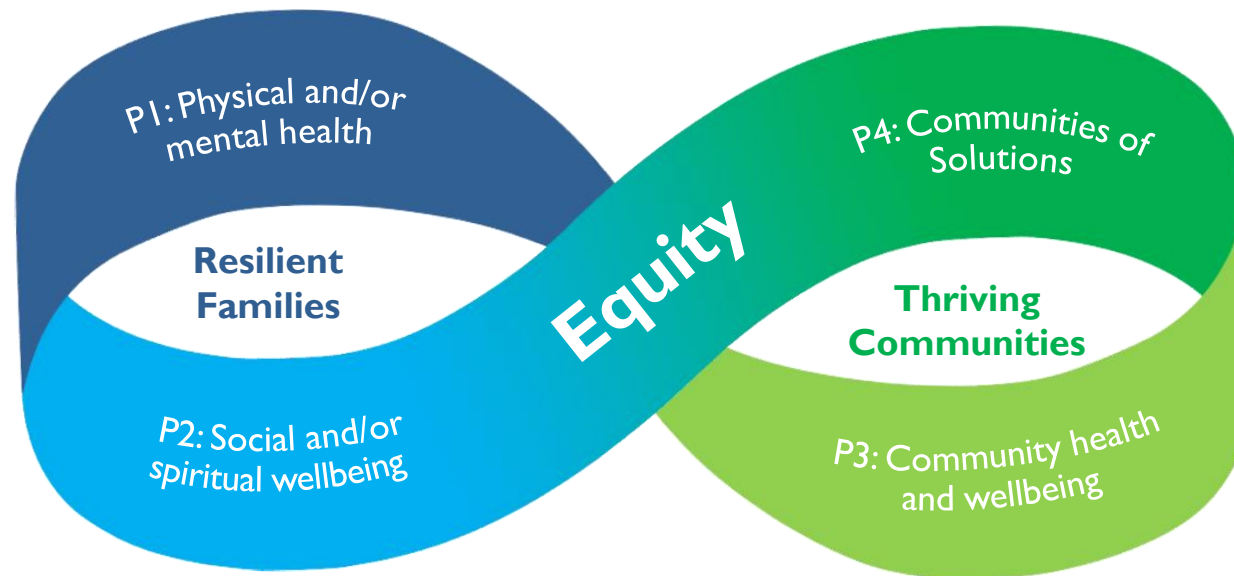
- Overdose rates increased by only 3.6% compared with national average of 23%
- Reduced incarcerations (diversion)
- Reduced homelessness among the most vulnerable
- Data systems across sectors
- Improved access for everyone leveraging telehealth and online supports (Support Wall)

A BALANCED PORTFOLIO OF UPSTREAM, MIDSTREAM, DOWNSTREAM, AND GROUNDWATER INTERVENTIONS

Health, well-being and equity

Downstream
(medical needs for
people we reach)

Midstream (social
needs for people we
reach)



Groundwater –
address root causes
and legacies

Upstream- change
underlying community
conditions for SDOH

How Together Toward Health is working with CBOs:

- Flexible funding to meet communities needs where they are, including assisting with vaccine education and registration. TTH recognizes that translation alone isn't enough, so funding allows CBOs to create/adapt materials that are culturally and linguistically appropriate in the messages they use—whether it's about COVID-19 prevention, vaccine awareness, or dispelling COVID and vaccine myths.
- Streamlined processes and paperwork for quick turnaround, providing 80% of funding upfront
- Ability to host meetings and work with CBOs in Spanish
- Connecting local health departments and CBOs for additional leveraging and support

In Sonoma, Kings, and Madera counties, grantees are creating messaging in indigenous languages including Mixteco, Zapoteco, and Triqui to reach communities.

In the Central Valley, Jakara Movement is creating culturally and linguistically relevant messaging in Punjabi with some emphasis on people working in packing plants.

The LGBTQ Collaborative in Stanislaus is promoting information about vaccine sites and schedules, and engaging drag artists as trusted COVID messengers for Facebook live events.



State	% population		% cases		% deaths		% vaccination	
	Black	Hispanic	Black	Hispanic	Black	Hispanic	Black	Hispanic
Illinois	14%	18%	13%	25%	18%	16%	9%	10%
Indiana	9%	7%	8%	10%	8%	4%	5%	2%
Wisconsin	6%	7%	7%	12%	7%	6%	3%	3%
Minnesota	6%	6%	9%	10%	5%	3%	3%	2%
Missouri	11%	4%	12%	6%	14%	3%	6%	4%
Michigan	14%		14%		23%		8%	

MAPPING POPULATIONS

COPAL

ISAIAH

JustUs Health

TIGGERS

Family Tree Clinic

Minnesota Trans Health Coalition

Minnesota Indian Women's Resource Center

Indian Health Board

Minnesota American Indian Center

Minnesota Healing Justice Network

Native American Community Clinic

Minneapolis Community & Technical College: Community Healing Collaborative

Tough Cookies Art

The Aliveness Project

Red Door Clininc

Youth & AIDS Projects

African American AIDS Task Force

African American Family Services

Voices For Racial Justice

Women's Foundation - Minnesota

Turning Point

Network for the Development of Children of African Descent

Take Action MN

EXAMPLE TRUST NETWORKS IN MINNESOTA

Community Trust: LATINO HEALTH ACCESS Foundation for COVID-19 Response in OC' Latinx Communities

Latino Health Access

- 28-years in working-class Latinx communities
- Organization founded on Freirian principles of education and power-building
- Approach community health through the **Promotor Model** to address social inequities that impact working-class communities of color
- Continuum of Engagement:
 - Outreach
 - Service Delivery
 - Relationship-building and networks of organizers
 - Policy, systems, and environmental change advocacy campaigns



Addressing Social Needs as Part of COVID-19 Response



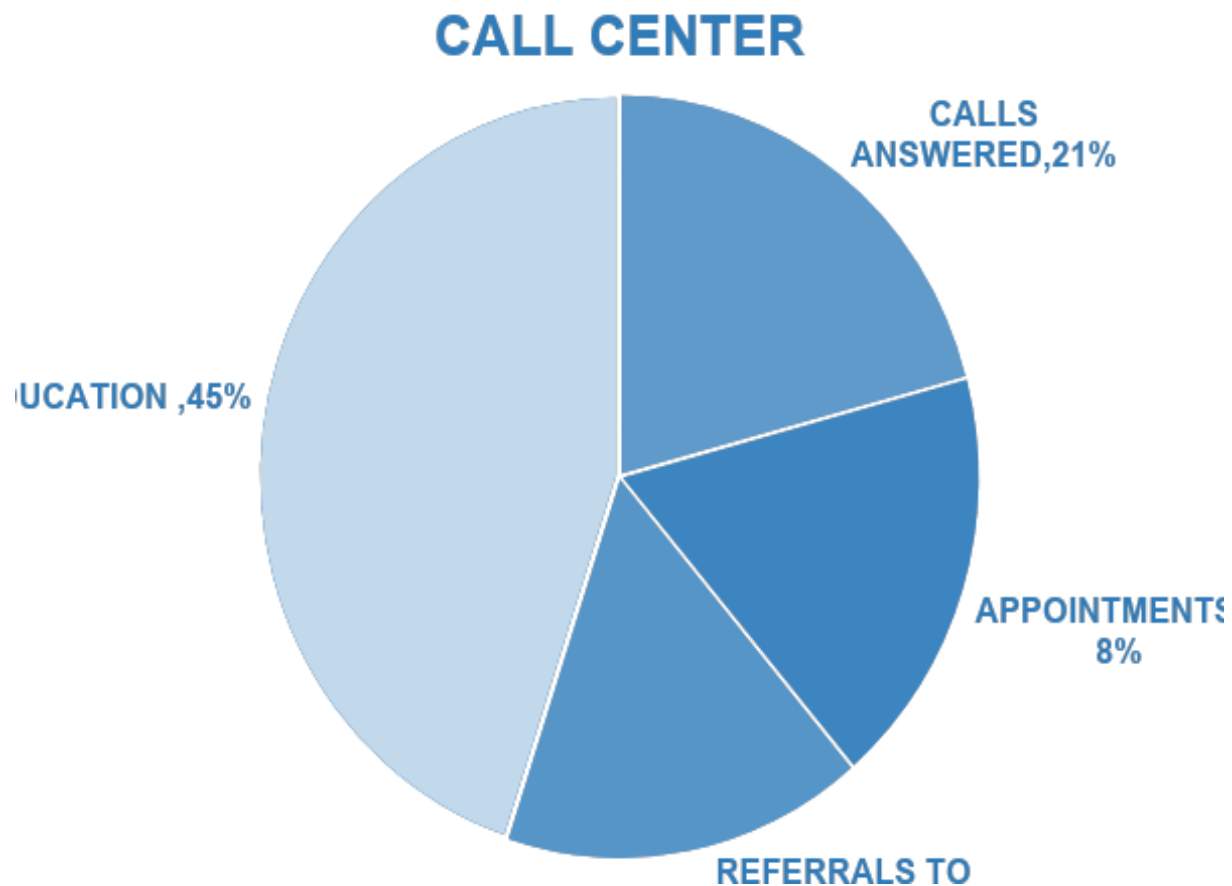
Phase I of COVID-19 Response (60 staff):

- Outbound “check-in” calls to assess social needs
- Activation around Census and
- Advocacy for real-time Zip Code data
- Convening Equity Task Force

Phase II of COVID-19 Response:

- 7-days-a-week Call Center
- Direct outreach in community
- Coordination of Testing + Vaccine micro PODs
- Services to address Social Needs
- Policy advocacy+supporting equitable implementation

June-December 2020 Snapshot (Phase I)



21,191

Answered calls

18,197

Appointments to Testing

16,589

Referrals to Promotoras

45,658

Educational materials

Over \$1.1 million

Cash assistance

UNDERSTANDING WHAT IS POSSIBLE WHEN YOU
UNLEASH THE POWER OF COMMUNITIES

NEXT STEPS

- Rhode to Equity Application (Due May 21)
- Risk Stratification plans
- Compass Assessment (Due May 31)



P2PH COMPASS

P2PH COMPASS

- Stewardship
 - Equity
 - Payment
 - Partnerships with People with Lived Experience
- **Portfolio 1:** Physical and/or Mental Health (Data, Team-Based Care, Behavioral Health Integration, Care Management)
 - **Portfolio 2:** Social and/or Spiritual Well-Being (Data, Social Determinant Screening/Referrals)
 - **Portfolio 3:** Community Health and Well-Being (Data, Community Partnerships, Community Benefit)
 - **Portfolio 4:** Communities of Solutions (Data, Leveraging Nontraditional Roles, Policy)



THANK YOU!

RI DIABETES HEALTH EQUITY CHALLENGE

Supporting the community during the COVID-19 pandemic



100 Million
Healthier Lives



RI DIABETES HEALTH EQUITY CHALLENGE

Supporting the community during the COVID-19 pandemic

