

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE

**MARYLAND OFFICE OF MINORITY HEALTH
AND HEALTH DISPARITIES**

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I. Executive Summary

The Department of Health and Mental Hygiene Office of Minority Health and Health Disparities (hereinafter referred to as “MHHD” or the “Office” was established in 2004 by legislation to address minority health disparities in Maryland. During the past 7 years, MHHD has engaged in numerous activities, projects, and partnerships to reduce health disparities. This report provides a summary of MHHD activities between January 1, 2010 and December 31, 2010. MHHD activities can be divided into four major categories: 1) Statewide Health Disparities Initiatives and Activities, 2) Health Disparities Demonstration Projects, 3) Federal Department of Health and Human Services (DHHS) State Partnership Grant Projects, and 4) Minority Outreach and Technical Assistance (MOTA). This report describes MHHD’s specific activities under each of these categories during 2010.

MHHD has been involved in a variety of activities to implement its plan to eliminate minority health disparities in Maryland. Some of the major efforts, initiatives, and accomplishments during the 2010 calendar year include the following:

- Completed an update to MHHD’s *Maryland Plan to Eliminate Minority Health Disparities*, titled *Maryland Plan to Eliminate Minority Health Disparities Plan of Action 2010 – 2014*. (See Appendix 1.)
- Sponsored and organized the Seventh Annual Maryland Minority Health and Health Disparities Conference, held on June 16, 2010 and attended by 420 individuals.
- Funded 13 organizations through the Minority Outreach and Technical Assistance (MOTA) Program. MOTA focuses on educating and empowering minorities to impact cancer and tobacco health care decisions at the local level to reduce health disparities.
- Engaged in partnerships with health professions schools, the Maryland Higher Education Commission (MHEC), and the Maryland Independent Colleges and Universities Association (MICUA) to expand cultural competency training for the Maryland health workforce.
- Initiated demonstration projects in Baltimore City, Montgomery County, and Prince George’s County aimed at reducing infant mortality and cardiovascular disease rates for minorities.
- Assisted DHMH programs and administrations with the development of Action Plans to increase their focus on reducing minority health disparities.
- Office staff have attended and presented at approximately 111 health disparities workshops, conferences, and events in Maryland, the District of Columbia, and around the nation reaching approximately 4,300 individuals. In addition to these presentations, MHHD displayed exhibits and provided materials at multiple state events throughout the year.

At the end of this report, we have included a summary of planned activities for the 2011 calendar year to continue MHHD’s efforts in eliminating minority health disparities.

II. Statewide Health Disparities Initiatives and Activities

A. Maryland Plan to Eliminate Minority Health Disparities

In March 2010, MHHD completed an update of the Plan, titled the *Maryland Plan to Eliminate Minority Health Disparities Plan of Action 2010 – 2014* (the Plan). The Plan identifies specific action steps and an implementation strategy that can be used during the next 5 years to continue Maryland's momentum in the elimination of health disparities. The initial stages of the Plan update process were guided by the U.S. Department of Health and Human Services, Office of Minority Health, and National Partnership for Action (NPA). During 2008 and 2009, MHHD held work sessions and sought input on the Plan update from the Maryland Health Disparities Collaborative. In December 2009, a draft of the Plan update was sent to 2,500 constituents and partners to obtain written comments and feedback. The *Plan of Action* is available for download on the MHHD Website at www.dhmh.maryland.gov/hd.

In addition to the publication of the Plan of Action, MHHD participated in the following activities related to the Plan:

- Continued to expand the Health Disparities Clearinghouse by adding information and materials on minority health and health disparities and disseminated to policymakers, researchers, community groups, and other interested stakeholders.
- Assisted DHMH programs that impact health disparities with the development of plans to address minority health issues and increase their focus on reducing health disparities.
- Provided assistance and engaged in partnerships with health professions schools and educational associations in Maryland to increase diversity in the health workforce and promote cultural competency among health professionals.
- Continued developing county-specific disparities data that will help local entities target their health disparities elimination efforts.
- Assisted with the implementation of minority health legislation passed during the 2010 legislative session.

B. Health Care Reform Statewide Planning

MHHD Staff participated in approximately 24 workgroup meetings of the Health Care Reform Coordinating Council. The workgroups attended were Exchange and Insurance Markets, Entry to Coverage, Education and Outreach, Health Care Workforce, Public Health, Safety Net, and Special Populations, and Health Care Delivery System. These workgroup meetings took place August – October 2010. The Office reviewed submitted comments and recommendations on the draft white papers of each of the workgroups. The Office submitted approximately 10 sets of comments; at least one set of comments was submitted to each of the workgroups.

Additionally, MHHD provided assistance in identifying panel presenters and information resources for the Health Care Reform Coordinating Council (HCRCC) Workforce workgroup. MHHD Staff also developed and disseminated to the Workforce workgroup co-Chairs and coordinators a set of guiding principles (Minority Health Principles for Workforce Development Initiatives) that could be utilized to help ensure that workforce diversity and cultural competency are fully integrated into the state's health reform and workforce development efforts going forward.

MHHD Staff attended three full Council meetings held monthly from September – November 2010. At the October 15, 2010 full Council meeting, MHHD Director, Dr. Carlessia Hussein, and MHHD Epidemiologist, Dr. David Mann, presented recommended strategies as it relates to Health Care Reform and minority communities. Additionally, MHHD prepared the document “Principles of Meaningful Reach and Impact on Minority Communities” and was distributed to staff and members of the Council. MHHD Staff also attended 2 of 5 public meetings that were held at locations around the State during November and December 2010; these meetings were held to get public input on the Council's draft recommendations.

Dr. Hussein and Dr. Mann took part in a panel presentation at the Maryland Black Caucus Foundation Annual Weekend Workshop titled *Successful Implementation of the Affordable Care Act: Healthcare Reform and Implications for Maryland's African American and Other Communities of Color* held on November 5, 2010.

The Office is currently drafting an addendum to the *Maryland Plan to Eliminate Minority Health Disparities, Plan of Action 2010 – 2014* that will address health reform implementation in minority communities. Once complete, this addendum will be placed on the MHHD Website at www.dhmh.maryland.gov/hd.

C. Promoting Awareness of Health Disparities and Cultural Competency

MHHD serves as a clearinghouse of regional and national information on minority health, health disparities, cultural competency training, and workforce diversity. The Office provides information to DHMH, health professions schools, health occupations boards, state legislators, community organizations, other public and private organizations, and citizens. The MHHD clearinghouse holds over 1,000 articles, books, reports, training modules, and other documents. Health disparities publications are stored in hard copy and electronic format utilizing the software tool EndNote®, which allows office staff to manage and organize a large quantity of references and text, and quickly search, access, and update resources.

MHHD maintains a Maryland Minority Health and Health Disparities Website (www.dhmh.maryland.gov/hd) as a tool used to disseminate information to constituents on minority health and health disparities. It contains disparities materials and reports, research findings, Maryland resources, state and national programs, links to other health disparities Websites, a calendar of events, funding opportunities, and a photo album of community events. Web pages are also devoted to health disparities data, women's and men's health issues, and workforce diversity. The Website had 514,450 hits from January to December 2010. Since Website hit tracking began in January 2005, the MHHD website has received over 2 million hits.

From January to December 2010, MHHD distributed over 174 different health messages to targeted racial/ethnic contacts. Approximately 34,000 e-mail messages were sent. The content of the messages included information on upcoming events, recently released reports and documents, available resources, and funding opportunities all related to health disparities. Additionally, information on H1N1 (Swine Flu) and Health Care Reform were distributed.

D. Annual Health Disparities Statewide Events

i. MHHD Statewide Annual Conference

MHHD sponsored the 7th Annual Maryland Minority Health and Health Disparities Conference on June 16, 2010 at the Maryland Department of Health and Mental Hygiene, State Complex in Baltimore. Approximately 420 people attended the Conference, representing state, national, academic, and community interests. The title and theme of the conference was *The Maryland Health Disparities Bazaar: A Unique Event to Promote the Exchange of Health Marketing Strategies*. Discussions focused on areas of health communications, social marketing, community outreach, and other health promotion initiatives addressing health disparities. In addition, there was a focus on topics related to the H1N1 flu and vaccination and other immunizations.

The conference commenced with an opening by the administrator of the Maryland Commission on Indian Affairs, Mr. Keith Colston, with guest performers, Native America's People (NAP), and remarks from Delegate Joseline A. Pena-Melnyk, DHMH Secretary John Colmers, and MHHD Director Dr. Carlessia Hussein. The keynote address was provided by the DHMH Deputy Secretary for Public Health Ms. Frances Phillips.

Mr. Michael Golden of the Maryland State Retirement and Pension System moderated an interactive session on working with the media that included Lt. Col. (ret.) Quentin Banks, Jr. of the Maryland Military Department, Ms. Elin Jones of the Anne Arundel County Health Department, and Ms. Monique Lyle, of the Baltimore County Health Department.

Delegate Shirley Nathan-Pulliam moderated a roundtable discussion on health reform and minority communities that included Ms. Fredette West of the African American Health Alliance, Mr. Russell Davis of the Summit Health Institute for Research and Education (SHIRE), Ms. Joyce Hunter of Vulcan Enterprises, LLC, Ms. Tracee Bryant of the Black Mental Health Alliance, and Ms. Renee Cohen representing Maryland's U.S. Senator Benjamin Cardin.

Mr. Todd Scott and Mr. Dan Wiznitzer of Himmelrich PR conducted an interactive session that provided an introduction to social media. Dr. Bonnie Braun of the University of Maryland College Park held a health literacy training.

Nineteen organizations hosted tabletop discussions - brief interactive presentations that highlighted marketing and outreach strategies used within various health programs focusing on minority health issues.

ii. Legislative Black Caucus of Maryland Health Workshop

On Friday, November 5, 2010, Dr. Carlessia Hussein and DHMH Secretary John Colmers participated in a panel discussion at the Maryland Black Caucus Foundation Annual Weekend 2010, in the Workshop titled “*Successful Implementation of the Affordable Care Act: Healthcare Reform and Implications for Maryland's African Americans and Other Communities of Color.*” Led by Delegate Shirley Nathan-Pulliam, additional participants included legislators, academic representatives, non-profit organizations, and health care advocates. The event was held in the House Building in Annapolis.

iii. National Conference Series on Quality Health Care for Culturally Diverse Populations

Throughout most of 2010, MHHD served on the local planning committee for the National Conference Series on Quality Health Care for Culturally Diverse Populations (Diversity Rx), held in Baltimore, MD, in October 2010 with over 800 attendees. MHHD provided assistance in promoting the event and identifying conference sponsors and volunteers. The biannual conference series provides a national forum for discussing a broad spectrum of cultural competence issues related to research and leadership development, health care advocacy and policy-making, and health service delivery to improve the health outcomes of diverse populations. Secretary John Colmers provided the welcome address, and MHHD facilitated two roundtable sessions at the conference: (1) “Innovative Practices and Solutions for Health Disparities from State Offices of Minority Health,” which was moderated by Dr. Carlessia Hussein and featured a presentation by MHHD Deputy Director Arlee Gist on the H1N1 statewide outreach program in Maryland; and (2) “State Legislators’ Efforts to Address Health Disparities and Move Toward Health Equity,” which was moderated by Delegate Shirley Nathan-Pulliam and included panel presentations from Delegate Ana Sol Gutierrez, Delegate Peter Hammen, Delegate Susan Lee, and Delegate Joseline Pena-Melnyk. In addition, MHHD’s Minority Outreach Technical Assistance (MOTA) program was featured in a session titled “The Strengths of a Partnership Model for Health Outreach, Disease Prevention, and Improving Access.”

E. Maryland Health Disparities Data

MHHD continued to compile and distribute minority health and health disparities data through various activities. The Office continued to produce annual statewide data updates, and annual updates specific to individual race and ethnic groups. MHHD completed the second edition of its Health Disparities Chartbook in early 2010, using data available through the end of 2009. The Chartbook provides a compilation of health disparities data, including the leading causes of death in Maryland, their impact on minority communities, and the cost of minority health disparities.

MHHD has also been involved in the following activities related to health disparities data in 2010:

- Provided assistance to the Maryland Health Care Commission (MHCC) to incorporate racial and ethnic data in the annual healthcare quality reports. MHHD collaborated with MHCC to publish the first annual Health Care Disparities Policy Report Card in January, 2010.
- Participated in the review of vaccine distribution data and vaccine recipient data to assess the racial and ethnic reach of the H1N1 (Swine) Flu immunization program.
- Evaluated population data and developed a plan for where to hold the race- and ethnic-specific H1N1 focus groups, and prepared the IRB submission for that focus group project.
- Developed and analyzed a survey questionnaire for the focus group project, and prepared the detailed results section of the final H1N1 focus group report.
- Provided data update briefings to the General Assembly during the 2010 session, and for the Legislative Black Caucus of Maryland's Annual Legislative Weekend in November 2010.

MHHD continues to monitor ethnic and racial health disparities in Maryland and finds that disparities continue, but progress toward their elimination is being made. See *Appendix 2* for selected data on ethnic and racial health disparities.

F. Health Disparities-Related Legislation

MHHD conducted analyses and recommended positions on proposed legislation introduced during the 2010 legislative session. Specifically, MHHD Staff reviewed 19 bills related to minority health, health disparities, and cultural competency. MHHD Staff attended 3 briefings and 6 bill hearings in Annapolis. MHHD Staff drafted one "support with amendments" position paper (for HB 1390) and one joint letter of support with FHA (for HB 333), which were both submitted to the General Assembly. MHHD Staff prepared 8 fiscal notes for bills. MHHD also worked in collaboration with other DHMH programs to assist with the implementation of bills during the 2010 fiscal year.

MHHD Staff also participated in numerous activities supporting implementation of the Federal Patient Protection and Affordable Care Act, H.R. 3590, at the State level. These activities are discussed in more detail in subsection B. Health Care Reform Statewide Planning, located on page 4 of this Annual Report.

G. Health Disparities Presentations

A variety of MHHD staff presented at numerous events within the State and regions. Requests came from sources including DHMH programs, Maryland elected officials, private sector health care providers, health professional associations, local governments, special interest groups and ethnic/racial minorities and advocates. There were 23 major presentations that include:

- i. Maryland House Health & Government Operations' Minority Health Disparities Subcommittee: Briefing to elected officials on Minority Reduction Demonstration grants: 1/20/10.
- ii. Prince George's County Health, Education & Human Services (HEHS) Committee: "Plan to Eliminate Health Disparities, moving from a plan to action; 1/21/10.
- iii. National webinar presentation at the request of the DiversityRx *Your Voice Initiative* as part of the Initiative's Community of Practice policy webinar series on cultural and linguistic services. MHHD presented the Maryland State Plan to address racial/ethnic health disparities and cultural competency and workforce diversity initiatives. 2/2010.
- iv. American University Washington College of Law: Health Disparities Symposium; 2/17/10 State and Federal perspectives on health care disparities. Published in Fall 2010 Health Law & Policy Brief (In press).
- v. Minorities in Research Science, Black Engineer of the Year: National Healthcare Town Hall Meeting; "From HealthCare Reform to Health Equity" 2/18/10.
- vi. CDC Immunization Conference in Atlanta, GA: 4/2/10, Joint Presentation on H1N1 Vaccine Culturally Competent Outreach in Maryland with Ivan Walks & Associates.
- vii. Sinai Hospital Community Advisory Panel: presented Overview of Health Disparities in Maryland to a diverse Advisory Group that addresses health disparities in the hospital's catchment area, 5/5/10.
- viii. Kaiser Permanente's Qualified Bilingual Staff Program: Adventist HealthCare, National Diversity and Maryland Hospital Association partnership; 8/23/10; Leadership Message from state government.
- ix. Maryland Pharmaceutical Society's annual Kickoff Meeting: 9/12/10 "Role of the Pharmacist in Reducing Health Disparities".
- x. Academy Health Webinar, "The Affordable Care Act: Impacts & Opportunities for Disparities Research; provided written and oral commentary on presentation by Dr. Brian Smedley, 10/5/10.
- xi. Legislative Black Caucus of Maryland, Inc. Workshop on Implementing the Affordable Care Act and implications for African Americans and Other Communities of Color; 11/5/10.
- xii. US Public Health Service's Minority Officers Liaison Council: Annual Health Disparities Symposium; 12/10/10 State, local and federal agencies address eliminating health disparities.

III. Health Disparities Demonstration Projects by Jurisdiction

During 2010, MHHD awarded cooperative agreement grants to Prince George's County, Montgomery County, Baltimore County and Baltimore City to carry out minority health disparity reduction demonstration projects in infant mortality and cardiovascular disease. The sites for these Disparity Reduction Pilot Projects were determined by analyses of disparities data and community needs assessments. The Projects funds local health departments to support infrastructure enhancement and capacity building efforts using community-based approaches to address minority health disparities.

A. Minority Infant Mortality Reduction

i. Prince George's County

During 2010, the Prince George's County Minority Infant Mortality Reduction Demonstration Project engaged in extensive planning and foundation building. Two perinatal navigator positions had been assigned for the project; however, from April to December, 2010, only one navigator was on staff, with one vacant position. The vacant position was filled on December 6, 2010. Throughout 2010, the perinatal navigators conducted sessions with clinic patients and carried out community outreach activities. The navigators received training from the County Health Start program on how to conduct home visits for prenatal and postpartum clients. The Improved Pregnancy Outcome Coalition (IPOC) continued to grow in membership and activities. Five coalition meetings took place and five training sessions were held for IPOC members and the county community.

In addition, the Project has enhanced the clinical services of the existing Healthy Women/Healthy Lives Program in Prince George's County. The enhanced clinical services began on April 1, 2009 accepting patients on Tuesday and Thursday at the Cheverly Health Center; now the services have expanded with Monday services at the Dyer Health Center. The clinic sees all patients regardless of insurance status and facilitates enrollment in Medicaid and other social services. As of December 30, 2010, from the beginning of the project, 226 patients have received services, there have been 526 patient visits, and 97 of these patients have been transitioned to private providers.

Further, the Project disseminated nearly 3,700 health messages via distribution of health education materials, emails, and presentations to churches, apartment complexes, salons, physician offices, colleges, and health fairs throughout 2010. In addition, the navigators held sessions with all 28 of the obstetricians accepting Medicaid in Prince George's County and facilitated client transfers from the clinic to the private provider.

ii. Montgomery County

The Montgomery County Minority Infant Mortality Reduction Project aims to address the role of social determinants of health that impact minority infant mortality as well as emphasizing the importance of pre-conception and inter-conception health. The project aims to decrease infant mortality by: 1) using Health Promoters from the minority communities to

broaden and enhance the County's approach; 2) creating a coalition of community stakeholders; and 3) developing community outreach and awareness programs to address the alarming and persistent high Black/African American infant mortality rates and the increasing teen birth rates for Hispanic teens in the County. In 2010, this project added outreach to fathers and fatherhood seminars as an objective. Outreach methods included presentations at community centers, libraries, churches, county agencies, community based organizations, individual outreach and follow-up with current client referrals, attending childbirth class, coordinating information exchange and referrals to and from organizations such as Birth Right and Family Services Agencies. The previous project director retired, but the program has continued under the supervision of the County Health Officer, who provides program oversight and coordination among contractual staff, the Montgomery County African American Health Program, and the Latino Health Initiative who work in collaboration on this project. These organizations are well established in the community and have a history of working with the Montgomery County Health Department on community-based health programs.

During 2010, the Montgomery County Minority Infant Mortality Reduction Project Coalition met four times. The three health promoters attended three training sessions; participated in eight health fairs, and provided twelve workshops. They had encounters with over 1,300 women, teens, and males at laundromats, grocery stores, public libraries, churches, basketball courts, gyms, health fairs, and schools.

During 2010, the Montgomery County Project developed three public service announcements which aired on WPGC and were streamed on the WPGC online. These announcements were aired 100 times over a three-month period. The website www.HealthyBabiesHealthyYou.org was established. A deck of cards with HealthyBaby messages was produced, as well as flyers targeting African, African American, and Hispanic women.

iii. Baltimore County

Baltimore County, the latest project, was awarded in April, 2010. This project addresses minority infant mortality disparity through a high school-linked intervention for minority pregnant teens; and developing and implementing media campaigns to reach African-American and Hispanic communities. Three public service announcements (PSA) have been developed and run in five movie theaters, two public service announcements ran for four weeks in October and November; the third ran over the winter holidays.

- Topics of PSAs:
 - October 8 - Prenatal Care (4 weeks)
 - November 19 - Sleep Safety (4 weeks)
 - December 10 - Never Shake Your Baby (5 weeks)
- Theaters and number of movie screens that aired PSAs:
 - Hunt Valley Mall - 12
 - Owings Mills - 17
 - White Marsh - 16, plus IMAX
 - Security Square - 8
 - Towson Commons - 8

The teen pregnancy school initiative has received permission from the Baltimore County Public Schools to offer workshops at two high schools—one in the west county and the other in the east. In addition, the county libraries have joined the effort to list postings on its website.

B. Minority Cardiovascular Disease Reduction

i. Baltimore City

During 2010, the Baltimore City Minority Adult Cardiovascular Disparity Reduction Demonstration Project continued to address adult minority cardiovascular disease reduction through the establishment of a stakeholder Task Force, and the use of Baltimore Medical Systems (BMS) community health workers (CHWs).

During 2010, the Task Force met three times. There were three participating clinics (Orleans Square, Highlandtown, and Belair-Edison) with four community health workers. In December 2010, BMS reported that there were 265 unduplicated clients enrolled; over half have scheduled follow-up care after initial visits. In addition to home visits, the CHWs have attended nine health fairs and provided six health classes, two in Spanish. Partnerships have been developed with the Southeast Community Development Corporation for Farmer's Market vouchers, the La Esperanza Center for social services, and the Wilmer Eye Institute for free diabetic eye exams.

ii. Baltimore County

This latest project was awarded in April 2010 to address minority adult cardiovascular disease through educational and screening sessions in public spaces such as libraries, senior and recreation centers and faith based fitness and nutrition classes. The Love Your Heart Program has distributed 4,668 copies of health education materials, held two community meetings and 230 cardiovascular disease group or individual educational sessions. This group can be credited with providing 1105 blood pressure screenings, five weeks of nutrition and fitness sessions at five local churches (636 participated in nutrition classes and 489 in fitness activity) and making 550 referrals to social services. A Love Your Heart Screening Tool has been developed. A media event featuring Ernestine Shepherd, the Guinness World Records' oldest female bodybuilder, was held in October, 2010 at the Randallstown Community Center.

C. H1N1 (Swine) Flu Statewide Education and Outreach

MHHD was awarded \$1,000,000 by the CDC to fund H1N1 (Swine) Flu community outreach services in each of Maryland's 24 jurisdictions from November 2009 to July 2010. MHHD developed and coordinated a Statewide H1N1 Community Outreach Program. The aim of the program was to develop and rapidly disseminate timely H1N1 (Swine) Flu information and material throughout all 24 jurisdictions in the state. To achieve this aim, MHHD employed the use of strategies that included: 1) Development of a Statewide H1N1 Community Outreach Plan; 2) Training of Outreach Workers to facilitate networking, outreach and reporting and the use of an H1N1 Toolkit developed by MHHD and Ivan Walks and Associates for community education purposes; 3) Tracking and evaluation of outreach activities performed by outreach

workers; and 4) Review of DHMH H1N1 (Swine) Flu related communication materials for cultural and linguistic appropriateness. MHHD awarded grants to 26 organizations to provide H1N1 (Swine) Flu outreach services through July 31, 2010. The grants were used to hire 29 Outreach Workers placed throughout the State with one in each of 19 jurisdictions and two in the 5 large jurisdictions. MHHD conducted six separate training sessions for the Outreach Workers and worked with the DHMH Office of Communication to develop, ensure cultural sensitivity, and translate H1N1 (Swine) Flu material into several languages. The Outreach Workers distributed over 329,000 pieces of H1N1 educational materials, and conducted over 2,000 one-on-one or group presentations.

D. H1N1 (Swine) Flu Statewide Focus Group Survey

As the H1N1 (Swine) Flu campaign drew to a close, preliminary data indicated lower than expected vaccination uptake among Maryland residents. Maryland Department of Health and Mental Hygiene decided to conduct focus groups to gather information on knowledge, attitudes, and beliefs of Maryland residents towards the H1N1 (Swine) Flu statewide campaign. MHHD coordinated the state effort to plan, conduct, and report the findings of the focus group initiative. Through the State procurement process, three consultants were contracted with to conduct the Focus Groups. The consultants brought prior H1N1 Focus Group experience, having worked for CDC to conduct Focus Groups in 2009 at the beginning of the National H1N1 Flu campaign. The Focus Group questions were compiled by MHHD with input from the DHMH Public Health Emergency Response Committee and the Local Health Departments. The DHMH Institutional Review Board (IRB) reviewed and approved the instruments and process attesting that they did not present danger to human subjects. MHHD conducted 26 H1N1 focus groups across 13 Maryland jurisdictions between June 29 and July 31, 2010, with a total of 137 residents participating in these focus groups. The findings from the H1N1 Focus Group Initiative provide in-depth information that is constructive and actionable, and can be applied directly to the planning and execution of future vaccine programs in the State.

IV. Federal Department of Health and Human Services (DHHS) State Partnership Grant

MHHD received a five-year grant (2005 to 2010) for \$750,000 from the DHHS Office of Minority Health to improve minority health and eliminate health disparities in Maryland. Under this grant, MHHD continued to work on DHMH Self-Assessment and Systems Change and Workforce Diversity projects during 2010. MHHD also recently received a three-year grant (September 1, 2010 through August 31, 2013) for \$390,000 (\$130,000 per year) from the DHHS Office of Minority Health. Under this grant, MHHD will continue to work on increasing workforce diversity and culture competency in Maryland, as well as work to promote Systems Change to enhance infrastructure and capacity building in Maryland.

A. DHMH Self Assessment and Systems Change Initiative

The aim of this initiative is to identify and develop DHMH capacity and utilize program resources to address minority health disparities by using three components: DHMH Internal Assessment/Action Plans, Managing for Results (MFR) Review, and compiling best practices.

i. DHMH Internal Assessment and Action Plans

a) State Health Department Internal Assessment and Systems Change

The aim of the DHMH Internal Assessment component is to apply a “systems change” approach to enhance the focus of DHMH efforts on reducing health disparities. “Systems change” describes specific strategies that state and local administrators, community organizations, providers, and consumers can implement to address minority health disparities. MHHD has engaged in the following strategies to develop the Internal Assessment:

- Literature reviews and web scans of other state, local, and national plans for reducing minority health disparities;
- Conducting a pilot survey on health disparity awareness in DHMH programs;
- Building partnerships with other state and national offices;
- Individual DHMH program assessment and technical assistance sessions; and
- Development of DHMH program Action Plans to address racial/ethnic health disparities.

b) Department and Program Action Plans

The Action Plans include key recommendations with detailed action steps, timeframe of implementation, evaluation methods, data needs, and available resources. The Plans present program activities centered on data collection and analysis modifications, community coalitions and engagement, partnerships, development of culturally appropriate awareness and educational materials, cultural competency training, and development of minority related performance or outcome measures.

MHHD is working with all DHMH programs to develop and implement their Action Plans. In 2010, the Maryland Asthma Control Program (MACP), the Mental Hygiene Administration (MHA), and the Epidemiology and Disease Control Program (EDCP) of the Infectious Disease and Environmental Health Administration continued to implement steps to carry out recommendations in their Action Plans:

- MACP with the MHHD’s Minority Outreach and Technical Assistance (MOTA) network began surveying in selected Maryland jurisdictions to determine minority attitudes toward asthma treatment and prevention methods.
- MHHD continued collaboration with MHA to carry out the workplan from the National Policy Summit on the Elimination of Disparities in Mental Health Care

hosted by the DHHS Substance Abuse and Mental Health Services Administration (SAMHSA).

- The Epidemiology and Disease Control Program continued collaboration with the CDC and the DHHS Health Resources and Services Administration (HRSA) on a health disparities elimination project aimed at tuberculosis (TB) and the Hepatitis C virus (HCV).

ii. Managing for Results (MFR)

Maryland Managing for Results (MFR) is a strategic planning, performance measurement, and budgeting process to continually improve State government programs. Each program within DHMH is required to have a strategic plan with goals and objectives that address the mission of each unit. MHHD reviews the annual MFR goals and objectives to track the inclusion of minority health related outcome measures in these strategic plans.

In 2010, MHHD reported on MFR trends in objectives targeting minority health using FY06 MFR goals and objectives as a baseline measure. Results for FY11 identified 13 out of 207 (6.28%) goals and objectives related to reducing minority health disparities. No additional minority health objectives were added during FY11, and only one has been added (during FY08) since the baseline measurement in FY06. DHMH Administrations with minority-related MFR Objectives include: the Office of the Secretary, Operations, Family Health Administration, and Medical Care Programs. Findings were shared with DHMH program staff to promote development of more outcome measures for minority health and health disparities.

iii. Best Practices

MHHD continued to research and collect best and promising practices that describe Maryland and other state efforts in addressing minority health disparities through capacity building and disease prevention and management. These best practices and other tools are used by DHMH program staff in evaluating their programs. Best and promising practices in the conceptualization, implementation, and evaluation of health disparities reducing interventions and strategies continued to be identified through literature reviews, web scans, expert interviews, and other information sharing outlets. Identified practices were disseminated through technical assistance sessions, e-mail alerts, publications, and upon request.

B. Cultural Competency and Workforce Diversity

MHHD continued to engage with 25 health professions schools around the state, including developing new networking relationships with 7 community college-based nursing programs and one community college allied health program. In January 2010, MHHD attended a meeting of the Nursing Deans and Directors to discuss potential activities to follow-up on the report "Cultural Competency Training in Maryland's Health Professions Schools" which was submitted to the Maryland General Assembly in 2009 and shared with the participating schools in response to House Bill 942 (2008).

MHHD also continued its participation with the Sullivan Alliance to Transform America's Health Professions by serving on a steering committee charged with launching a State Health Alliance in Maryland to increase diversity among the state's health professionals. The work of the steering committee culminated in the leaders of 11 health professions schools around the state signing a memorandum of understanding (MOU) in May 2010. The MOU is intended to demonstrate the highest level of institutional commitment to identifying and implementing collaborative strategies to diversify the health workforce in Maryland through the formation of the Maryland Alliance to Transform the Health Professions. MHHD's ongoing partnership efforts with the state's health professions schools over the last several years have helped to lay the foundation for development of the Maryland Alliance.

MHHD was a co-sponsor of the Maryland Hospital Association's bilingual staff train-the-trainer program titled "How Can You Better Serve Your Culturally and Linguistically Diverse Communities?" In addition, MHHD continued its close partnership with the Sinai Hospital of Baltimore and served as a member of Sinai's Health Equity Community Advisory Panel which seeks to develop meaningful strategies to address the needs of Sinai's patient population. In May 2010, MHHD conducted a presentation on statewide health disparities to the Panel. The presentation accompanied a locally-focused presentation on health disparities by the Baltimore City Health Department.

Within State government, MHHD continues to build upon its partnerships with agencies such as the Maryland Higher Education Commission and has developed a relationship with the Governor's Workforce Investment Board (GWIB). MHHD provided a letter of support for GWIB's application to the HHS Health Resources and Services Administration under the Affordable Care Act State Health Care Workforce Development Planning Grant and has provided technical assistance to GWIB in the form of data trends for minority health professions graduates as a proxy for measuring diversity in Maryland's healthcare workforce.

MHHD is actively participating in the public comment process to revise the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health Care, issued by the U.S. Department of Health and Human Services, Office of Minority Health as guidance for all healthcare organizations that receive federal funds. MHHD also has encouraged its network of partner organizations to submit comments to HHS, with the goal of increasing and facilitating the application of the CLAS Standards in the delivery of health care to diverse communities across Maryland.

In addition, MHHD has initiated a formal partnership with the University of Maryland-College Park School of Public Health and its Herschel S. Horowitz Center for Health Literacy. The purpose of this partnership is to collaboratively develop and disseminate a Primer on Cultural Competency and Health Literacy. The primer is intended as a comprehensive resource that can be utilized by health profession students, professionals, and instructors across the health disciplines in their efforts to improve patient-provider interaction and communication, with the ultimate goal of improved health outcomes and reduction of health disparities among Maryland's residents.

MHHD continues to monitor and report annual student trends by race and ethnicity among dental, medical, nursing, and pharmacy graduates in the state. Moreover, during 2010, MHHD disseminated 132 workforce diversity and cultural competency information resources, 106 relevant funding opportunities, and 48 cultural competency training opportunities to 106 individuals representing 61 institutions. In particular we shared with our network of health professions schools, local hospitals, and the State health occupations boards' information about opportunities that became available in the wake of the Patient Protection and Affordable Care Act.

V. Minority Outreach and Technical Assistance Statewide Program

The Minority Outreach and Technical Assistance (MOTA) program is mandated by legislation to provide outreach and technical assistance to minority communities and to facilitate their participation in local county tobacco coalitions and cancer coalitions. MOTA funds community-based, grassroots, and faith-based organizations to provide outreach services and technical assistance to African Americans, Asian Americans, Latino/Hispanic Americans, Native Americans, and women. Grants are awarded annually to organizations in counties with 15% or more minorities. MOTA has funded over 350 community and faith-based organizations, hospitals, universities, and community health promoters since its inception in 2001.

The MOTA program selects grantees through a competitive grant application process in each jurisdiction. In Fiscal Year 2010, MHHD funded 13 community-based minority serving organizations in 13 of 19 eligible Maryland jurisdictions.

MOTA grantees and sub-grantees continued their efforts to enhance awareness and education of minority health disparities associated with cancer and tobacco related illnesses. The grantees organized and conducted a variety of activities to increase awareness among minority populations, advocate for an increase in cancer screening and tobacco cessation services to minority populations, recruit minorities to serve on local tobacco and cancer coalitions, and promote partnerships to prevent tobacco use and increase minority cancer disparity awareness.

During the first six months of 2010, MOTA grantees organized approximately 543 cultural diversity fairs or events where about 588,645 pieces of educational materials were distributed. Approximately 54,416 minority individuals received information about MOTA efforts to reduce tobacco-related disparities, the harmful effects of tobacco use, and cancer prevention strategies. 140 minority individuals were recruited to attend the local health department's cancer and tobacco health coalition meetings on behalf of minority individuals and MOTA; 207 minority individuals attended the local health department's cancer and tobacco coalition meetings on behalf of MOTA.

Due to these outreach efforts, 1,629 minority individuals received referrals for cancer screening and 2,507 minority individuals received referrals to tobacco cessation programs. 691 individuals received technical assistance in developing health education programs targeting minorities. Grantees also provided 222 technical assistance sessions to minority-serving community-based groups.

MOTA FY 2011 (July 2010 through November 2010)

The Department of Health and Mental Hygiene (DHMH) has announced it is expanding its mission to address ethnic and racial health disparities throughout the State of Maryland. The expansion incorporates the successful strategies used by the Office of Minority Health and Health Disparities (MHHD) on Cancer and Tobacco and extending them to address the major health disparities in Maryland. Therefore, the focus of the MOTA program has expanded to the major health disparities beginning in fiscal Year 2011.

Fifteen (15) MOTA grantee organizations have expanded their efforts to include the delivery of health promotion, prevention, outreach and education of minorities on health disparities such as cardiovascular disease, asthma, diabetes, infant mortality, HIV/AIDS, obesity, and hypertension. During the period from July 1st through November 30, 2010, MOTA grantees have conducted 25 Local Health Disparity Committee meetings with community residents, 859 persons have attended the Health Disparity Committee Meetings/Forums, 182 health fairs/cultural events within their respective jurisdictions where 33,185 persons attended, 30,040 health education materials/brochures were distributed, and 2,437 print/email/media messages on health were distributed.

VI. Health Disparities Plans for 2011

A. Overall

- To provide increased leadership within DHMH by participating with the Executive team and individual deputies in policy discussions and decisions that impact the health of minorities and all Marylanders.
- Work with the DHMH Secretary and deputies to place a high priority on the elimination of minority health disparities, to integrate this goal within the vision and mission statements of DHMH, and to increase racial/ethnic objectives and outcome measures in the Department's Managing-for-Results goals and objectives.
- Continue to encourage DHMH administrations to collect, analyze, and report health program data by ethnic and racial groups in Maryland and within each jurisdiction.
- Continue to seek state, federal and other funds and resources to build an infrastructure that can implement the mandated tasks to reduce health disparities in Maryland. Locate funds to implement a statewide grants program that will fund local demonstration programs within each jurisdiction to reduce health disparities throughout Maryland.
- Seek to connect and integrate all State government programs whose mission and operations impact the health status of ethnic and racial minorities, to achieve economies-of-scale and reduce unnecessary duplication and cost. Potential departments include Human Resources, Housing, Education, Environment and Transportation.

B. Statewide Health Disparities Initiatives and Activities

- Create new collaborations with key stakeholders throughout the State to ensure implementation of the *Maryland Plan to Eliminate Minority Health Disparities, Plan of Action 2010 – 2014*. Continue the partnership with the HHS Office of Minority Health in implementing the first National Framework for Health Disparities Action Plan.
- Continue active participation with the DHMH Office of Communications, Emergency Preparedness Program and statewide Immunization Program in order to reach greater numbers of ethnic and racial minorities using cultural and linguistic competency approaches and increased participation and transparency at the community level.
- Expand county-specific data reporting and dissemination to local health officers, MOTA grantees, and other groups whose mission's address the reduction of health disparities in Maryland. Continue to provide assistance to the Maryland Health Care Commission (MHCC) in their effort to incorporate racial and ethnic data in their annual healthcare quality reports.
- Analyze the costs of health disparities by using the Maryland Behavioral Risk Factor Surveillance System (BRFSS) data in conjunction with the Maryland Health Services Cost Review Commission (HSCRC) data.
- Assist in the implementation of minority health and health disparities legislation passed during the previous Legislative Session by assisting health professions schools and educational associations with cultural competency and diversity reporting.
- Continue to monitor, review, and evaluate legislation and regulations to identify the impact on health disparities. Participate in discussions with DHMH administrations and offices about the impact of proposed legislation on program activities related to racial/ethnic health disparities.

C. Health Disparities Demonstration Projects

- Work cooperatively with Prince George's, Montgomery and Baltimore counties on their Minority Infant Mortality Reduction demonstration projects, and with Baltimore City and Baltimore County on their Minority Adult Cardiovascular Disparity Reduction Demonstration Project. Continue collaboration to increase the effectiveness of interventions and performance and results reporting.

D. Federal-State Partnership Grant Projects to Improve Minority Health

- Increase number of formal partnerships with major Maryland stakeholders engaged in workforce development.
- Move forward with development of Primer on Cultural Competency and Health Literacy in collaboration with the University of Maryland-College Park School of Public Health

and its Herschel S. Horowitz Center for Health Literacy to enhance the quality of cultural competency curricula and training in the state.

- Further develop partnerships with the state's community colleges, schools of public health and Historically Black Colleges and Universities (HBCUs) to increase minority recruitment and enhance cultural competency in health professions training programs.

E. Minority Outreach and Technical Assistance (MOTA)

- Provide training and guidance to MOTA grantees to develop effective skills and health education programs to address health disparities in infant mortality, cardiovascular disease, asthma, diabetes, cancer, tobacco-related illness, obesity and HIV/AIDS that have a major impact on racial/ethnic groups in their respective jurisdictions.
- Provide training and guidance to the MOTA grantees to enhance their outreach abilities, penetrate larger sections of the target communities, and increase cancer screening, tobacco cessation, and cancer prevention behaviors among minority communities.
- Work closely with MOTA grantees as they establish Local Health Disparity Committees in each jurisdiction to organize and energize community groups to work cooperatively to reduce and eliminate specific health disparities affecting their jurisdiction.
- Provide training to MOTA grantees to advance their skills in program and fiscal management, program evaluation, cultural and linguistic competency, and diversity training.

VII. Appendices

See attached.

APPENDIX 1.

Maryland Plan to Eliminate Minority Health Disparities, Plan
of Action 2010-2014

**MARYLAND PLAN TO ELIMINATE
MINORITY HEALTH DISPARITIES**
Plan of Action 2010 – 2014

March 2010

**Maryland Department of Health and Mental Hygiene
Office of Minority Health and Health Disparities**

***A Healthier Future
For All Marylanders***



John M. Colmers
Secretary

Carlessia A. Hussein, RN, DrPH
Director

Full text of Plan can be located at:

http://dhmh.maryland.gov/hd/pdf/2010/Maryland_Health_Disparities_Plan_of_Action_6.10.10.pdf

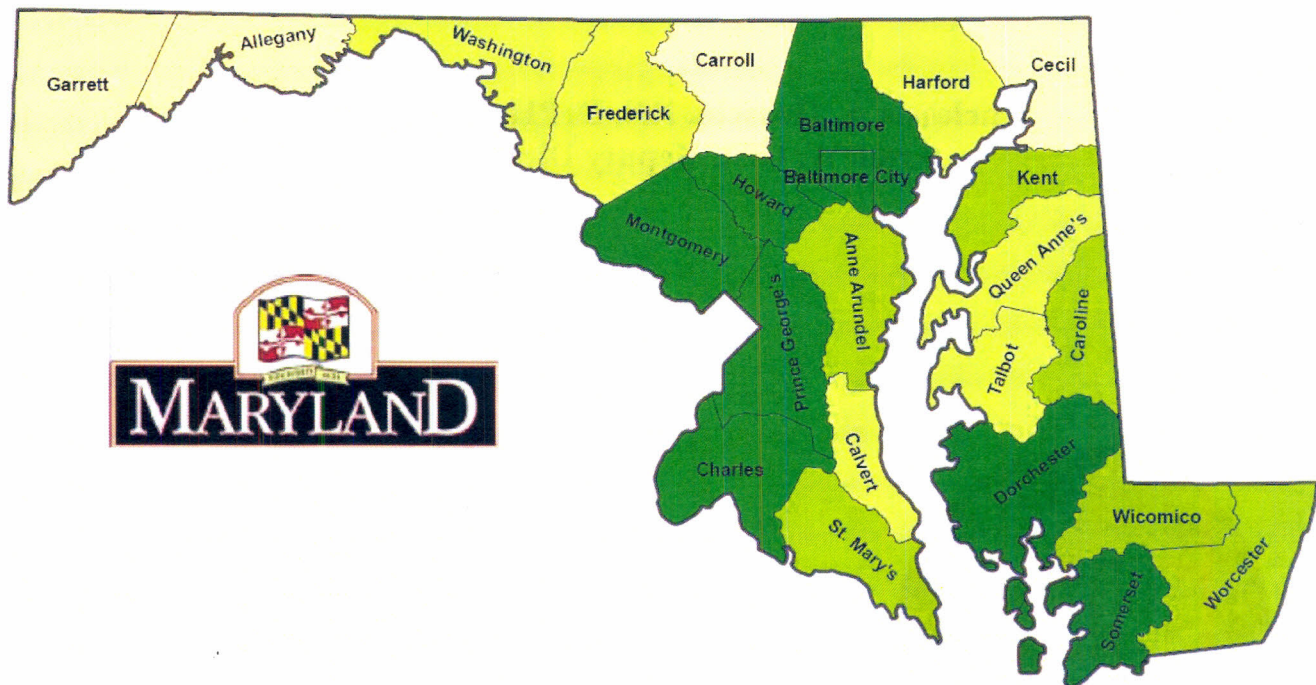
APPENDIX 2. Maryland Chartbook of Minority Health And Minority Health Disparities Data, Second Edition

Maryland Department of Health and Mental Hygiene

Maryland Chartbook of Minority Health And Minority Health Disparities Data

*With Sections on Gender-specific Health
And Jurisdiction-specific Health*

Second Edition: December 2009



Martin O'Malley, Governor

John M. Colmers, Secretary

Anthony G. Brown, Lt. Governor

Full text of Chartbook can be located at:

http://dhmh.maryland.gov/hd/pdf/2010/Chartbook_2nd_Ed_Final_2010_04_28.pdf

APPENDIX 3.

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