

History

The Office of Health Disparities (OHD) at the Colorado Department of Public Health and Environment (CDPHE) was established in 2004 by the Executive Director of the CDPHE. In May 2007, the OHD, the Minority Advisory Commission, and the Interagency Health Disparities Leadership Council (described under Activities) were codified in statute through Senate bill 07-242.

Health Priorities

The Colorado Department of Public Health and Environment (CDPHE) has identified health priorities for the general population of Colorado, one of which includes the elimination of racial/ethnic health disparities.

| Health Priorities for the General Population |
|----------------------------------------------|
| Obesity prevention |
| Tobacco control |
| Cardiovascular disease and stroke prevention |
| Cancer control |
| Elimination of health disparities |

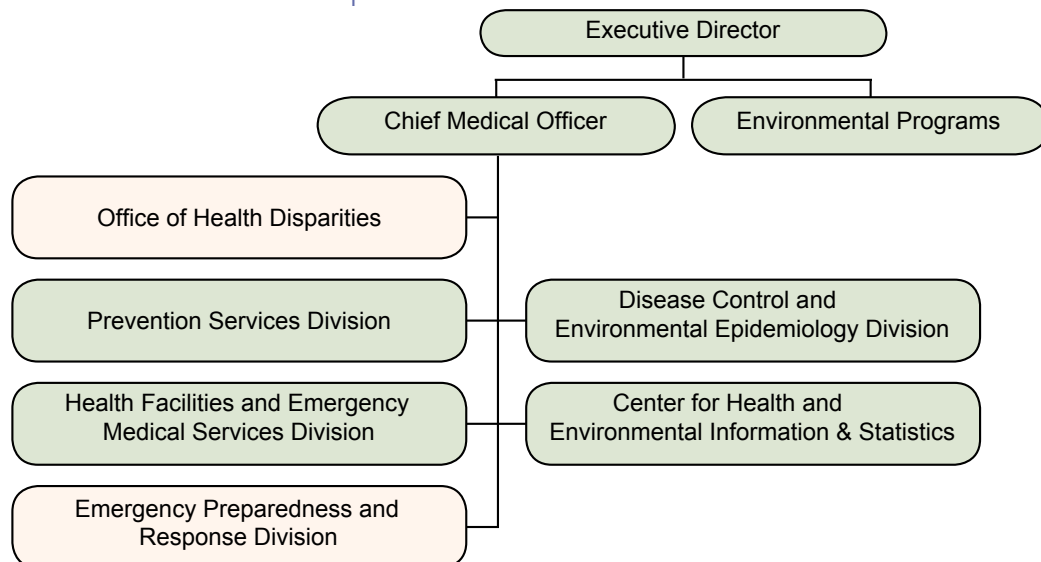
Overview

| | Funding for MH/HD Activities | Personnel Dedicated to MH/HD | MH/HD Unit | MH/HD Advisory Body | State MH/HD Legislation or Mandate | MH/HD Strategic Plan | Evaluation of MH/HD Activities |
|---------------------------------------|------------------------------|------------------------------|------------|---------------------|------------------------------------|----------------------|--------------------------------|
| Colorado | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Total Affirmative Responses out of 46 | 30 | 38 | 36 | 36 | 27 | 36 | 39 |

Organization, Infrastructure and Resources

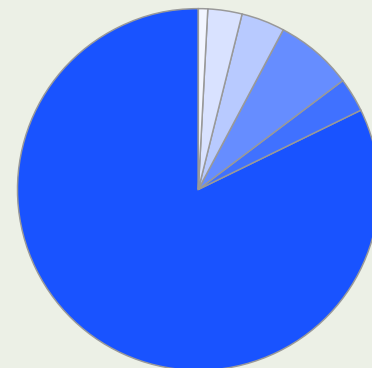
The following is a simplified organizational chart that demonstrates the location of the state's racial/ethnic minority health focal point in relation to the State/Territorial Health Official and/or other key public health offices:

Colorado Department of Public Health and Environment



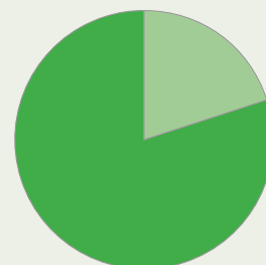
Total State Population:
4,628,300

Racial Distribution



- American Indian/Alaskan Native (1%)
- Asian (3%)
- Black/African American (4%)
- Native Hawaiian/Pacific Islander (0%)
- Other Race (7%)
- Two or More Races (3%)
- White (83%)

Hispanic/Latino Ethnic Distribution



- Hispanic/Latino Ethnicity (20%)
- Non-Hispanic/Latino Ethnicity (80%)

Note: People can self-identify as members of any racial group in the Census, as well as report having Hispanic/Latino ethnicity.

Source: 2006 American Community Survey, US Census Bureau

Strategic Planning

The Office of Health Disparities is working with the Minority Health Advisory Commission and the Interagency Health Disparities Leadership Council to develop a health disparities strategic plan for Colorado. The plan will be completed in 2008. At the time of the survey, the CDPHE incorporated and addressed racial/ethnic health disparities through the following objective and performance measures in its Departmental strategic plan:

Partnerships

- MH/HD activities are conducted and coordinated across multiple CDPHE divisions, programs and offices including: most of the programs within the Prevention Services Division (through the Division's Health Disparities Task Force); the HIV/STD, Immunization, Hepatitis Programs within the Disease Control and Environmental Epidemiology Division; the Center for Health and Environmental Information and Statistics; and several programs within the Environmental Divisions.
- CDPHE maintains partnerships with an array of external entities active in MH/HD including: local health departments, tribal government, other state government agencies, federal government, MH/HD advisory bodies, community- and faith- based and non-profit organizations, foundations, schools, universities, professional associations and clinical networks.

| | |
|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Objective: | Eliminate health inequities in Colorado |
| Performance Measures: | Level of Departmental workforce diversity overall and in management and policy-making positions; competency level of rural and local public health nurses across eight domains (assessment, cultural competency and public health sciences skills); percent of surveillance programs that report disease rates by race/ethnicity; number of programs in CDPHE that develop racial/ethnic health disparity reduction goals that address identified health disparity areas and conditions; number of programs within CDPHE utilizing data by racial/ethnic group for program planning, policy development and resource allocation; number of divisions in CDPHE that utilize the language assistance program to ensure meaningful access for individuals to the Department's programs, activities and services for individuals with limited English proficiency; number of partnerships with community-based organizations, educational institutions, businesses, local and state agencies to maximize community participation and develop more inclusive, collaborative public health efforts; number of individuals reached through Health Disparities Grants Program grantees to eliminate health disparities in cancer, cardiovascular and pulmonary diseases |

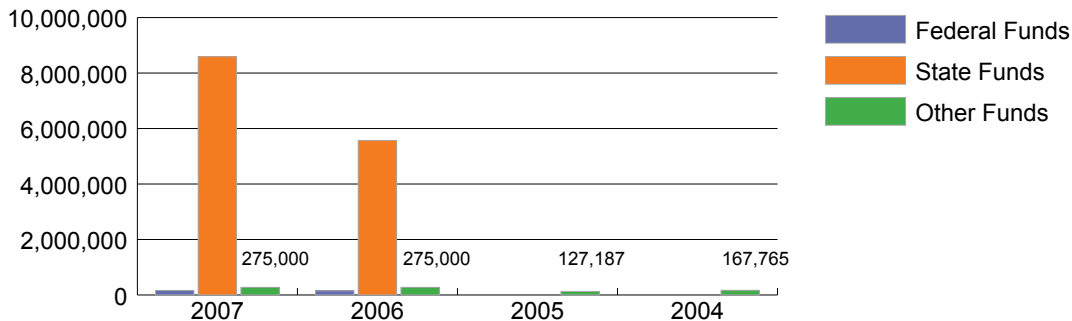
Human Capital Investments

The following staff dedicate all or part of their work hours to MH/HD activities at the CDPHE:

| Job Category | Total Number Dedicated to MH/HD | % of Work Hours Each Spends on MH/HD Activities |
|-----------------------------------|---------------------------------|-------------------------------------------------|
| Administrator/Director | 2 | 20% and 100% |
| Policy or Program Officer | 4 | 5% |
| Program Specialist | 5 | 100% |
| Clinical Consultant or Specialist | 1 | 100% |
| Epidemiologist | 1 | 50% |
| Administrative/Clerical Staff | 4 | 100% |

Financial Investments

The CDPHE reported the following as the annual budget for the Office of Health Disparities (OHD) for fiscal years 2004 through 2007. The budget represented below does not include funding for MH/HD-related activities carried out by other CDPHE programs and does therefore not represent the agency's total investment in minority health and health disparities. It should be noted however, that these CDPHE programs address health disparities not only related to race and ethnicity but also to geographic location (i.e. rural health disparities).



Activities

Interagency Health Disparities Leadership Council

The Interagency Health Disparities Leadership Council was formed in 2006 to serve as a resource for Colorado's leaders as they seek to improve health and health care for everyone in Colorado. It is an independent advisory council comprised of representatives from state agencies including the Departments of Corrections, Education, Health Care Policy and Finance, Higher Education, Human Services, Personnel; the Colorado Civil Rights Commission; federal agencies such as the HHS Region 8 Office of Minority Health; and from other entities such as community health centers, hospitals, foundations, universities, social service providers; and from communities impacted by health disparities. The mission of the Council is to provide leadership, education and resources to comprehensively eliminate health disparities in Colorado through collaboration, consultation, research and inclusion.

Partners and Funding

OHD staff time and resources for the Council are supported with limited funding from Kaiser Permanente. The OHD Minority Health Advisory Commission also supports the efforts of the Leadership Council.

Activity Outcomes

Expected outcomes from the Leadership Council include: increased organizational coordination, knowledge and awareness of health disparities in Colorado, health disparities policy, a comprehensive state-wide plan to address health disparities, and dissemination of practices that reduce health disparities.

Evaluation Methods

Under development

Activities continued...

Working Together: Colorado Health Disparities Conference

In 2006, the CDPHE held a three-day, three-part conference that focused on increasing local/state capacity to work with communities of color on reducing health disparities. Each day of the Conference focused on a different issue in health disparities: eliminating health disparities in Colorado, the culture of data, and mental health disparities. The Conference provided a forum to discuss current information on health disparities, explore opportunities to engage communities in the health disparities discussion, forge links with community-based programs to involve them in the state's strategic plan for addressing determinants of health, and develop a model for local planning to address health disparities.

Partners (and Funding)

Transition Supplements Grant from the Robert Wood Johnson Foundation (\$40,000), members of the conference planning committee including representatives from community-based organizations, and universities

Activity Outcomes

350 people attended the conference. Participants provided positive feedback regarding the quality of the speakers and events and the learning and networking opportunities generated by the conference.

Evaluation Methods

Analysis of survey evaluation forms from conference participants

Minority Health Advisory Commission

The Minority Health Advisory Commission provides input on health programming to the Executive Director of the CDPHE. The Commission provides a formal mechanism for community members to raise awareness of minority health issues, needs, and resources and strengthen collaboration between the Department and minority communities. The Commission also makes funding recommendations to the Office of Health Disparities and the CDPHE for the Health Disparities Grant Program. The OHD Minority Health Advisory Commission also supports the efforts of the Leadership Council.

Partners and Funding

The thirteen-member Commission consists of one member of the House of Representatives (appointed by the Speaker of the House of Representatives); one member of the Senate (appointed by the President of the Senate); and ten members representing Colorado's ethnic, racial, and geographic diversity (appointed by the CDPHE Executive Director). OHD staff time and resources for the Council are supported with limited funding from Kaiser Permanente.

Activity Outcomes

N/A

Evaluation Methods

N/A

Health Disparities Grant Program

Under the Health Disparities Grant Program, funds are awarded to support state-wide initiatives intended to reduce disparities in the prevention, early detection and treatment of cancer, cardiovascular and pulmonary diseases. The first cohort of grantees received 2-year funding for their prevention and treatment programs in February of 2006.

Partners and Funding

Colorado State Tobacco Tax funds 34 programs (for a total of \$9,085,324 since 2006). Partners include: the Minority Health Advisory Commission to the CDPHE Office of Health Disparities (OHD).

Activity Outcomes

CDPHE is conducting an analysis of final evaluation reports from the first cycle of program grantees.

Evaluation Methods

Grantee site visits, quarterly progress reports, evaluation plans and final reports

Colorado's primary contact for racial/ethnic minority health and health disparities is:

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