

History

The Virginia Department of Health's (VDH) Office of Minority Health was established in 1992 by the State Health Commissioner. Immediately prior to 2007, the OMH was housed in the Office of Health Policy and Planning (OHPP) along with the state office of rural health and the state primary care office. In 2007, OHPP was renamed the Office of Minority Health and Public Health Policy.

Health Priorities

The VDH has identified the following health priorities for the general population of Virginia:

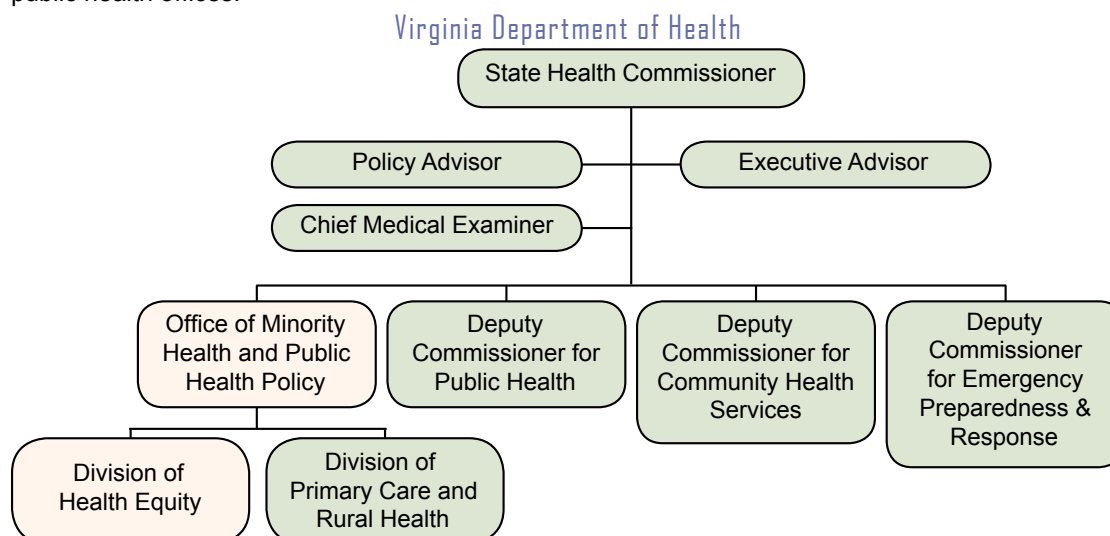
Health Priorities for the General Population
Reduce prevalence of obesity
Reduce prevalence of smoking
Increase access to safe and affordable drinking water
Increase immunization rates of children at two years of age
Reduce infant mortality
Reduce teenage pregnancy rates in targeted areas
Improve the quality of life and quality of health care provided to long term care facility residents who are diagnosed with pressure ulcers or at risk of acquiring pressure ulcers
Increase the influenza and pneumococcal vaccination coverage rates in adults 65 years of age and older

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
Virginia	✓	✓	✓	✓	✗	✓	✓
Total Affirmative Responses out of 46	30	38	36	36	27	36	39

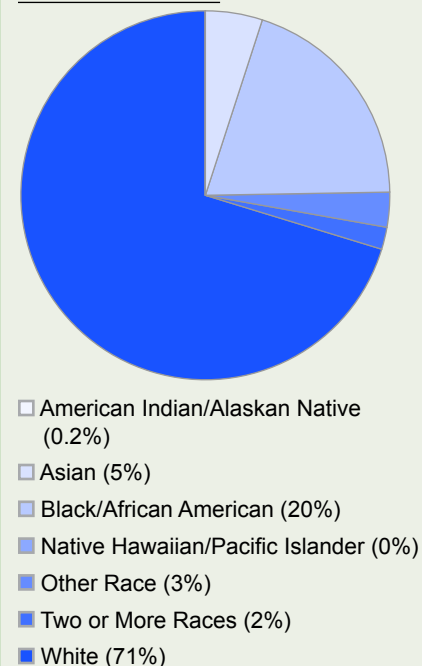
Organization, Infrastructure and Resources

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:

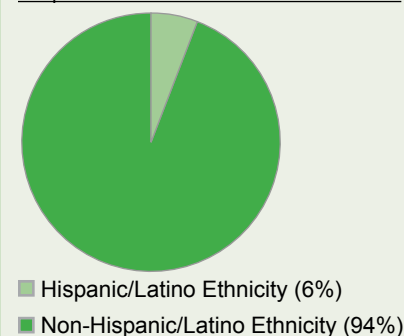


Total State Population:
7,642,884

Racial Distribution



Hispanic/Latino Ethnic Distribution



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 Virginia Office of Minority Health and Public Health Policy (VDH-OMHPPH) strives to advance health equity for all Virginians by identifying health inequities, assessing their root causes, and addressing them by promoting social justice, influencing policy, establishing partnerships, providing resources and educating the public. At the time of the survey, the VDH-OMHPPH was in the process of developing its strategic plan and seeking funds to support strategic initiatives that would achieve its health equity mission. The VDH-OMHPPH seeks to achieve this mission through the integration of social justice concerns into goal setting and performance measurement for health equity activities at VDH.

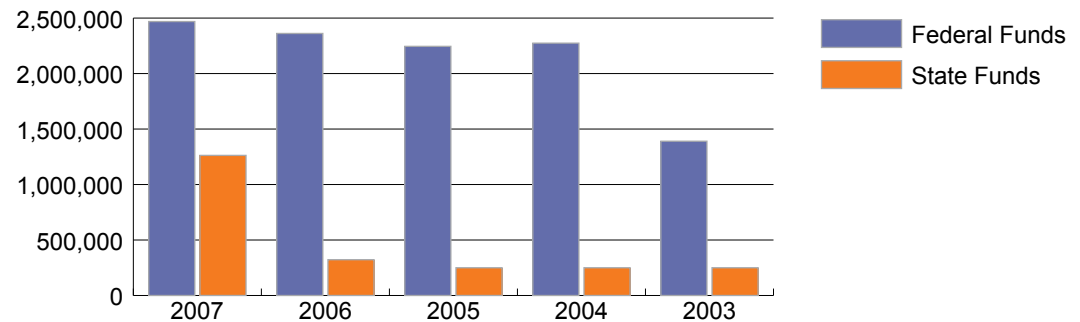
Human Capital Investments

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

Job Category	Total Number Dedicated to MH/HD	% of Work Hours Each Spends on MH/HD Activities
Administrator/Director	1	60%
Policy or Program Officer	1	100%
Program Specialists	3	100%

Financial Investments

VDH reported an annual budget from 2003 to 2007 for minority health and health disparities (MH/HD) activities that includes investments across all offices, divisions, and programs.



Activities

GIS Mapping and Spatial Analysis to Address Health Inequities

The OMHPPH is in the process of conceptualizing a partnership with the Office of Minority Health at the US Department of Health and Human Services (OMH/DHHS) to apply Geographic Information Systems (GIS) technology to mapping and targeting areas where populations experience significant racial/ethnic health inequities. OMHPPH would use spatial analysis to identify target areas at-risk for future infant deaths. Analyses would determine the associations between risk of infant deaths and the distribution of social determinants of health. This information would permit the OMHPPH to target and design specific, culturally-competent community-based participatory interventions to address particular health disparities and the associated social determinants.

Partners

OMH/USDHHS, the Human Services and National Business Group on Health

Activity Outcomes

Precise identification of geographic areas where particular health disparities exist, ability to design and target community-based participatory interventions for communities identified through GIS health disparities analysis

Evaluation Methods

Analysis of GIS mapping using health surveillance data and other data on socio-economic factors for Virginia

Partnerships

- The VDH consults with an external Minority Health Advisory Committee that supports and guides public health leadership on racial/ethnic minority health and health disparities (MH/HD) issues in the state.
- MH/HD activities are conducted and coordinated across the majority of VDH program offices.
- The VDH-OMHPPH Office includes the State Office of Minority Health, the State Office of Rural Health, and the State Primary Care Office. All of these work units address certain aspects of health inequities.
- VDH maintains partnerships with an array of external entities active in MH/HD including: local health departments, local government, tribal government, other state government agencies, federal government, MH/HD advisory bodies, community- and faith- based and non-profit organizations, health systems, foundations, schools, universities, professional associations and clinical networks.

Activities continued . . .

Virginia Culturally and Linguistically Appropriate Public Health Services (CLAS) Initiative

Individuals with limited English Proficiency (LEP) frequently experience cultural or linguistic barriers to accessing and utilizing health care in the United States. The VDH launched its Navigating the US Healthcare System CLAS training and information initiative in 2006 to address these contributing factors to health inequities. The Initiative translates commonly used clinical phrases into languages, other than English, that are spoken by significant percentages of Virginia's population and then instructs health care providers and patients about these phrases and their uses through visual flip books and the Initiative's Culturally-Appropriate Public Health Training Series. The curriculum and materials were tested with focus groups comprised of clients from racial/ethnic populations including high numbers of LEP individuals. The VA CLAS Initiative established a CLAS Act Web site that educates site users about cultural and linguistic barriers to health care, health disparities, and CLAS standards. The website is also a means for distributing translated CLAS health education materials and training curriculums to interested parties. Using one-time funds provided in 2007, CLAS is awarding \$170,000 in grants to local health districts to assist them in developing language services capacity.

Partners

Partners include the community health centers, Public Health Nursing Programs, Northern Virginia and Blue Ridge Area Health Education Centers, Refugee and Immigration Services of Richmond and Hampton Roads.

Activity Outcomes

Consistent increase in the number of visits and hits at the CLASActVirginia.org Web site, increased awareness regarding CLAS among state health care providers, 60 interpreters trained by language service providers funded through the VA CLAS Initiative

Evaluation Methods

Process and outcome evaluation including: WebTrends data results, number of medical interpreters trained by VA CLAS initiative, cultural needs assessments and evaluations conducted during CLAS trainings

Health Equity Initiatives: PBS Series- Unnatural Causes: Is Inequality Making Us Sick?

The VDH-OMHPPH has developed and launched a comprehensive educational campaign in conjunction with a national campaign that sounds the alarm about the extent of health inequities and their impact and costs in Virginia and nationally. The VDH-OMHPPH is utilizing the PBS series as a means to promote dialogue and understanding of how social determinants impact health. The VDH-OMHPPH facilitates forums/screenings and meetings for sharing information and strategies on addressing health inequities. VDH-OMHPPH has developed a train-the-trainer curriculum to support partners engaging in discussions and action planning to promote health equity by focusing on social determinants of health and promoting social justice. This activity will also link with a GIS Mapping activity to initiate community-based participatory interventions within communities facing significant health inequities and associated social determinants of poor health.

Partners

Partners include local health districts, community organizations, academic institutions, faith-based partners, non-profits, local and state government agencies, and other government agencies within the Health and Human Resources Secretariat.

Activity Outcomes

Consistent increase in the number of organizations seeking technical assistance in conducting forums/screenings and meetings to implement plans to promote health equity, documented changes in organizational policies and practices that incorporate a focus on promoting health equity

Evaluation Methods

Process and outcome surveys and evaluations indicating successful utilization of materials/presentations

Activities continued...

VDH-OMHPHP Website and E-Newsletter

Since 1992, the Office of Minority Health and Public Health Policy (OMHPHP) has maintained a comprehensive Web site that presents current information on national, state and local health inequities data, programs, partners, events and resources. The Web site highlights funding opportunities for state and local health equity activities, chronic disease interventions and health equity conferences. The OMHPHP began distributing an on-line newsletter regarding health equity issues, activities and events in Virginia and across the country in 2007 via subscribers to an OMHPHP listserv.

Partners

VAOMHPHP partners with local, state and national organizations that focus on health inequities.

Activity Outcomes

Increased awareness regarding national, state and local health disparities surveillance, resources and activities

Evaluation Methods

Tracking of hits and repeat visits at OMHPHP Web site, subscriptions to E-newsletter

Virginia Health Equity Statistical Data Reports

The OMHPHP produces annual minority health data reports and is currently working with the VDH Division of Health Statistics to create a Health Equity Report that will address health inequities and link them to social determinants of health and social justice. The report's expansion will allow for comparative analyses of social determinants of health, diseases and mortality.

Partners

Division of Health Statistics, Division of Chronic Disease and other agencies with health and SES data

Activity Outcomes

Precise information on health inequities, their trends and associated social determinants; usable data to target interventions that address health inequities and social determinants of health to high-risk populations

Evaluation Methods

Analysis of health surveillance data and other socio-economic factors for Virginia

Sisters Informing Sisters About AIDS (SISTA)

This program is administered within the VDH Division of Disease Prevention. It replicates an evidence-based HIV/AIDS intervention designed by and for sexually-active African American women. The intervention has demonstrated positive behavior change and sexual risk reduction during strict scientific review. The Virginia SISTA intervention is promoted and supported by the Diffusion of Effective Behavioral Interventions (DEBI) Program at the Centers for Disease Control and Prevention (CDC). The intervention encourages consistent condom use among African American women and works to strengthen their knowledge of HIV/AIDS transmission and their skills regarding gender and ethnic pride, sexual risk reduction and decision-making. Information is conveyed through a series of peer-led group sessions using social learning and gender/power techniques. VDH held its first SISTA train-the-trainer (TOT) course in 2004 and hosted another TOT course in 2007. Forty-two SISTA trainers currently offer SISTA learning sessions at six VDH contracted agencies.

Partners and Funding

Diffusion of Effective Behavioral Interventions (DEBI) Program/Centers for Disease Control and Prevention (CDC) and VDH-funded community-based organizations. Each cycle of SISTA training sessions costs an estimated \$7,000 to conduct.

Activity Outcomes

Continued requests to train additional SISTA facilitators, high client satisfaction, and willingness to apply new SISTA skills in participants' sexual relationships

Evaluation Methods

DEBI curriculum of core elements that ensures fidelity to SISTA model, client-level data collection for the CDC Program Evaluation and Monitoring System, and periodic behavioral risk assessments

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

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