

Department of Health Holds First Health Equity Summit to Examine Disparities

WARWICK – On May 7 nearly 400 community members and representatives from the fields of public health, healthcare, and academia gathered at the Crowne Plaza in Warwick to participate in the first Health Equity Summit of the Rhode Island Department of Health (HEALTH). They were joined by **ELIZABETH ROBERTS**, Secretary of the Executive Office of Health and Human Services, and **NICOLE ALEXANDER-SCOTT, MD, MPH**, Director Designee of the Department of Health.

The event, which featured nationally renowned keynote speakers, breakout session discussions, and music and dance performances, was called to examine health disparities in Rhode Island and to consider ways to make Rhode Island a more equitable state.

“Despite the great work being done by our healthcare providers, educators, community groups, and many more, we still see inequalities in health outcomes in Rhode Island,” said Dr. Alexander-Scott. “Rhode Island is a stronger, more vibrant place when all of our residents have the opportunity to attain their full potential.”

During the event, HEALTH released new data from the 2015 Minority Health Fact Sheets, highlighting health disparities by race and ethnicity for African Americans, Hispanics/Latinos, Asian/Pacific Islanders, and Native Americans.

Data show that in Rhode Island, certain racial and ethnic groups often feel the burden of health disparities. For example, the infant mortality rate for African-American Rhode Islanders is almost double the state average (11.2 vs. 6.6 per 1,000 live births), and the diabetes rate for Hispanic adults is 11.3%, compared to 7.2% for white adults. In addition, many health disparities exist that are not based on race or ethnicity. For example, almost a third of Rhode Island adults who did not graduate high school are considered obese.

Secretary Roberts focused on how the State’s reinventing Medicaid process ties in to the themes of the summit. “As important as paying for medical services is, so much of what drives health is what happens outside of a hospital or doctor’s office,” said Roberts. “It’s about our neighborhoods, the quality of our housing, safety in our communities, health literacy, and community support. We in Medicaid need to be a part of that. We must connect what we’re doing here today to healthcare reform.”

National experts from a variety of disciplines provided



VIDEO – Health Equity Summit 2015

the keynote presentations. **EDUARDO SANCHEZ, MD, MPH, FAAFP**, Chief Medical Officer for key-note presentations for the American Heart Association gave an address titled “Health Equity: Work to Do Beyond Affordable Care.” **MINDY THOMPSON FULLILOVE, MD**, a Professor of Clinical Psychiatry at the College of Physicians and Surgeons at the Mailman School of Public Health (Columbia University), talked about links between the environment and mental health. **CLINT SMITH**, teacher, poet, and doctoral candidate in Education at Harvard University with a concentration in Culture, Institutions, and Society, spoke about empathy across lines of difference.

Local speakers utilized breakout sessions to bring the national discussions to the community level and study ways to link these strategies to Health Equity Zones, local investments of HEALTH. Health Equity Zone projects are 11 federal, state, and local partnerships that support innovative approaches to prevent chronic disease, improve birth outcomes, and improve the social and environmental conditions of our neighborhoods. Health Equity Zones will help move the Summit agenda forward to achieve health equity in Rhode Island.

HEALTH also unveiled Community Connections RI, an online directory designed to facilitate relationships and connections among community organizations and to help them leverage local resources to advance the health equity agenda. Local organizations are encouraged to share their information through this online tool. ❖