

## Govt announces plan to reduce health disparities

April 8 2011, By LAURAN NEERGAARD, AP Medical Writer



Health and Human Services Assistant Secretary for Health Dr. Howard Koh is shown in this July 13, 2010 file photo taken at the Eisenhower Executive Office Building across from the White House in Washington. In a first-of-its-kind report, the government is recommending steps to reduce the disparities in health care between minority populations and white Americans. The plan being released Friday April 8, 2011 runs the gamut from improving dental care for poor children to tapping "promotoras," savvy community health workers who can help guide their Spanish-speaking neighbors in seeking treatment. But it acknowledges that giving everyone an equal shot at living a healthy life depends on far more than what happens inside a doctor's office \_ or steps that federal health officials can take Koh said. (AP Photo/Charles Dharapak, File)



(AP) -- From cradle to grave, minority populations tend to suffer poorer health and get poorer health care than white Americans. In a first-of-its-kind report, the government is recommending steps to reduce those disparities.

The plan being released Friday runs the gamut from improving dental care for poor children to tapping "promotoras," savvy community health workers who can help guide their Spanish-speaking neighbors in seeking treatment.

But it acknowledges that giving everyone an equal shot at living a healthy life depends on far more than what happens inside a doctor's office - or steps that <u>federal health officials</u> can take.

"It's also a product of where people live, labor, learn, play and pray," Dr. Howard Koh, assistant secretary of Health and Human Services, told The Associated Press. "We really need a full commitment from the country to achieve these goals."

HHS wouldn't put a dollar figure on its own pending projects, but said it plans to pay for them with money already in hand and not subject to Congress' ongoing budget battle.

The tight economy casts doubt on how much states and other groups may be able to chip in, said Dr. Paul Jarris, executive director of the Association of State and Territorial Health Officials.

But "we'll never be a healthy nation unless we address these inequities," Jarris said. "There's a lot of momentum finally building" to do so.

Recent years have brought some improvements in health disparities,



although racial and ethnic minorities still lag in many areas - from higher infant mortality rates to lower overall life expectancy. In between, they're more likely to suffer from a host of illnesses such as diabetes, heart disease, kidney disease and asthma.

Part of the problem is access to care: Minorities make up more than half of the 50 million people who are uninsured, the HHS report says. The Obama administration's year-old health-care overhaul addresses some of the insurance gaps.

But there's a growing appreciation that disparities are more complex. Even geography plays a big role - in shared ancestry and customs, local industry, easy access to fresh fruits and vegetables, and how easy and safe it is to get physical activity in a particular community.

Among the HHS plans outlined in Friday's report:

- -Working with states to increase by 10 percent the number of poor children who receive preventive dental care, including cavity-blocking sealants.
- -Hiring trusted local people to serve as community health workers who can help diabetics understand and stick to their doctor's care instructions. A Medicare pilot program has begun in Mississippi and Texas, and will spread to other areas.
- -Increasing use of trained promotoras, the Spanish term for those trusted locals. Head Start will use them to direct parents to health services.
- -Developing reimbursement incentives to improve the quality of care for minority populations, such as better prevention of heart disease and strokes.



- -New studies comparing which treatments work best for diabetes, asthma, arthritis and heart disease in minority populations.
- -Creating an online national registry of certified interpreters that doctors or hospitals can use for patients who don't speak English.
- -State grants to measure and improve community asthma care.

HHS held meetings around the country to gather input from state and local officials, community groups and average citizens on barriers to health equality, and a separate report reflects strategies for community efforts.

That inclusiveness should "bring more people to the work of eliminating disparities," said Cheryl Boyce, former director of the Ohio Commission on Minority Health. "It has to trickle down into community action."

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