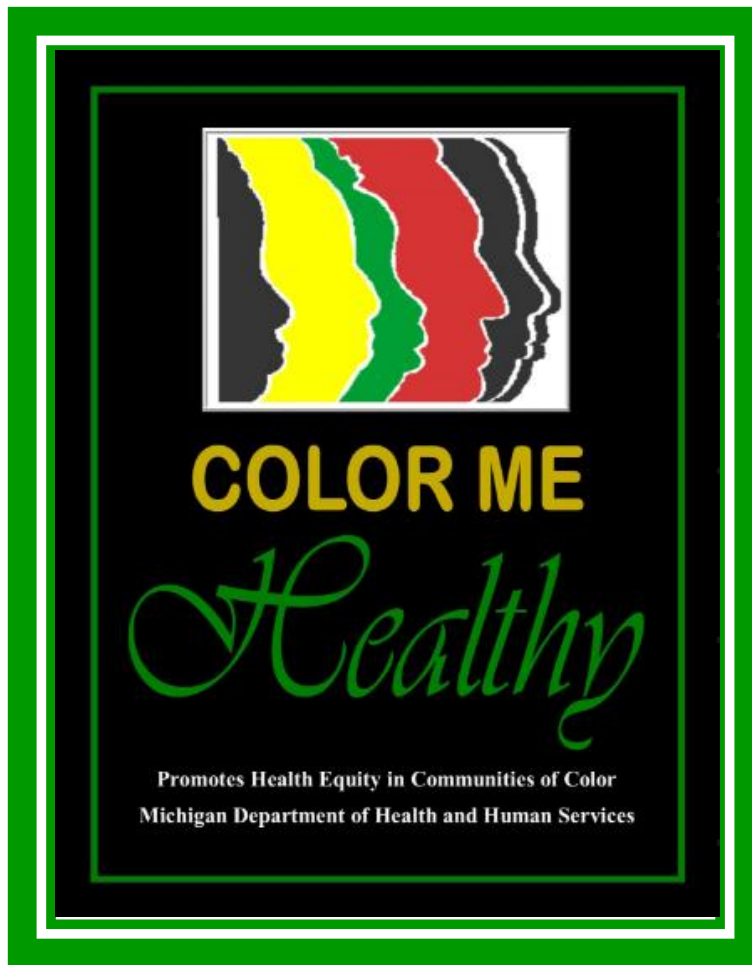


**Michigan Department of  
Health and Human Services**

**2018 Health Equity Report  
*Moving Health Equity Forward***



**Released April 2019**

# **2018 Health Equity Report**

## ***Moving Health Equity Forward***

### **Executive Summary**

The Michigan Department of Health and Human Services (MDHHS) 2018 Health Equity Report, “Moving Health Equity Forward,” serves as the annual report on the department’s efforts to address racial and ethnic health disparities as required by Public Act 653 of the Michigan Public Health Code (MCL Section 333.2227). Public Act 653 was passed by Michigan’s 93<sup>rd</sup> Legislature in 2006 and became effective in January 2007. It amends the Public Health Code (1978 PA 368). (See Attachment A.)

Public Act (PA) 653 focuses on five racial, ethnic and tribal population groups in Michigan: African American, Hispanic/Latino, American Indian/Alaska Native, Asian American/Pacific Islander, and Arab and Chaldean American. In accordance with this law, MDHHS has the responsibility to develop and implement a departmental structure to address racial and ethnic minority health disparities, establish minority health policy, promote workforce diversity, and implement various actions to advance health equity as specified in the provisions of the act.

The 2018 report presents data on current minority health status and disparities in Michigan, as well as explores in more detail three health issues with high population variance among communities of color. Population variance refers to the average disparity in the population between all of the racial and ethnic groups monitored and the total population. The three health issues highlighted are hepatitis B; youth violence; and infant mortality (data briefs are linked here). Additionally, this report spotlights innovative initiatives being implemented within MDHHS to address these prevailing disparities, such as:

- Evidence-based strategies to reduce the transmission of hepatitis B.
- A unique surveillance system to document violent deaths in Michigan and inform prevention efforts.
- Development of The Mother Infant Health and Equity Improvement Plan – an effort designed to build linkages and integration in the community, as well as address social and economic injustices that are root causes of disparities in infant mortality.

Finally, the 2018 report discusses three cross-cutting, collaborative efforts involving internal and external partners to advance equity in the department and throughout the state. These include:

- The MDHHS Diversity, Equity, and Inclusion Plan – a unified departmental plan to promote and foster a culture of diversity, equity and inclusion, and eliminate systemic inequities.
- The Equity and Cultural Competency Program – a multi-faceted initiative designed to build internal capacity among MDHHS leadership and staff to engage in and carry out health equity work.
- An interagency equity collaborative with the Michigan Department of Civil Rights and several other state agencies, which is working to develop common language around equity and establish a collective framework for strategically promoting and implementing equity in Michigan.

These efforts demonstrate how MDHHS is continuing to expand and evolve its health and social equity efforts as it works to carry out the provisions of PA 653 and move equity forward in Michigan.

## Attachment A: Public Act (PA) 653

Act No. 653  
Public Acts of 2006  
Approved by the Governor  
January 8, 2007  
Filed with the Secretary of State  
January 9, 2007  
EFFECTIVE DATE: January 9, 2007  
STATE OF MICHIGAN  
93RD LEGISLATURE  
REGULAR SESSION OF 2006

Introduced by Reps. Murphy, Gonzales, Zelenko, Williams, Whitmer, McConico, Leland, Clemente, Condino, Tobocman, Farrah, Lipsey, Alma Smith, Clack, Cushingberry, Plakas, Hopgood, Waters, Anderson, Stewart, Kolb, Meyer, Adamini, Brown, Gaffney, Virgil Smith, Hunter, Kathleen Law, Bieda, Meisner, Wojno, Vagnozzi, Taub, Accavitti, Stakoe, Gleason, Wenke, Ward, Byrum, Sak, Nitz, Moolenaar, Casperson, Dillon, Angerer, Bennett, Byrnes, Caul, Cheeks, Espinoza, Green, Hansen, Rick Jones, Kahn, David Law, Lemmons, Jr., Marleau, Mayes, McDowell, Miller, Polidori, Proos, Sheltroun and Spade

# ENROLLED HOUSE BILL No. 4455

AN ACT to amend 1978 PA 368, entitled “An act to protect and promote the public health; to codify, revise, consolidate, classify, and add to the laws relating to public health; to provide for the prevention and control of diseases and disabilities; to provide for the classification, administration, regulation, financing, and maintenance of personal, environmental, and other health services and activities; to create or continue, and prescribe the powers and duties of, departments, boards, commissions, councils, committees, task forces, and other agencies; to prescribe the powers and duties of governmental entities and officials; to regulate occupations, facilities, and agencies affecting the public health; to regulate health maintenance organizations and certain third party administrators and insurers; to provide for the imposition of a regulatory fee; to provide for the levy of taxes against certain health facilities or agencies; to promote the efficient and economical delivery of health care services, to provide for the appropriate utilization of health care facilities and services, and to provide for the closure of hospitals or consolidation of hospitals or services; to provide for the collection and use of data and information; to provide for the transfer of property; to provide certain immunity from liability; to regulate and prohibit the sale and offering for sale of drug paraphernalia under certain circumstances; to provide for the implementation of federal law; to provide for penalties and remedies; to provide for sanctions for violations of this act and local ordinances; to provide for an appropriation and supplements; to repeal certain acts and parts of acts; to repeal certain parts of this act; and to repeal certain parts of this act on specific dates,” (MCL 333.1101 to 333.25211) by adding section 2227.

*The People of the State of Michigan enact:*

Sec. 2227. The department shall do all of the following:

- (a) Develop and implement a structure to address racial and ethnic health disparities in this state.
- (b) Monitor minority health progress.
- (c) Establish minority health policy.
- (d) Develop and implement an effective statewide strategic plan for the reduction of racial and ethnic health disparities.

- (e) Utilize federal, state, and private resources, as available and within the limits of appropriations, to fund minority health programs, research, and other initiatives.
- (f) Provide the following through interdepartmental coordination:
  - (i) Data and technical assistance to minority health coalitions and any other local entities addressing the elimination of racial and ethnic health disparities.
  - (ii) Measurable objectives to minority health coalitions and any other local health entities for the development of interventions that address the elimination of racial and ethnic health disparities.
  - (g) Establish a web page on the department's website, in coordination with the state health disparities reduction and minority health section, that provides information or links to all of the following:
    - (i) Research within minority populations.
    - (ii) A resource directory that can be distributed to local organizations interested in minority health.
    - (iii) Racial and ethnic specific data including, but not limited to, morbidity and mortality.
  - (h) Develop and implement recruitment and retention strategies to increase the number of minorities in the health and social services professions.
    - (i) Develop and implement awareness strategies targeted at health and social service providers in an effort to eliminate the occurrence of racial and ethnic health disparities.
    - (j) Identify and assist in the implementation of culturally and linguistically appropriate health promotion and disease prevention programs that would emphasize prevention and incorporate an accessible, affordable, and acceptable early detection and intervention component.
    - (k) Promote the development and networking of minority health coalitions.
    - (l) Appoint a department liaison to provide the following services to local minority health coalitions:
      - (i) Assist in the development of local prevention and intervention plans.
      - (ii) Relay the concerns of local minority health coalitions to the department.
      - (iii) Assist in coordinating minority input on state health policies and programs.
      - (iv) Serve as the link between the department and local efforts to eliminate racial and ethnic health disparities.
    - (m) Provide funding, within the limits of appropriations, to support evidence-based preventative health, education, and treatment programs that include outcome measures and evaluation plans in minority communities.
    - (n) Provide technical assistance to local communities to obtain funding for the development and implementation of a health care delivery system to meet the needs, gaps, and barriers identified in the statewide strategic plan for eliminating racial and ethnic health disparities.
    - (o) One year after the effective date of this section and each year thereafter, submit a written report on the status, impact, and effectiveness of the amendatory act that added this section to the standing committees in the senate and house of representatives with jurisdiction over issues pertaining to public health, the senate and house of representatives appropriations subcommittees on community health, and the senate and house fiscal agencies.

This act is ordered to take immediate effect.  
Clerk of the House of Representatives  
Secretary of the Senate  
Approved

For more information about this report, please contact:  
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Health Disparities Reduction and Minority Health Section  
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