

National and State Efforts to Address Minority Health Disparities

The Philadelphia Negro (1898) W.E.B. DuBois published the first comprehensive documentation of the health and social conditions experienced by blacks in Philadelphia. Dr. DuBois' hypothesis rejected the widely held assumptions of inherent racial differences. His research presented evidence that the poor health status of blacks was not solely individually determined, but was largely influenced by community, environmental and institutional factors, including racism which adversely impacted communities of color.

National Negro Health Improvement Week (1914) Dr. Booker T. Washington initiated Negro Health Improvement Week along with other African American leaders of the time. It served to bring attention to the link between health, social and economic well-being.

National Negro Health Week (1915) The Office of Negro Work officially recognized

National Negro Health Week. However, the dismantling of the Office of Negro Work in 1951 sounded the death knell for the National Negro Health Movement.

Report on Secretary's Task Force on Black and Minority Health (1985) Released Margaret Heckler, Secretary of Health and Human Services, this report documented significant disparities in the burden of illness and mortality experienced by Blacks and other minority groups in the US population. It included recommendations for improving minority access to quality health care, expanding health promotion and health education outreach activities, increasing the number of minority health care providers, and enhancing Federal and State data collection activities to better report on minority health issues.

Health and Human Services (HHS) Office of Minority Health (1986) Establishment of this Office represents one of the most significant outcomes of the 1985 Secretary's Task Force *Report on Black and Minority Health*. The mission of the Office of Minority Health is to improve the health of racial and ethnic minority populations through the development of health policies and programs that will eliminate health disparities.

Michigan Office of Minority Health (1988) Established as a recommendation of the Director's Task Force, this Office was established to provide a persistent and continuing focus on assuring health equity and eliminating health disparities among Michigan's populations of color. Populations served include: African Americans, American Indians/Alaska Natives, Arab and Chaldean Americans, Asian Americans and Pacific Islanders and Hispanics/Latinos.

Minority Health in Michigan: Closing the Gap (1988) This report represents the work of the Director's Task Force on Minority Health. It was the first comprehensive report on health disparities for Black, Hispanic, Arab American, Asian/Pacific Islander and Native Americans in Michigan.

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Health and Human Services (HHS) Office of Minority Health National Cultural & Linguistically Appropriate Standards (2000)

The Office of Minority Health National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health provide recommendations for the promotion of health equity through providing clear plans and strategies to guide collaborative efforts among stakeholder organizations and agencies that address racial and ethnic health disparities across the country.

National Minority Health and Health Disparities (2002) The 107th Congress passed a joint resolution (H. Con. Res. 388) to establish a National Minority Health and Health Disparities Month. This resolution represented a collective effort of committed organizations and individuals throughout the U.S. It served to revive and expand Dr. Washington's vision to eliminate disparities in all vulnerable populations. **Public Act 653 (2007)** Sponsored by Representative Dr. Michael C. Murphy in 2006, this amendment to the Public Health Code requires the Michigan Department of Community Health to take specific actions to monitor and address health disparities that affect Michigan's racial and ethnic minority residents. This act was passed by the 93rd Legislature and took effect on January 1, 2007. It requires the submission of an annual report of progress to the Michigan legislature.

National Minority Health Month (2010) The National Minority Health Month Foundation and the Federal Office of Minority Health launched National Minority Health Month (NMHM) in support of Healthy People 2010. National Minority Health Month is now observed annually in the month of April throughout the U.S.

Michigan Health Equity Roadmap (2010) The Roadmap resulted from a yearlong process of community conversations, data review, best practices research and discussions with public health experts. This document, developed by MDCH Health Disparities Reduction and Minority Health Section, presents a vision and framework for improving the social and health status of racial/ethnic populations in Michigan.

National Stakeholder Strategy for Achieving Health Equity (2011) This document provides a common set of goals and objectives for public and private sector initiatives and partnerships to help racial and ethnic minorities -- and other underserved groups -- reach their full health potential.

Michigan Health Equity Toolkit (2012) This multi-media toolkit explores how social factors impact health for racial and ethnic minority populations in Michigan. It includes a six-part video series, 'Holes in the Mitten' which features Michigan citizens, academicians, public health professionals and others to raise awareness and to highlight initiatives designed to achieve health equity for racial and ethnic populations.

HHS Office of Minority Health National Enhanced Cultural & Linguistically Appropriate Standards (2013) The National Enhanced Cultural & Linguistically Appropriate Standards (CLAS) are built upon the groundwork laid by the original National CLAS Standards. Recognizing diversity, the goal of the enhanced standards is to ensure that every individual has the opportunity to receive health and healthcare services that are culturally and linguistically appropriate.