

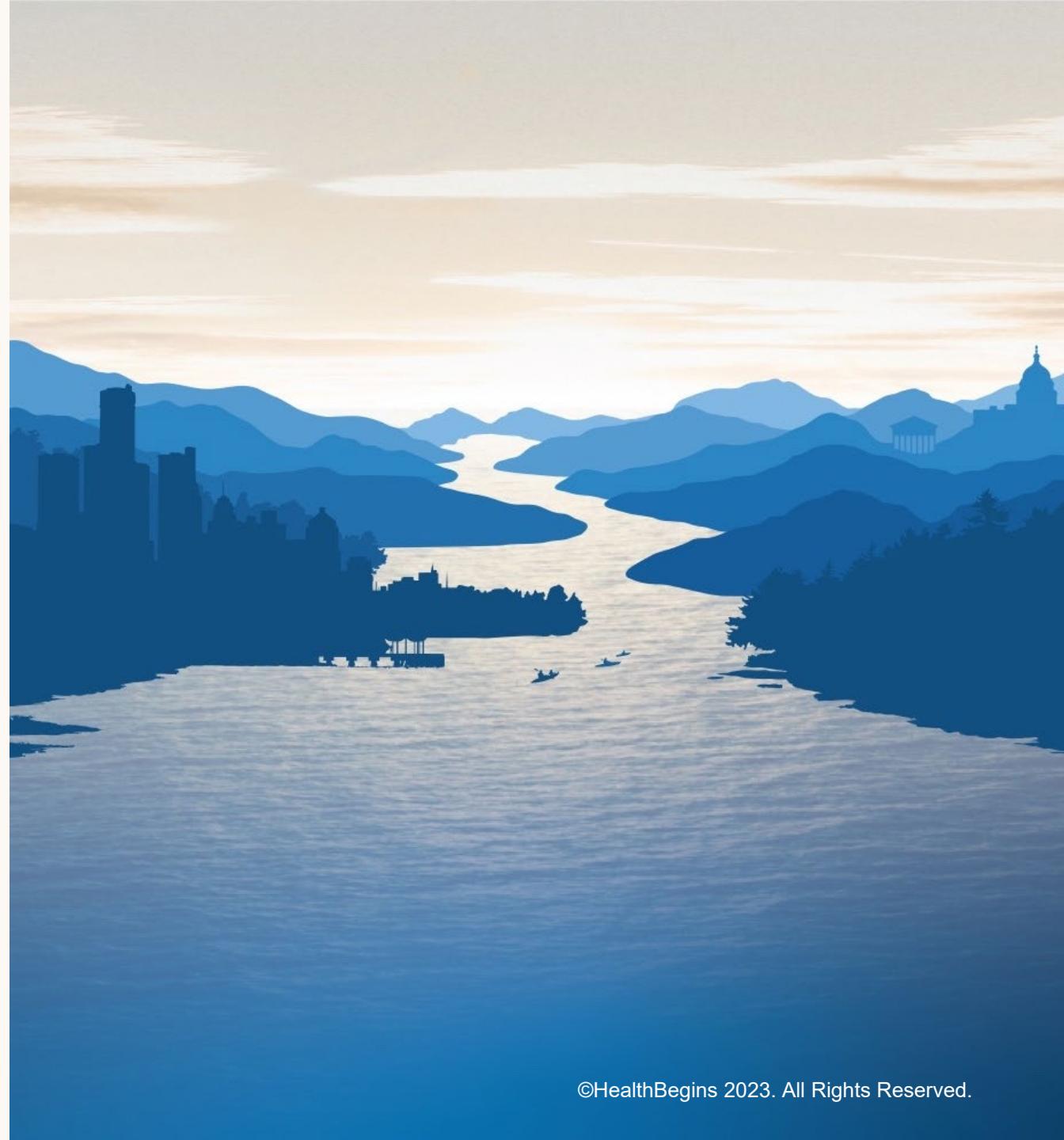
Promise, Peril & Opportunity

Charting a Path Towards Health Equity

Rishi Manchanda MD MPH
CEO, HealthBegins

NASEM Roundtable on Promotion of Health Equity

October 2023



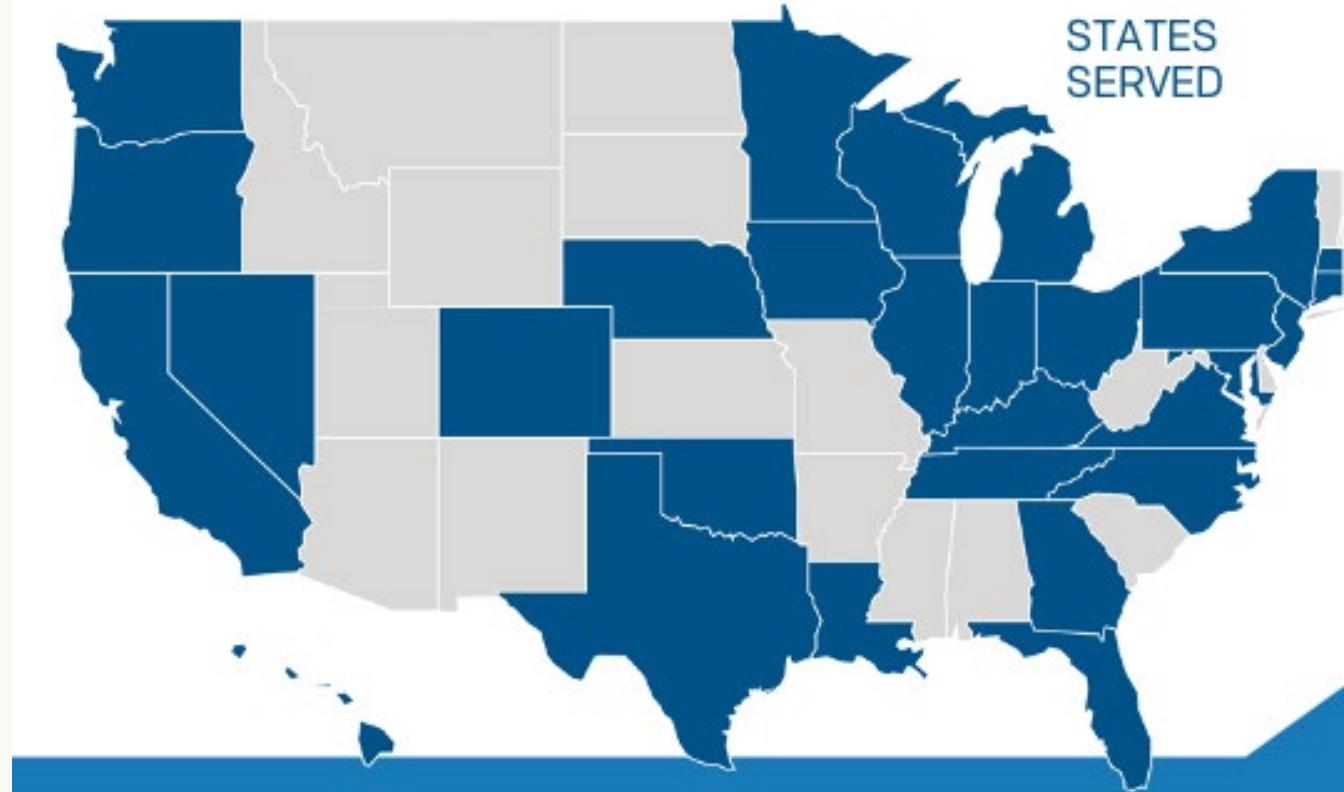
WHAT WE DID IN 2022...

29
STATES
SERVED

Who we are

HealthBegins is a national mission-driven strategy and implementation firm that helps Medicaid-serving health plans, health systems, and CBOs to exceed health care equity and social needs requirements and achieve long-term impact for people and communities harmed by societal practices.

Our goal is to advance health equity outcomes with 250 communities across the country by 2025.



185 COURAGEOUS
LEADERS
SUPPORTED

4,638
REGISTRANTS ACROSS
ALL WEBINARS

65
COMMUNITIES
WHERE WE
HELPED DESIGN
AND IMPLEMENT
UPSTREAM
STRATEGIES

Our work is informed by key observations

Health and social inequities are experienced as harm.

Social arrangements, including structural racism, put some people in harm's way.

Equity is not just the absence of harm or unjust differences, it's the presence of systems that promote and preserve healing, opportunity, and justice.

Since structural violence and harm is spatialized, institutions need a portfolio of strategies to advance health and social equity that is place-based, outcomes-focused, and works across levels of change.

Courageous leaders need support and solidarity to implement these strategies, and to transform their institutions, relationships, communities and themselves in the process.



We are at an inflection point in our health equity journey

Promise

- **We've come a long way** in the last few years in centering equity and pursuing health & social care integration, with advances in systems, standards, policy, and some notable innovation

Peril

- As health equity & “SDOH” strategies spread, we run the **risk of whitewashing, ignoring & perpetuating** the inequitable social arrangements that put people in harm’s way

Opportunity:

- We can take steps to **ensure equity efforts remain focused on reallocating power and resources** and dismantling structures that drive health and social inequities



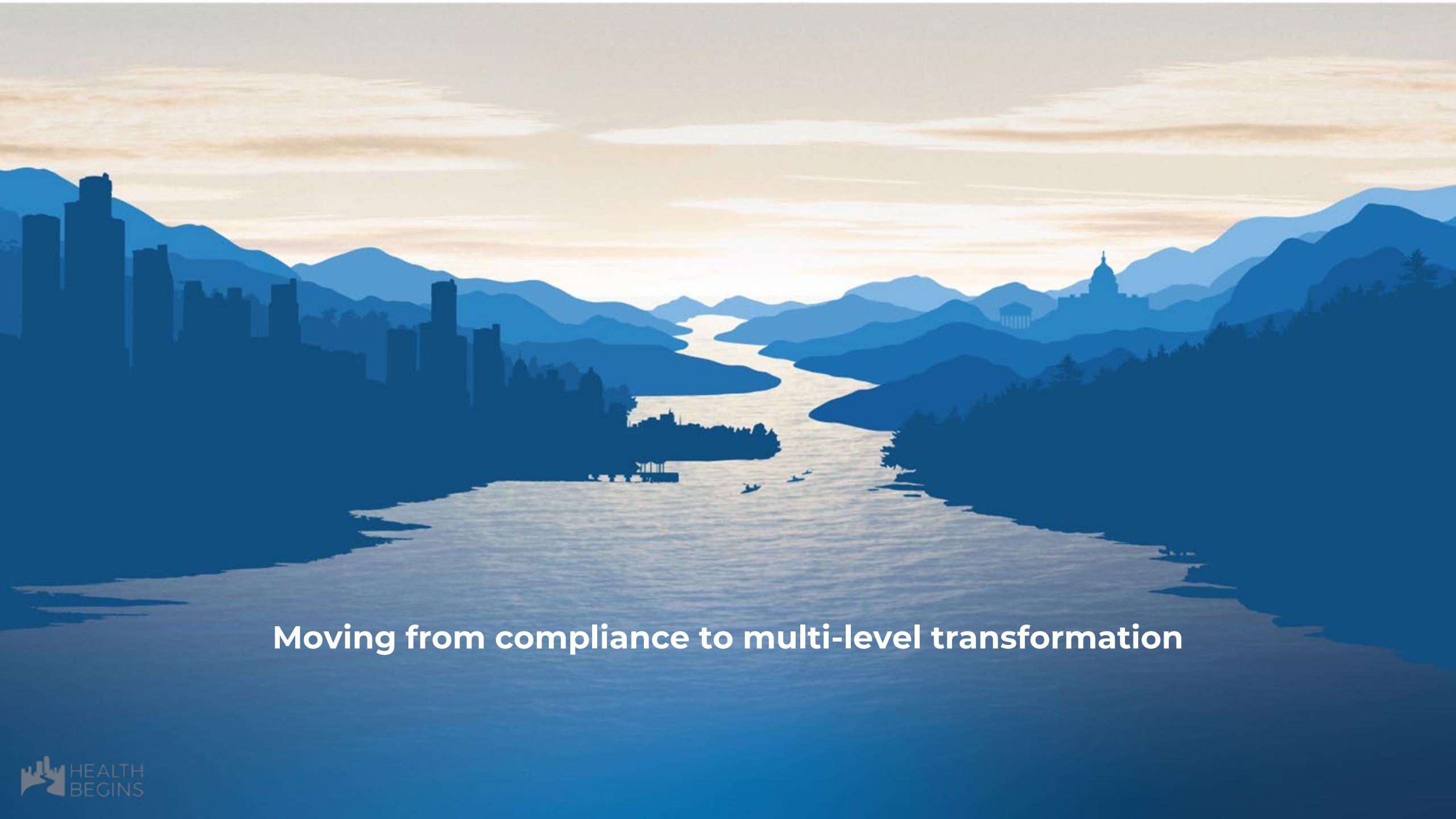
Developing a shared structural understanding of health equity

“Give a man a fish and you feed him for a day;
teach a man to fish and you feed him for a life time.”

But...

- why not teach a woman to fish?
- what if the pond close to home is polluted?
- what if this family & neighbors have been historically denied access to resources to fish (e.g. rods, tackle, permits) due to poverty, racism, sexism, homophobia and/or xenophobia?

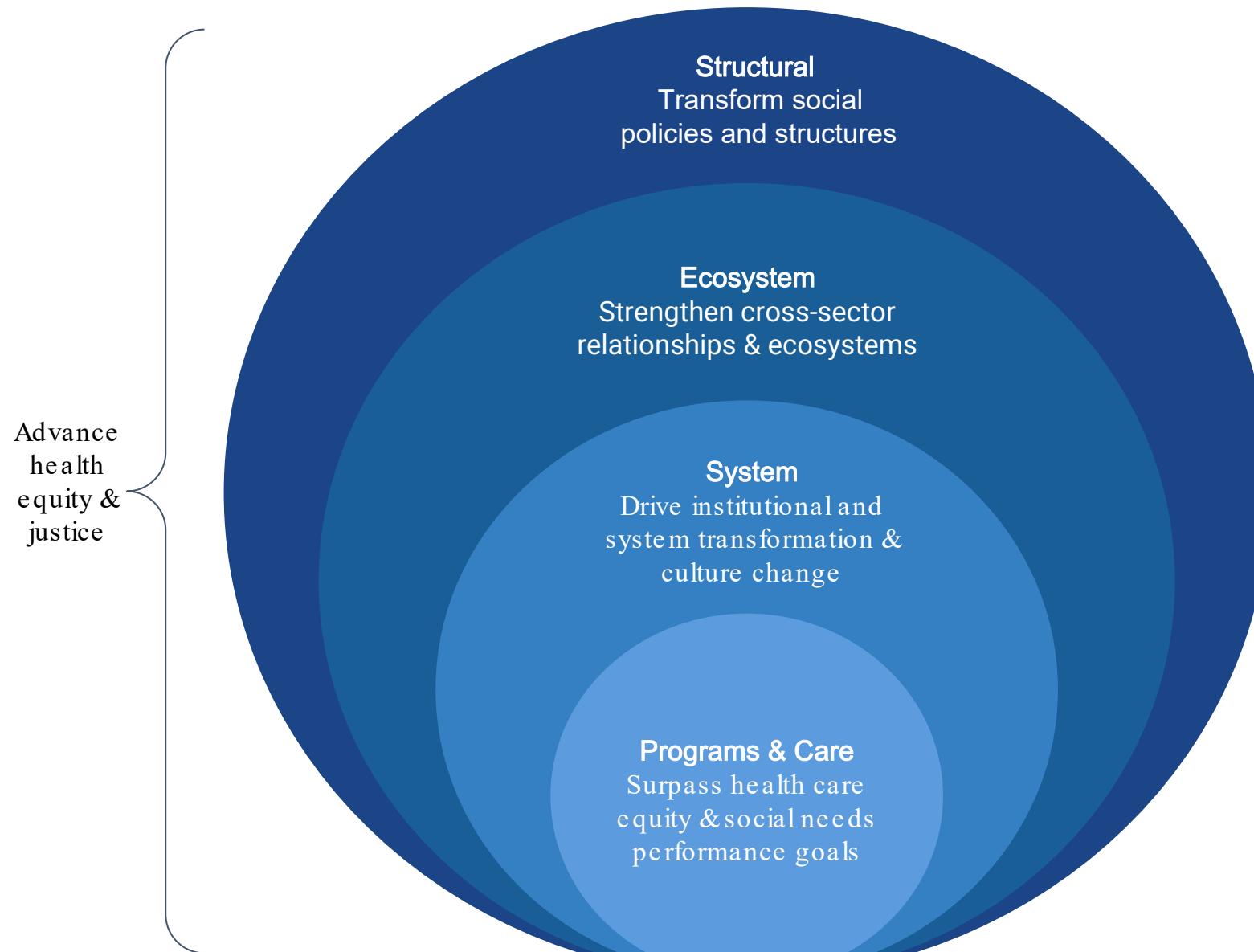




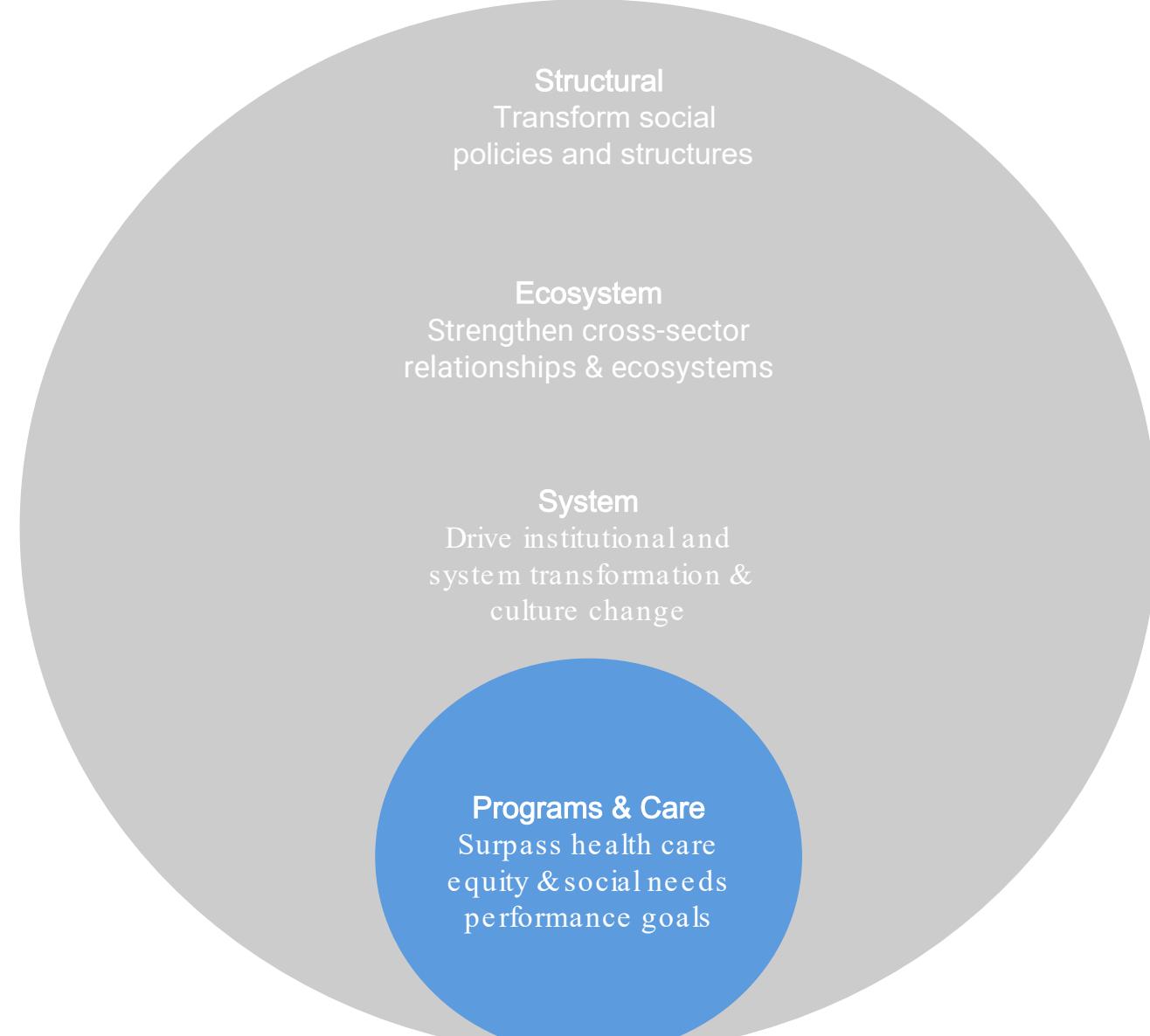
Moving from compliance to multi-level transformation

Where are leaders and teams investing their energy and resources to help achieve health equity goals?

Compass for Health Equity Transformation



To achieve health equity goals, how is your institution working to improve current programs and care?



Compass for Health Equity Transformation

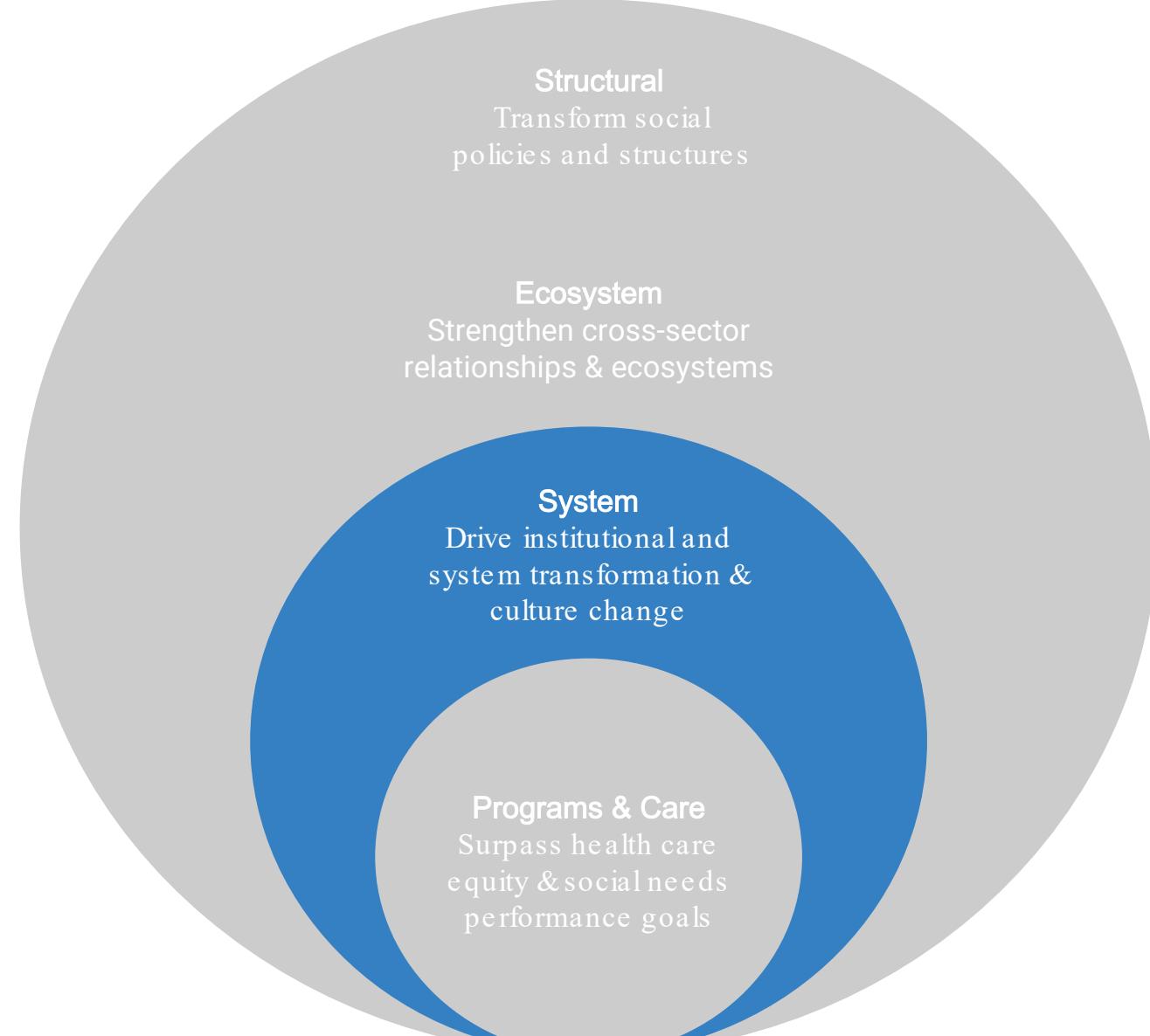
Citation: Rishi Manchanda, Kathryn Jantz, Sadena Thevarajah. *Compass for Health Equity Transformation*. HealthBegins. Los Angeles, May 2023

Aims

- Improve **program & care delivery** effectiveness, clarify goals, and achieve key performance measures to reduce health care inequities and associated social inequities
 - Improve completeness and quality of demographic **data** (REaL, SOGI, social needs, ability, income, geography) and then use that data to **disaggregate and stratify outcomes by populations and by place**
 - Embed equity-focused care models and **continuous improvement** into quality, safety, and all service lines
 - Improve **integration of care** (health, social services, behavioral health) to address social drivers of health care inequities
 - **Remove department or program - level drivers** of health care inequities **impacting patients**

*Advance these aims using *Upstream, Equity-Focused Quality Improvement* methods, Community Health Detailing, data management and workflow integration tools.

To achieve health equity goals, how is your institution working to drive system transformation?



Compass for Health Equity Transformation

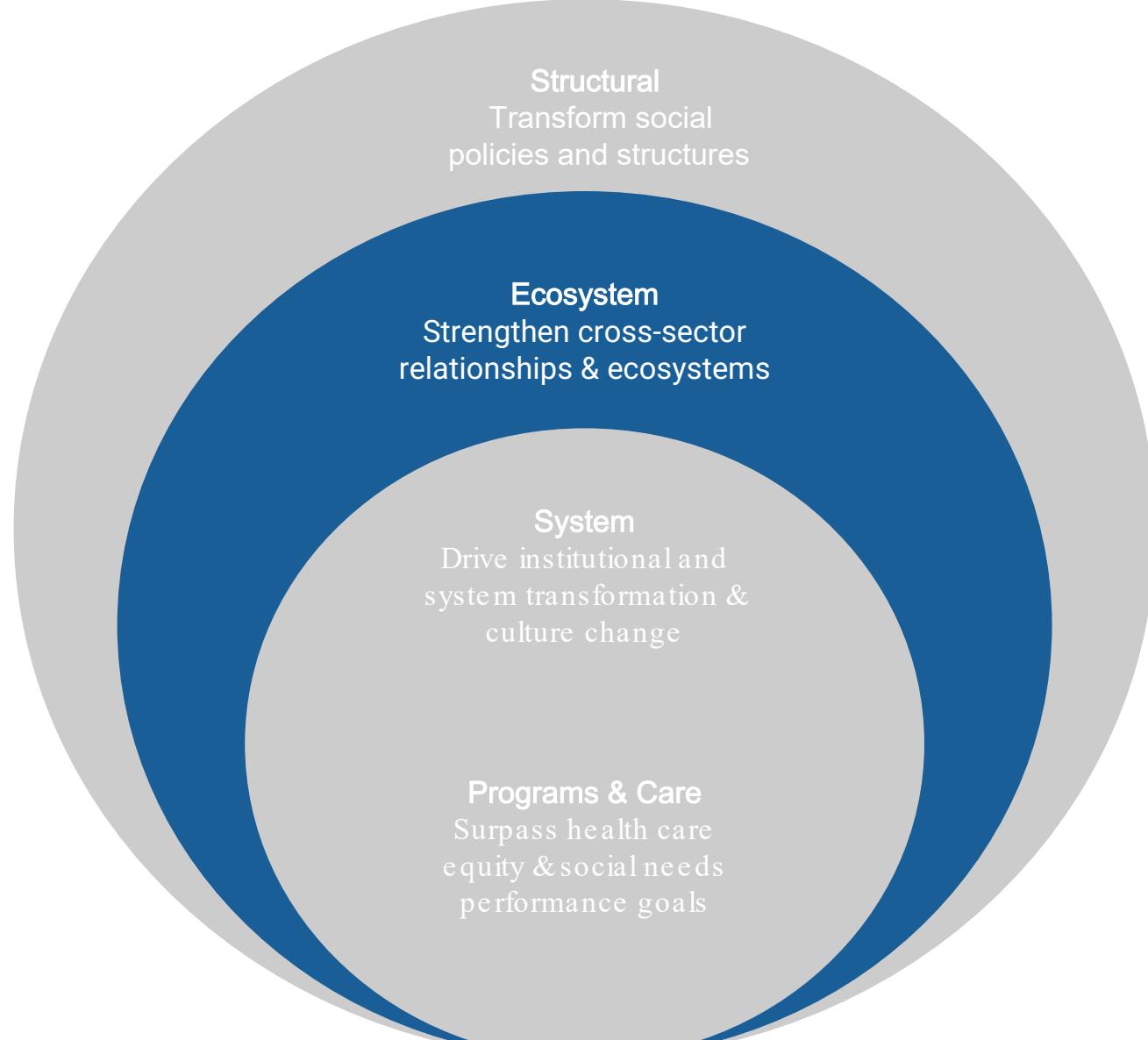
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Aims

- Create effective, just, equitable, and inclusive **institutions and systems** by:
 - Improve **culture** of equity, diversity, inclusion and belonging
 - Improve shared knowledge, understanding, **motivation and accountability** for health equity
 - Develop workforce and leadership **competencies** to guide culture change and multi-level transformation
 - Strengthen **organizational capabilities** (internal leadership, governance structures & data systems) for health equity
 - **Remove institutional drivers** of healthcare and social inequities *impacting patients and employees*

*Achieve these aims with the E=AMC² Measurement Framework for Institutional Transformation & Culture Change, along with scheduled and JIT training in core competencies, and DEIB strategies.

To achieve health equity goals, how is your institution working to strengthen local ecosystems?

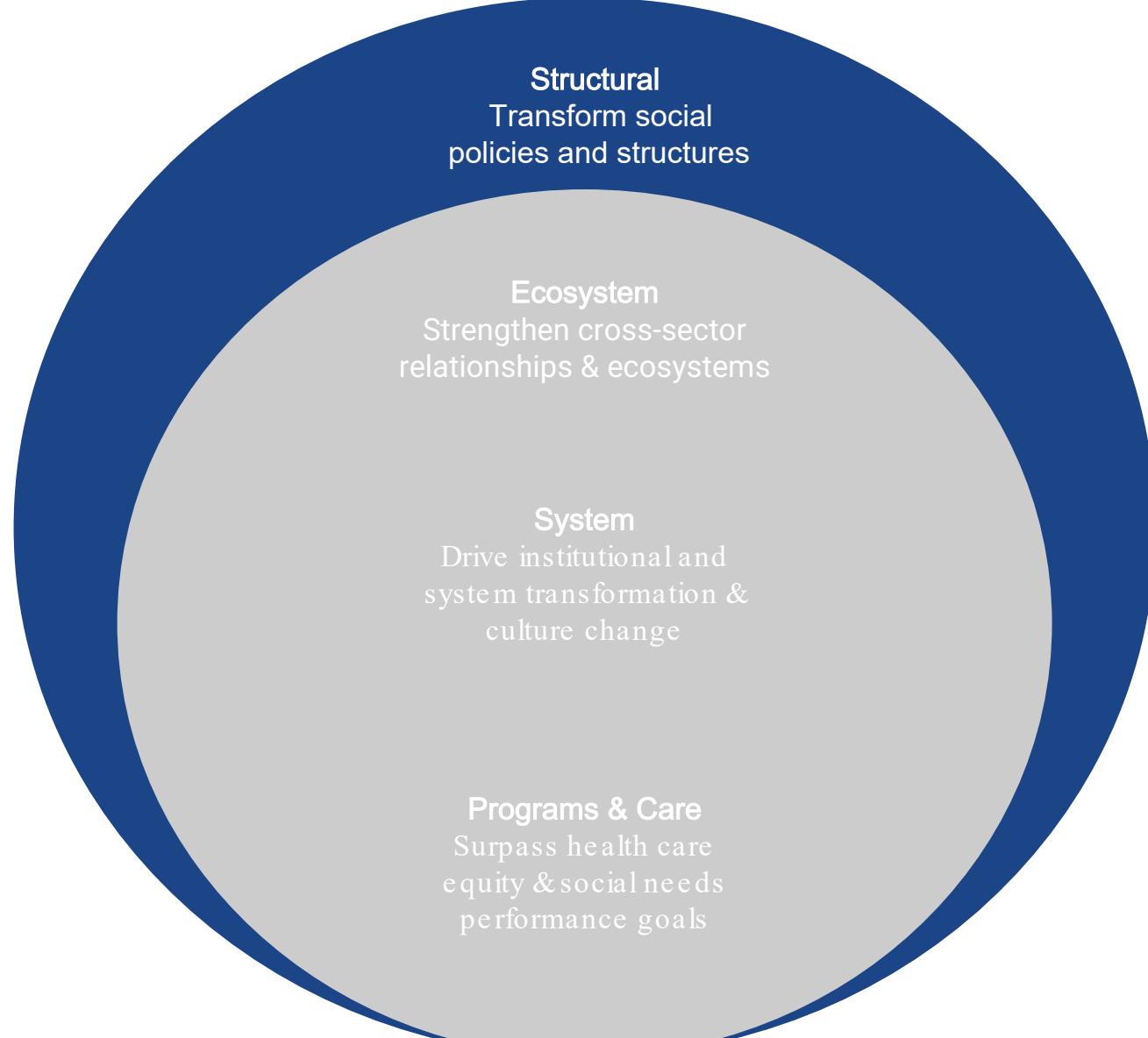


Aims

- Help build a high-performing, just, and equitable cross-sector and multi-level health **ecosystem** in your community by:
 - Improve **adequacy and performance of networks** supporting equitable health & social care integration
 - Shift to an **impact investment** approach to measuring value and managing spend
 - **Pool and equitably reallocate** resources and rewards among partners and to address local social determinants of health equity
 - Improve cross-sector **data** sharing, infrastructure and governance
 - **Remove drivers of healthcare, health, and social inequities** *among residents in a given geography*

*Achieve these aims using upstream, equity-focused strategic and investment planning services and tools

To achieve health equity goals, how is your institution helping to transform policies & structures?



Aims

- Replace and counteract social policies and **structures** that cause ongoing harms, *and* support policies that promote healing and justice.
 - Expand **investments and support for structural interventions** and coalitions to strengthen public health, expand primary care, and reduce health and social inequities
 - Strengthen and support **community-centered governance** and equity-focused accountability for healthcare institutions
 - **Improve civic engagement** and enfranchisement among historically marginalized employees, patients, and residents.
 - **Advocate** for local, state and federal laws and policies that dismantle structural drivers of inequities and that promote health equity and racial justice.

*Achieve these aims using the Structural Interventions Guide and working closely with partner institutions and movements



Managing balanced health equity strategic portfolios

We must align investments and strategies to reduce health inequities impacting specific populations in defined places

- **Define a population:** Adults with diabetes who visit the ER or are admitted frequently
- **Identify a pattern of inequity:** Racial health care inequities in quality measures that disproportionately impact adults with diabetes who self-identify as Black
- **Identify places most impacted by inequities :** 01214, 01245, 01248
- **Identify major social & structural drivers of the health care inequity:** Food & financial insecurity



Condition: Diabetes
Inequity: Racial
Social Driver(s): Food & financial insecurity
Place(s): 01214, 01245, 01248

A balanced health equity strategic portfolio includes coordinated investments across multiple levels of intervention and prevention

Upstream Strategy Compass for Health Equity Transformation	Programs & Care	System	Ecosystem	Structural
Promotion				
Primary prevention				
Secondary prevention				
Tertiary prevention				



“There is never a time in the future in which we will work out our salvation. The challenge is in the moment, the time is always now.”

- James Baldwin