

# Strengthening Community Collaboration to Reduce Health Disparities and Advance Equity

National Academy of Science,  
Engineering, and Medicine

Anita Chopra, MD,FACP  
University of Washington School of Medicine  
UW Long Covid Recovery & Rehab  
Founder and Medical Director,  
Northwest Health & Wellness

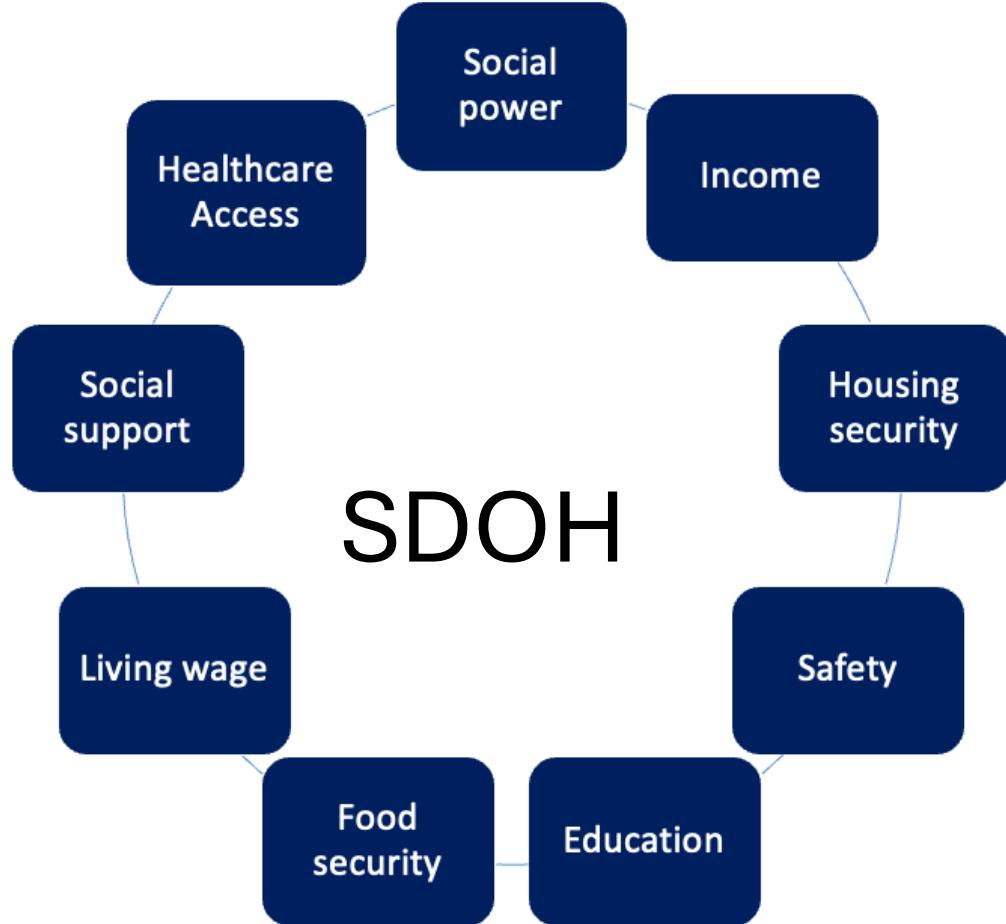


# 3 points to unpack:

1. Barriers to accessing healthcare and health resources are manifold and changing.
2. Community-based care means far more than transplanting a conventional medical office into a neighborhood.
3. Training a next generation of physicians as health advocates must happen in community-based care settings.

1. Barriers to accessing healthcare and health resources are manifold and changing.

# Access affects most health outcomes.



# Trust

Tackling access AND trust crises:  
Meeting people where they are.

# Not just bricks and mortar: Clean Hands Collective



## The Seattle Street Sink makes hand washing easy and accessible for anyone, anywhere...

The Seattle Street Sink is a do-it-yourself solution that provides a publicly accessible place for people to wash their hands. The sinks are made from off-the-shelf parts that connect to a hose bib on public or private property. Water from the sink drains to a trough filled with soil and water loving plants – a combination hand washing station and rain garden!



# Community partnerships strengthen our healthcare ecosystem.



# Access

- Proximity.
- Social safety.
- Culture and language concordance.
- Relational, not just transactional.







2. Community-based care means far more than transplanting a conventional medical office into a neighborhood.





# Community coalition driven interventions

- Review of 58 intervention studies.
- Connect multiple health sectors with minoritized communities.
- Benefit health behaviors, health outcomes, social care delivery.

Anderson LM, Adeney KL, Shinn C, Safranek S, Buckner-Brown J, Krause LK. Community coalition-driven interventions to reduce health disparities among racial and ethnic minority populations. Cochrane Database Syst Rev. 2015 Jun 15;2015(6):CD009905. doi: 10.1002/14651858.CD009905.pub2. PMID: 26075988; PMCID: PMC10656573.

3. Training a next generation of physicians as health advocates must happen in community-based care settings.





# Trainees gain clinical skills.

- Communicating with patients in a more relaxed setting.
- Gaining cultural insights.
- Recognizing social determinants and access barriers.



Community engagement is a critical venue for  
moral development of our trainees.

- Empathy and common humanity.
- Compassion.
- Ethics of care – we are in caring relationship with our patients.
- Social justice (equity)





Community based healthcare is collaborative, non-hierarchical, and connecting.



# Health advocacy and student professional identity formation

- Med students can acquire advocacy skills quickly and early in their training.
- Health advocacy skills → professional self-efficacy and ability to contribute.
- Bring these advocacy skills into their hospital training.

# Acknowledgments

Steven Rosenzweig, MD

Professor of Emergency Medicine (Palliative Medicine) and Director of the Office of Community Engagement.

Director, Drexel Med's curricula in professionalism, bioethics, humanities and health advocacy

Somnath Mukherjee, MD

Professor of General Internal Medicine, UW Medicine

Director for Faculty Development in Clinical Teaching for the Center for Learning and Innovation in Medical Education (CLIME), and directs the UWSOM / CLIME Clinical Teaching Certificate Program