Concurrent Breakout Session B
Translational Health Equity Science
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#XUHDCon #1JGCollabs
Accreditation

**UAN: 0024-0000-19-012-L04-P**

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DISCLOSURE STATEMENT

Speakers for this session have nothing to disclose. Any updates in disclosure will be made from the podium.
SPEAKER

Amanda Merck, MPH
Salud America!
Childhood Trauma Increase Risk of Teen Obesity

Amanda Merck, MPH
Research Area Specialist

Salud America!
Institute for Health Promotion Research
UT Health San Antonio

www.salud-america.org  /  @SaludAmerica
Who We Are: A national Latino-focused organization based at UT Health San Antonio that creates culturally relevant & research-based stories, videos, & toolkits to inform and inspire healthy change & health equity for all.

Why Latinos: Latinos are a rising U.S. powerhouse, but suffer high rates of childhood obesity (~39%), food insecurity (~15%), exposure to child trauma, and more.

How We Activate Communities: Our award-winning multimedia content helps 225,000+ community and school leaders lead healthy changes so Latino and all kids and families can equitably live, learn, work, & play.
What We Do

• Annual Research Reviews
• Digital content curation:

Collect

Our curators collect resources, changes, heroes

Craft

Tailored content featuring heroes, culture, geography

Connect

Disseminate via salud-america.org, email, social, Tweetchats


2018 External Eval: Salud America! members...

• 179—Latino child health policy wins
• 96—general public health policy wins
Types of ACEs
- Parental:
  - Substance abuse
  - Divorce
  - Domestic violence
  - Incarceration
  - Death
- Witnessing violence
- Food insecurity
- Racism and bullying
- Mental illness in family
- Chronic poverty
- Physical, sexual, emotional abuse
- Physical/emotional neglect

ACEs Effects
- Aggression, irritable, whiny, clingy, moody, and distrust of others
- More headaches, stomachaches, and overreaction to minor bumps and bruises
- Difficulty identifying or labeling feelings, communicating needs and controlling impulses
- Problems with focus, easily startled, and over-reacts to sounds, touch, and sirens
- Dissociation, checking out, and under-reaction
- Chronic absenteeism, attention problems, suspension, and expulsion
- Smoking, substance abuse, teen pregnancy, dropping out of high school, failed relationships, domestic violence, and involvement in criminal justice system
- Anxiety, depression, cardiovascular disease, diabetes, cancer, stroke, asthma, lupus, multiple sclerosis, osteoporosis, viral infections and autoimmune diseases
51% of U.S. Latino kids have at least 1 ACE (vs. 40% of white kids).

According to one study, 77.8% of Latinos have at least 1 ACE and 28.7% have 4 or more.

More important than exposure to any specific event is the accumulation of multiple ACEs.
The State of Latino Early Childhood Development: A Research Review, salud.to/earlydev

ASSESS CHILDHOOD HISTORY
AND INCLUDE DEVELOPMENTAL/BEHAVIORAL
SCREENING IN ROUTINE PRIMARY CARE OR
HOME VISITS TO IDENTIFY AND ADDRESS
ADVERSE EXPERIENCES AND OTHER
HEALTH ISSUES EARLY.

LATINO KIDS EXPOSED TO MANY
TRAUMAS ARE AT RISK FOR:

↑ obesity
↑ risk of future health issues
↑ anxiety, withdrawal, aggression
↑ substance use
↓ language, literacy, math skills
↓ attention in school
Our Curation to Address ACEs

salud.to/traumaissues
Hormone Level Changes
Alters HPA axis, elevates blood pressure and glucose levels, and disrupts inflammatory response system.

Immune System Changes
Thymus involution, atrophy of spleen and lymph nodes, & telomere shortening.

Neurological Changes
Strengthens neural pathways to survival and weakens neural pathways to thinking.

Epigenetic Changes
Induces epigenetic changes for genes related to mental health, obesity, drug addiction, immune function, metabolic disease, and heart disease.

“4 Ways Childhood Trauma Changes a Child’s Brain and Body” at salud.to/2BLMOds
Objective: To investigate the relationship between ACEs and weight status among adolescents.

Study Design: Research team at the University of Minnesota analyzed Minnesota Student Survey data from 105,759 students (6.5% Latino).

Results: ACEs positively associated with weight:
- Youth with 1 ACE were 1.21x and youth with 6 ACEs were 1.47x as likely to have overweight.
- Youth with 1 ACE were 1.38x and youth with 6 ACEs were 2.03x as likely to have obesity.
- Youth with 1 ACE were 1.49x and youth with 6 ACEs were 4.24x as likely to have severe obesity.

“Childhood Trauma Increases Risk of Teen Obesity” at salud.to/2sm5GJm
Result: Although Latinos only account for 6.5% of the survey population, they account for 9.2% of respondents with obesity and 10.7% of respondents with severe obesity.

Discussion:

• Psychological distress is a potential mechanism.
• Obesity prevention and treatment efforts should include components that prevent or treat ACEs and their associated negative impacts.
• Child health professionals should understand the relationship between ACEs and weight status in adolescence.
• Screening for ACEs and referring youth and their families to appropriate services might be an important part of clinical weight management.
• However, few pediatricians ask about ACEs or are familiar with the ACEs study.
#SaludTues every Tuesday at 12pm CST

A1 77.8% of Latino adults experienced at least one adverse childhood experience compared to 46% of youth in general. #SaludTues
#ACES #healthdisparities

A2 Poor physical health. Childhood trauma impacts Latino’s risk for obesity, coronary heart disease, various cancers, diabetes, & chronic obstructive pulmonary disease. #SaludTues

A4: Childhood trauma/ ACEs can increase a child’s chances of being overweight or obese during their teenage years. #SaludTues
salud.to/2sm5GJm
Our Campaigns on ACEs

Salud America! members sent 2,214 emails to HHS to add trauma objectives to Healthy People 2030!
Our Heroes Who Reduce ACEs

Ex-Coach Creates Trauma-Informed Program to Reduce Absenteeism in San Antonio

John Hernandez! salud.to/ECCares
Our team at Salud America! provides you with presentations, model emails, talking points, templates of John Hernandez’s Trauma-Informed Care System, helpful FAQs and Guides, and technical assistance along the way to help you create your own system by following these 5 steps:

1. Start the Conversation with Leadership (Get Buy-In)
2. Create a Task Force and Develop Vision
3. Take Immediate Action: Trauma-Informed Care System
4. Take More Comprehensive Actions
5. Raise Community Awareness

salud.to/traumakit

Over 440 downloads!
Childhood Trauma Increase Risk of Teen Obesity

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SPEAKER

Charlotte Parent, RN
For the Public’s Health:
How community health assessments can influence policy

Charlotte Parent, RN, MHCM
Xavier University School of Louisiana
12th Health Disparities Conference
April 9, 2019
Generally, hospital community benefit includes programs or activities that:

- Improve access to health care and/or community health, advance medical or health knowledge, or relieve or reduce government or community burden; AND
- Responds to a community-identified need, placing particular focus on the vices and issues facing the underserved in a given place.

Source: 2013 IRS Form 990, Schedule H Instructions, pages 16-17; Defining Community Benefit
Background

1. During the 2005-2009 congressional session, increased scrutiny over whether nonprofit hospitals provided sufficient community benefits.

2. In FY 2009, tax exempt hospitals spent an average of 7.5% of operating expenses on community benefits.

3. In 2013 about 78% of community hospitals were nonprofit.

4. In 2011, the value of tax exempt status totaled $24.6 billion – most dedicated to patient care services (85%)
Implementation of the ACA – Section 501r of the IRS Code

4 new requirements related to Community Benefits

1. Conduct a community health needs assessment with an implementation strategy
2. Establish a written financial assistance policy for medically necessary and emergency care
3. Comply with specified limitations on hospital charges for those eligible for financial assistance; and
4. Comply with specified billing and collections requirements.
Community Health Needs Assessment

1. Each hospital must conduct a CHNA at least every 3 years and develop strategies to meet the needs identified – written, published report.

2. Hospital must seek broad community input – including public health officials.

3. The assessment must address:
   - Barriers to care including financial
   - The need to prevent illness, ensure adequate nutrition and
   - Address social, behavioral and environmental factors

4. Failure to comply results in a $50,000 excise tax penalty.

2. Hospitals (through the LA Hospital Association) worked with a national consultant to organize the CHNA.

3. Current CHNA's Strategic Implementation Plan is currently in progress for completion by May 2019.

4. Assessment includes:
   - Re-identification of hospital’s service area
   - Health status data
   - Interviews with providers, community stakeholders, and citizens.
   - Evaluation of current implementation plan
Community Health Needs Assessment
New Orleans Health Department

1. Conducted every 3 years as part of Public Health Accreditation
2. Seeks broad input: community, providers, partners, and citizens
3. The assessment must address:
   - Community Themes & Strengths – what’s important to the community, assets and quality of life issues
   - Community Health Status – indicators to determine health status of the community
   - Forces of change – identify trends, factors and events that effect health improvement
   - Local Public Health System – how well are services being provided in 10 EPH (essentials of public health) service areas
4. Cannot be accredited Department without the CHNA
Community Health Needs Assessment

Data Collection

1. Both use Primary and Secondary Data Collection
   – Surveys
   – Key Informant Interviews
   – Community Meetings
   – Reports generated by local community and health groups

2. Health Department includes more opportunities to engage with the community; meetings, dialogues, focus groups, surveys
National Examples of Assessment to Action

Build Health Challenge -- **Bold, Upstream, Integrated, Local, Data Driven**

*Build strengthen partnerships*—*between community-based organizations, hospitals and health systems, and local health departments*—*with a shared commitment to moving resources, attention, and action upstream to reduce health disparities and create opportunities for improved community health.*

- Two cohorts totaling 37 communities across the United States
- Address issues such as: transportation, food insecurity, housing, safe communities
- Driven to address key areas that impact community health
  - Social Determinants of health
  - Health Disparities
  - Health Equity
  - Upstream approaches
Local Examples of Assessment to Action

LCMC Health
- Addressing transportation as a barrier to health access
- Providing trauma counseling to victims of violence
- CeaseFire New Orleans Hospital Crisis Intervention Team
- Child passenger safety programs
- Greater New Orleans Immunization Network

Ochsner Health System
- Community Gardens at two facilities – food insecurity
- “Aunt Bertha” resource app to address resource awareness/access
- EatFit NOLA – healthy eating
1. Hospitals and the Public Health System conduct one assessment for the community – Challenge: currently, each hospital is expected to have separate assessments, and only New Orleans is an accredited department in Louisiana required to conduct a needs assessment.

2. Hospitals commit funds to community benefit “upstream” activities – funds are provided to build infrastructure around the community’s social determinants of health priorities.

3. Regional implementation plan – with this assessment, there is a regional implementation plan in development. More opportunity to make a regional changes to matching priorities.
Resources

• The Build Health Challenge Website: [http://buildhealthchallenge.org](http://buildhealthchallenge.org)

• LCMC Health System Website: [https://lcmchealth.org](https://lcmchealth.org) -- access to each hospitals’ website, their CHNA’s are located on the website

• City of New Orleans Health Department Website: [www.nola.gov/health-department/](http://www.nola.gov/health-department/) -- access to the NOHD’s current publications and the CHNA

• American Hospital Association -- [https://www.aha.org/aha-search?search_api_fulltext=community+health+needs+assessment](https://www.aha.org/aha-search?search_api_fulltext=community+health+needs+assessment)

Thank You!
Charlotte M Parent, RN, MHCM
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Moderated Panel Discussion
Knowledge & Application Opportunities
CLOSING

George Perry, PhD