



Upcoming Events

- [Asian American, Native Hawaiian and other Pacific Islander Health Center Summit](#)

Date: May 24, 2016

Location: Marriott Century Center 2000 Century Blvd NE, Atlanta, GA 30345

- [13th Annual Conference: Celebrating the Diversity of Community Health Workers in Arizona](#)

Dates: June 16-17, 2016

Location: Marriot University Park, 880 E. 2nd Street, Tucson, AZ 85719

- [Annual Disparities in Health in America: Working Toward Social Justice Workshop](#)

Dates: June 20-25, 2016

Location: The Wilhelmina Cullen Robertson Auditorium (A350), University of Houston-Downtown, One Main Street, Houston, TX 77002

- [2016 National Leadership Conference: Health Equity Through Diversity and Inclusion](#)

Dates: June 21-22, 2016

Location: Philadelphia Marriott Downtown, Philadelphia, PA

Editor's Note

The AHDCConnection is published quarterly on January 31, April 30, July 31 and October 31. We are always looking for stories and information related to efforts to reduce health disparities in Arizona.

Due to space limitations, each article submitted should not be more than 500 words. Notifications of relevant upcoming events, funding opportunities and ideas for community stories are always welcome. The deadline for submission is the 15th of the month prior to the publication date (Dec 15, May 15, June 15 and Sept 15). Please email articles or ideas to hong.chartrand@azdhs.gov.



ARIZONA'S
LEADING
HEALTH
DISPARITIES
RESOURCE

AHDCConnection



New Vital Statistics Report Available Online

The [2014 Arizona Health Status and Vital Statistics Report](#), also known as the

“Big Book,” presents an annual update of information on vital statistics and the health status of Arizona residents. It provides statewide numbers and rates of vital events such as births, stillbirths and deaths, and population-based data on pregnancies, abortions, marriages, divorces, reportable diseases, and hospital discharges. The report provides critical information to help understand statewide trends, inequalities in health among population groups, and determine high-risk geographical areas.

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Oral Health Education for the Underserved with Esperança

By Ryan Tapscott

The designated door holder props open the door of our classroom, allowing her third grade classmates to shuffle in and line up single file. One by one, they are screened by the hygienist. As I mark their papers with the hygienist's recommended actions, one girl in line stands out. I can see her eyes are focused on the hygienist, staring with a concerned look that is out of character for her age. When it is her turn, before the hygienist has a chance to greet her, she opens her mouth and points to a painful tooth. She anxiously awaits the hygienist's response. "You have an infection around that tooth and you need to see a dentist. We're giving you a paper today that needs to go home to the adult that you live with. OK? It's really important." The girl nods as she closes her mouth and holds her cheek.

After my presentation, a few students come up to me and swear off soda. I smile and reinforce the idea. They are then herded out by their teacher. But I see one student stay behind and speak with the hygienist. It's the

girl from earlier. I can hear her explaining the pain again, clutching her cheek. The hygienist reiterates the importance of the taking the follow-up paper home. She nods, appearing reassured, and quickly runs out to join her friends.

The above experience was shared by Joe, an Esperança volunteer when he provided oral health education in an elementary school in Phoenix.

Esperança has been delivering oral health education in underserved communities in Phoenix for the past 16 years. Esperança's target area was chosen specifically for its lack of health resources. The I-17 corridor, where its education activities take place, continues to have the highest deficit of health resources in the metropolitan area and very few resources to aid residents in dealing with issues like poor oral health, obesity, and other conditions that can benefit markedly from proper health education. Esperança identified oral health as a priority of prevention education in Phoenix (Continued on p 4)



150 N. 18th Avenue, Suite 300
Phoenix, AZ 85007
(602) 542-1219 ph
(602) 542-2011 fax
www.azminorityhealth.gov



Funding Opportunities

Robert Wood Johnson Foundation (RWJF): Healthy Eating Research: Building Evidence to Prevent Childhood Obesity –
Deadlines: June 1, 2016 – Concept paper; August 24, 2016 – Full proposal
Purpose: There are for two types of awards aimed at providing advocates, decision-makers, and policymakers with evidence to reverse the childhood obesity epidemic.
Total amount: \$2.4 million

MAC AIDS Fund U.S. Community Grants: Housing Program –
Deadline: June 10, 2016
Purpose: to support bold and innovative organizations that provide vital services and strengthen the safety net for people living with and affected by HIV/AIDS (PLWHA).
Eligible Applicants: Non Profits
Amount of awards: up to \$50,000
Contact: (212) 965-6300 or macaidsf@maccosmetics.com

Cardinals Charities (Arizona) –
Deadline: June 16, 2016
Purpose: to improve the quality of life and enhance opportunities for children, women, and minorities in the state of Arizona by supporting qualified nonprofit organizations whose goals and programs align with the funding agency's mission.
Eligible Applicants: Non Profits in Arizona
Contact: (800) 999-1402 or askquestions@cardinals.nfl.net



I connected with Jesse Davenport (left in the photo) while looking for information about the New Roots Program (NRP) at International Rescue Committee last year. I was impressed with what she was doing to help beginning farmers.

Jesse was a local food access coordinator at the University of Arizona Extension in Maricopa County for the past two years. She organized a unique five-component workshop for beginning farmers, focusing on a variety of food-related topics, including history of food and agriculture in the United States, food systems, community organizing, fundraising and grant writing, and policies and regulations. She organized an 8-week business-planning course for beginning farmers so they could learn many aspects of agriculture. Participants ranged from young people who supported the local food system to seasonal farmers who practiced farming as a hobby.

"8 weeks was too short," said Jesse. "However, relationships participants built via the course helps them in the long run."

Jesse encountered one woman at a local farmers' market last year. As a small grower, she found it almost impossible to go to different farmers' markets to sell her produce. Via the connection she built in the 8-week course, this woman connected with a local agency to help her sell her produce at farmers'

Food Justice: Access to Healthy Food

By Hong Chartrand

markets.

Jesse was not new to the local gardening field. Six years ago, when she was still in college, she started working at Cooperative Extension for a 4H after-school nutrition program and the Master Gardener program.

"I started as an architecture major at Arizona State University (ASU)," said Jesse. "I was politicized by local migrant rights organizations' resistance to anti-immigrant legislation and learned a lot about social movements. I switched my major to Justice Studies. It was life changing for me. Working towards a more just world became my passion."

Currently, Jesse works at the ASU College Program, an educational partnership with and for incarcerated women. She serves as a liaison between the incarcerated students and their instructors, and provides comprehensive services for them. Justice is a natural connection to her work.

Jesse still keeps her passion to seek food justice. She continues to volunteer at Cultivate South Phoenix (CUSP), a broad-based coalition of agencies collaborating to address health and wellness concerns in South Phoenix with a focus on community-based farming to improve food access in the low-income community. (Continued on p 5)



New Oral Health Disparities Data Profile Released

By Alexandria Drake

The *Oral Health Data Profile*, created as part of the *Healthy Smile Healthy Life* (HSHL) project and led by the Arizona Health Disparities Center (AHDC), provides a snapshot of oral health status in central Phoenix. This baseline data serves as the foundation of the AHDC HSHL project and will help to show where oral health efforts could be focused.

The profile was created using data from dental sealant consent forms used by NATIVE HEALTH, the AHDC partnering organization for the project. Consent forms were organized by zip code to include addresses that fall within the five Primary Care Areas (Alhambra Village, Camelback East Village, Central City Village, Encanto Village and North Mountain Village) in central Phoenix. The profile will be updated yearly over the course of the 5-year grant. Changes in trends from year to year will be tracked in order to assess the efficiency of the project efforts.

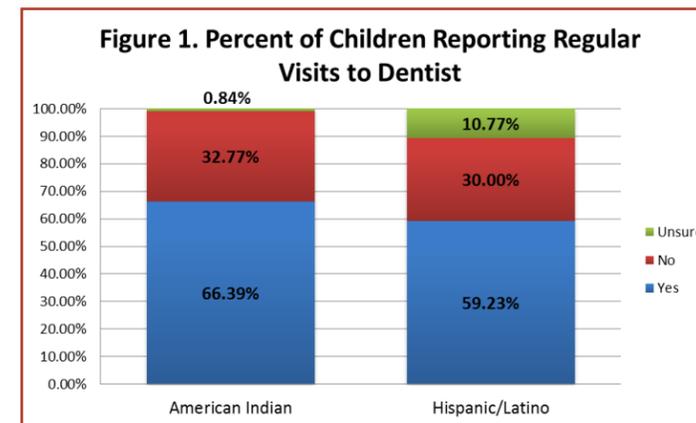
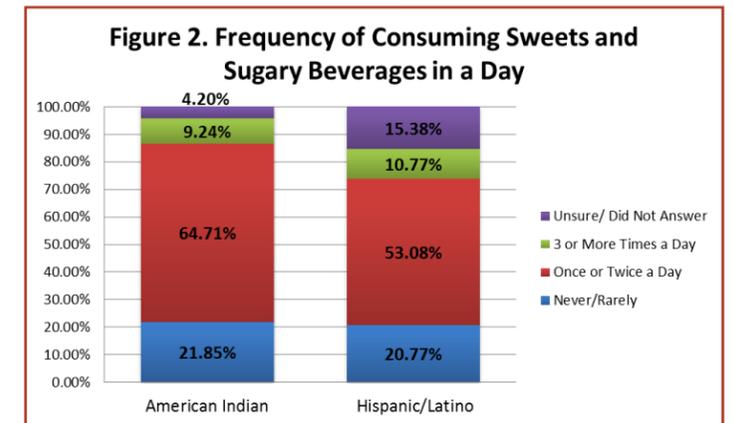


Figure 1 shows 66 percent of American Indian children and 59 percent of Hispanic/ Latino children reportedly saw a dentist regularly, but it should be noted that almost 11 percent of Hispanic/ Latino left this question blank. Figure 2 shows the frequency of consuming sugary foods and beverages per day. Only about 21 percent of both American Indian and Hispanic/Latino children were reported to consume sugary items never or rarely. Information like



that found in the charts above can be very useful in identifying areas of concern in oral health behaviors and care. As the project continues, the AHDC will further analyze the data in order to better inform program efforts. For more information on the data collected, please refer to the complete *Oral Health Data Profile*, which can be found on the [AHDC webpage](#).

New Publications of Interest

- [Child Poverty in Rural America](#)
- [Expanding Opportunities for Pacific Islanders](#)
- [Strategies for Reducing Health Disparities Selected CDC-Sponsored Interventions, United States 2016](#)





Oral Health Education for the Underserved with Esperança

(Continued from p 1)

As Arizona has long struggled with oral health issues throughout the State. Specifically in Arizona, 40.4% of Arizona's third graders have untreated tooth decay—the third highest rate in the nation. St. Vincent de Paul's dental clinic reports that 37% of its 2-4 year-old patients presented with dental disease. 1,066,000 hours of school are lost each year in Arizona because of dental problems, many of those because adults must care for children who are unable to attend school.*

In order to reverse these trends Esperança staff and volunteers work in tandem with the Parsons Center for Pediatric Dentistry and Desert Mission Dental Clinic. When the clinics' go out to the schools, Esperança personal will go along side dental professionals providing much needed education to elementary students on the importance of brushing, flossing, and good nutrition in order to maintain healthy oral health. In addition, bilingual staff and interns provide education to parents at Head Start classrooms and in the pediatric dental clinic waiting rooms to adults. Esperança incorporates education across age groups to ensure that everyone in the family understands the importance of healthy teeth. In the last three years alone Esperança has educated more than 10,000 children and adults.



Victor, a Esperança volunteer, and Maria Valenzuela, Community Health Coordinator, delivering oral health education.

"At Esperança, we understand the importance of the number of individuals educated but also the measurement of the gain in knowledge," says Ryan Tapscott, Program Coordinator of Esperança. "For our adult education we conduct pre/ post questionnaires to assess the gain in adults' knowledge."

Esperança has seen a twenty percent increase in scores from the pretest to the posttest that was administered after the implementation of its oral education for adults.

Esperança's adult education incorporates tools to measure effectiveness in oral health education delivery. "It is with much pride that the individuals, Esperança staff and volunteers have educated have seen a drastic increase in their oral health awareness," says Ryan.

* [Centers for Disease Control and Prevention. Explore Oral Health Data by Location.](#)



Above: Esperança's prevention education at an elementary school.

Right: Oral health display used to demonstrate the amount of sugar in typical drinks consumed by community members.



Food Justice: Access to Healthy Food

(Continued from p 2)

"Jesse's work in food systems, and really food justice, will have a lasting impact on the communities she has served," said Stephanie Martinez, Jesse's former supervisor at the University of Arizona Extension in Maricopa County. "She is dedicated to ensuring all individuals have access to healthy foods."

"I want to focus on my health that is related to my community's health," said Jesse.

Last summer, her mother passed away unexpectedly. It was a big loss for Jesse. She hopes to link food health, cultural health, spiritual health and improve community health.



Jesse (standing in the photo) facilitated a workshop for beginning farmers

April was National Minority Health Month



April was National Minority Health Month. The theme for 2016 was *Accelerating Health Equity for the Nation*. The U.S. Department of Health and Human Services (HHS) [Office of Minority Health](#) (OMH) invited all across the nation to raise awareness of health disparities that continue to affect racial and ethnic minorities and to work together to accelerate health equity and strengthen the health and well-being of all Americans.

The current transformation of America's health care system through major legislative and

policy changes has accelerate efforts to improve the health status of minority populations that began more than 30 years ago through the release of the landmark report: [Secretary's Task Force Report on Black and Minority Health](#) (commonly known as the Heckler Report) in 1985. This report also led to the establishment of the HHS OMH in 1986. The OMH was reauthorized by the Affordable Care Act (ACA) in 2010. The OMH's mission is to improve the health of racial and ethnic minority populations through the development of health policies and programs that will

eliminate health disparities.

During National Minority Health Month and throughout this 30th anniversary year, the OMH highlighted initiatives underway to forge a new era of health equity through public and private sector partners and stakeholder collaboration to address environmental, social and economic conditions known as social determinants of health. These conditions affect daily living in the places where people are born, grow, live, work, learn and age and have significant impact on the health outcomes of individuals, families

and their communities and the prosperity of our country.

The OMH hosted the Health Equity Forum on April 7, 2016. Here are the links to the forum [video 1](#) and [video 2](#).

Visit the [National Minority Health Month website](#) to obtain toolkit materials and other information, share your health equity activities and programs, and sign up for [OMH updates](#).

(The information is adopted from the OMH website.)

