



# Minority & Multicultural Health

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[www.idph.state.ia.us/hpcdp/mh\\_default.asp](http://www.idph.state.ia.us/hpcdp/mh_default.asp)

Promoting & Protecting the Health of Iowans



In 2009, under HF2526, the name of the office was changed to the Office of Minority and Multicultural Health (OMMH). In 2010 – 2013 a special funding grant allowed OMMH to expand its activities via statewide community and faith based health and wellness programming grant awards, and completion of the 2012 - 2017 strategic plan for the OMMH Advisory Council and program activities. In 2014 in partnership with the U of IA, UNI Center on Health Disparities and Dept. of Human Services Systems of Care Project, we completed 6 Cultural and Linguistically Appropriate Standards (CLAS) training to over 100 health professionals. The OMMH also serves on the Region VII Health Equity “Heartland” Advisory Council and is a board member of the National Association of State Offices of Minority Health. Communities continue to increase the engagement of the OMMH Advisory Council in strategic planning and program activities, regional multicultural coalitions, and service delivery. We continue to provide preceptorships and internships for the Des Moines University College of Osteopathic Medicine, Masters of Public Health Program and partner with other Iowa academic institutions in accordance with our goal to provide internships for students of diverse ancestry heritage.

## Did you know?

- ✓ In 2005, IDPH established the Office of Multicultural Health (OMH). In 2006, OMH became part of Iowa law. In 2007, OMH developed a strategic plan with the mission to actively promote and facilitate health equity for Iowa’s multicultural communities. In 2013 this plan was reviewed and revised for 2012 - 2017
- ✓ In 2010, OMMH received its first federal DHHS OMH State Partnership Grant. In 2011, OMMH, in contractual agreement with the University of Northern Iowa, completed a 3-phase goal of establishing the opportunity for six regional public health minority health coalitions.
- ✓ In 2012, OMMH received a DHS, OMH National Plan for Action award to increase education and awareness efforts to end health disparities. Free materials and toolkit resources can be found at <http://minorityhealth.hhs.gov/npa>.
- ✓ In 2014, OMMH entered into its first collaboration with DHS and U of I for CLAS standards training

## Why is Minority & Multicultural Health important to promoting and protecting the health of Iowans?

- According to the U.S. Census, Iowa had a 97% increase in its minority population from 1990 to 2000. There was a 47% increase in African Americans, a 46% increase in Native Americans, a 214% increase in Asian Pacific Islanders, and a 241% increase in the Hispanic/Latino population.
- In 2014 the diverse population is estimated at 2.9% African American, 0.4% Native American, 1.8% Asian alone, 5.0% Hispanic/Latino, 1.4% two or more races, 0.1% Native Hawaiian and other Pacific Islander alone. (source: <http://www.iowadatatcenter.org/quickfacts>)
- Chronic diseases such as diabetes, cardiovascular disease, and cancer are more common in Iowa’s minority and immigrant/refugee populations. To meet the changing demographics of Iowa, we must enhance and expand its capacity to address minority and immigrant/refugee health issues. IDPH must assist local public health agencies and health care providers to address the health concerns of all Iowans.

## Which Iowa Public Health Goals are we working to achieve?

Strengthen the public health infrastructure

## What do we do?

- Work with companies, communities, faith-based groups, and others across Iowa to develop strategies for providing culturally and linguistically appropriate services.
- Coordinate and provide education and training in culturally and linguistically appropriate health care and service delivery to any state, local, or regional agency, program, or institution.
- Assure access to networks, contacts, and resources necessary to apply for local, regional, and federal grants and awards.
- Assure a comprehensive health assessment for newly arriving refugees. Work with partnering agencies to assure appropriate health services are received.
- Provide information to the public about health disparities.
- Plan, evaluate, assess, and research health disparities.
- Develop legislation, rules, and policies related to health disparities.
- Work with and provide links to communities, local agencies and programs, and regional and federal entities to address the health issues that affect Iowa’s minorities, immigrants, and refugees.



## How do we measure our progress?

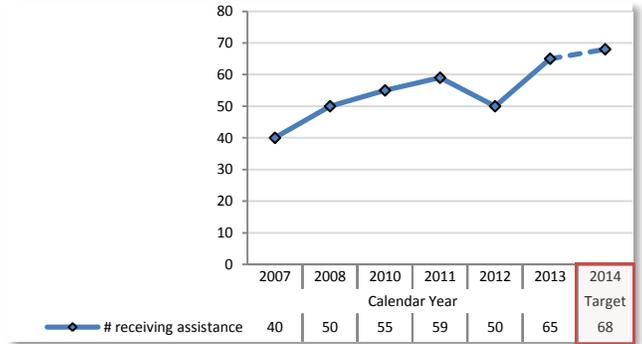
### 1 Number of state and local programs and organizations that have received technical assistance, resources, or training about multicultural health issues and services.

Data Source: OMH records. Data are available annually.

**How are we doing?** In 2012, the Executive Director of IDPH, OMMH received the Iowa Juneteenth Observance James Derham Award in acknowledgment of her outstanding service and contributions to the field of health in Iowa. James Derham was the first African American physician in the United States.

From 2012 to 2014, we have increased partnerships and technical assistance, and facilitated a workshop for 200 public health, faith and community-based organizations. Since 2012 we have maintained a positive and productive relationship with undergraduate students of diversity at Cornell College in Mt. Vernon Iowa. We continue to provide internships, capstone and special projects for students attending Des Moines University, UNI, U of IA and Iowa State in their graduate studies programming. In partnership with Northern Plains and the Iowa Comprehensive Cancer Consortium, we held Native American Cancer Support Group leadership training, and from that, we have developed the Native American Cancer Support Group Coalition. In partnership with Community Health Partners of Sioux County Public Health, we continue to provide assistance with the Latino's Women's Support Services Coalition.

Established in 2012 and with increased resources for 2014, the OMMH lending library for the video "UNNATURAL CAUSES" has expanded to address health equity to any Maternal and Child Health contractors, community and faith based entities and academic programs.



### What can Iowans do to help?

1. All Iowans can become more aware of the health care and access needs of Iowa's minority, immigrant, and refugee residents.
2. All Iowans can build public, professional, and policymaker support for programs and policies to improve the health of minorities, immigrants, refugees, and their families.
3. Iowa organizations can do more to recruit and retain racial and ethnic minorities as health and human service providers.

## Expenditures

Federal funds: 0153-0404/0948/0952

	State Fiscal Year 2012 Actual	State Fiscal Year 2013 Actual	State Fiscal Year 2014 Estimate
State funds	\$0	\$0	\$0
Federal funds	\$153,251	\$198,765	\$211,159
Other funds	\$6,006	\$3,434	\$4,217
<b>Total funds</b>	<b>\$159,257</b>	<b>\$202,199</b>	<b>\$215,376</b>
FTEs	0.89	0.76	1.80

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.