



Rutgers Center for
State Health Policy

Update on Grant Activities for the New Jersey Initiative to Reduce Health Disparities

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Overview

- Four main objectives of the Federal grant, re: Initiative to Reduce Health Disparities
- CSHP Research Activities
- Basic guidelines for collection of racial and ethnic data

1978 OMB 15

- American Indian or Alaska Native

- Asian or Pacific Islander

- Black

- White

- Hispanic



1997 OMB 15

- American Indian or Alaska Native

- Asian
- Native Hawaiian or Other Pacific Islander

- Black or African American

- White

- Hispanic or Latino or Not Hispanic or Latino

Methods

- Self reported survey of 29 NJ DHSS program officers; survey established a baseline for DHSS programs on;
 - Data collection,
 - Cultural competency,
 - Language access,
 - Community partnerships,
 - Access to care,
 - Evaluation.

Methods

- Telephone survey of 11 NJ DHSS report authors;
 - Racial and ethnic data collection methods,
 - Reporting constraints,
 - Omission of racial and ethnic populations in reporting.
- Focus group with 8 participants to discuss;
 - Collection methods,
 - Accounting for underrepresented populations,
 - Strengths, barriers and costs.

Program Survey Results: Data Collection

- 65% of programs surveyed collect demographic data
- Differing ways to collect racial and ethnic data
- Good news: Programs are reporting on smaller, harder to reach populations

Program Survey Results Continued

- 81.8% of programs track measurable outcomes
- 50% of programs have established baseline data and benchmarks
- 52.4% of programs are reporting on services received by race and ethnicity

Program Survey Results: Language Access

- 14.4% of programs surveyed are reporting on primary language other than English
- 65.5% of programs do NOT collect information on languages spoken

Program Survey Results: Cultural Competency

- 20.7% of programs do NOT engage in activities to promote cultural competency, of those who DO;
 - 78.3% Provide translation of materials,
 - 65.2% Assess staff diversity delivering services,
 - 57.1% Offer cultural competency training,
 - 52.2% Provide interpretation services,
 - 52.2% Assess the literacy level of translated materials, and
 - 31.8% Participate in other activities.

Program Survey Results: Access

- 13.8% do NOT engage in efforts to increase access for hard to reach populations, of those programs who DO;
 - 66.7% use 800 numbers,
 - 44.4% use media campaigns,
 - 44.4% use outreach Workers,
 - 55.6% take other measures.

Program Survey Results: Access

- 68.2% of programs surveyed provide referrals/links for clients
- 40.0% of programs surveyed measure appointment speed

Program Survey Results: Targeting Specific Groups and Community Partnerships

- 42.9% programs surveyed do NOT target specific groups; those who DO target by:
 - racial/ethnic populations,
 - socioeconomic status and
 - health insurance status.
- 72.0% of programs partner with a minority community/faith based program

DHSS Report Analysis Results: Collection Methods

- Origin of collection methods: Federal government
- Need to condense or exclude certain racial/ethnic categories
- Statistical reliability and sample sizes of small racial and ethnic populations
- Creation of an "Other" category to house smaller populations

DHSS Report Analysis Results: Reporting Constraints and Data Omission

- Reporting constrained by collection methods
- Commonly omitted racial/ethnic populations:
 - Asian/Pacific Islander
 - Native-American/Alaskan Native

Focus Group Results: Collection Methods

- Federal collection forms
- Statistically reliable data is an issue
- 20% of reporting is "Other"

Focus Group Results Continued

- Aggregating and trending data to resolve small sample size issues
- Adding racial and ethnic categories to existing collection tools
- Costs and constraints of expanding racial and ethnic data collection

CSHP Analysis: Methodological Limitations

- Sample size
- Have only spoken to DHSS personnel

DHSS Challenges

- Data collection is not uniform across DHSS programs
- Small racial and ethnic populations create statistical reliability issues
- Rapidly expanding “Other” category
 - Change in state demographics, judging the right time to separate the “other” category

DHSS Strengths

- Flexibility to modify/add racial and ethnic categories
- Large, diverse state population
- Support and receptiveness of programs to standardize data collection

Preliminary Recommendations: Data

- Increase the number of programs that are offering cultural competency training
- Provide feedback/work with programs to enhance their reporting efforts
- Implement a standard collection tool for racial and ethnic data
 - First stage: DHSS funded projects
 - Second stage: Expanded collection for state reports

Conclusion/Next Steps

- Year 2 of the Federal grant
 - Creation/selection of a uniform collection tool
 - Case studies of other states
 - Evaluation of DHSS “best practices”