

# Advancing Health Equity in UCANR

A collaboration with UCSF School of Medicine, Department of Pediatrics, and Center for Child and Community Health.

## UCANR/UCSF: A powerful collaboration

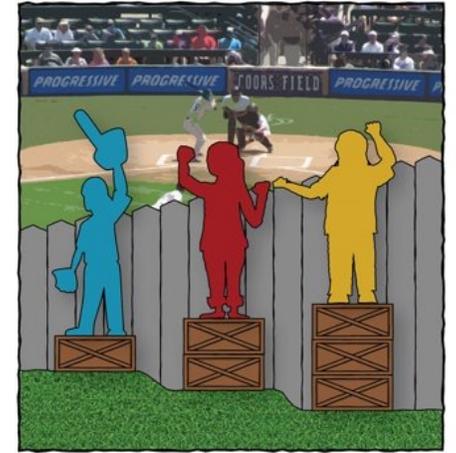
Leveraging the strengths and expertise of UCANR and UCSF provides a potent and unique opportunity to bring these vital elements together with the **goal of improving health** in communities across California.

# What is the overall goal of this webinar series?

**To provide an interactive learning opportunity to come together and visualize how UCANR can address critical health disparities we face and put into practice the opportunities outlined in UCANR's Strategic Initiatives Health Equity Concept Note**



EQUALITY

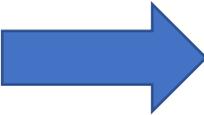


EQUITY

# Three-part webinar series goals:



1. Create **common language** around health equity



2. Identify how the work being done in UCANR fits in with UCANR and the Extension **health equity goals**

3. Inform **new areas and approaches** UCANR can work in to advance health equity in the future.

# Land Acknowledgment

We acknowledge that this event is taking place throughout the unceded territory of California home to nearly 200 tribal nations. As we begin this event, we acknowledge and honor the original inhabitants of our various regions. A land acknowledgement is a critical step towards working with native communities to secure meaningful partnership and inclusion in the stewardship and protection of their cultural resources and homelands. Let's take a moment to honor these ancestral grounds that we are collectively gathered upon and support the resilience and strength that all Indigenous people have shown worldwide.



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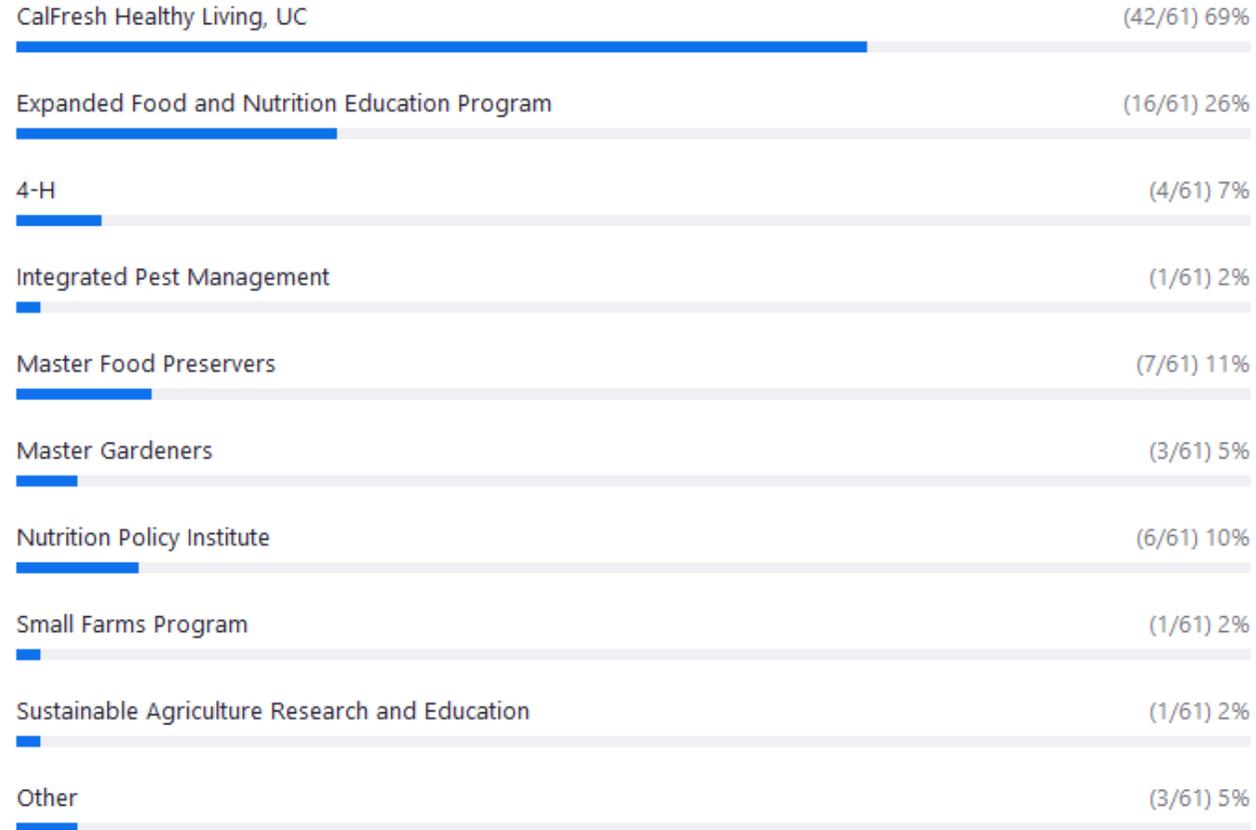
# Today's Agenda

1. Recap of Webinar 1
2. Application of health equity in UC ANR programs
  - Health equity framework and impact stories
  - Impact story exercise
3. Summary and next steps

# Who was in the Zoom from Session 1?

1. Which program(s) do you work with? (Multiple Choice) \*

61/61 (100%) answered



# Who's in the Zoom Today?

- Which program(s) do you work with?
- Did you attend the 1st Webinar?

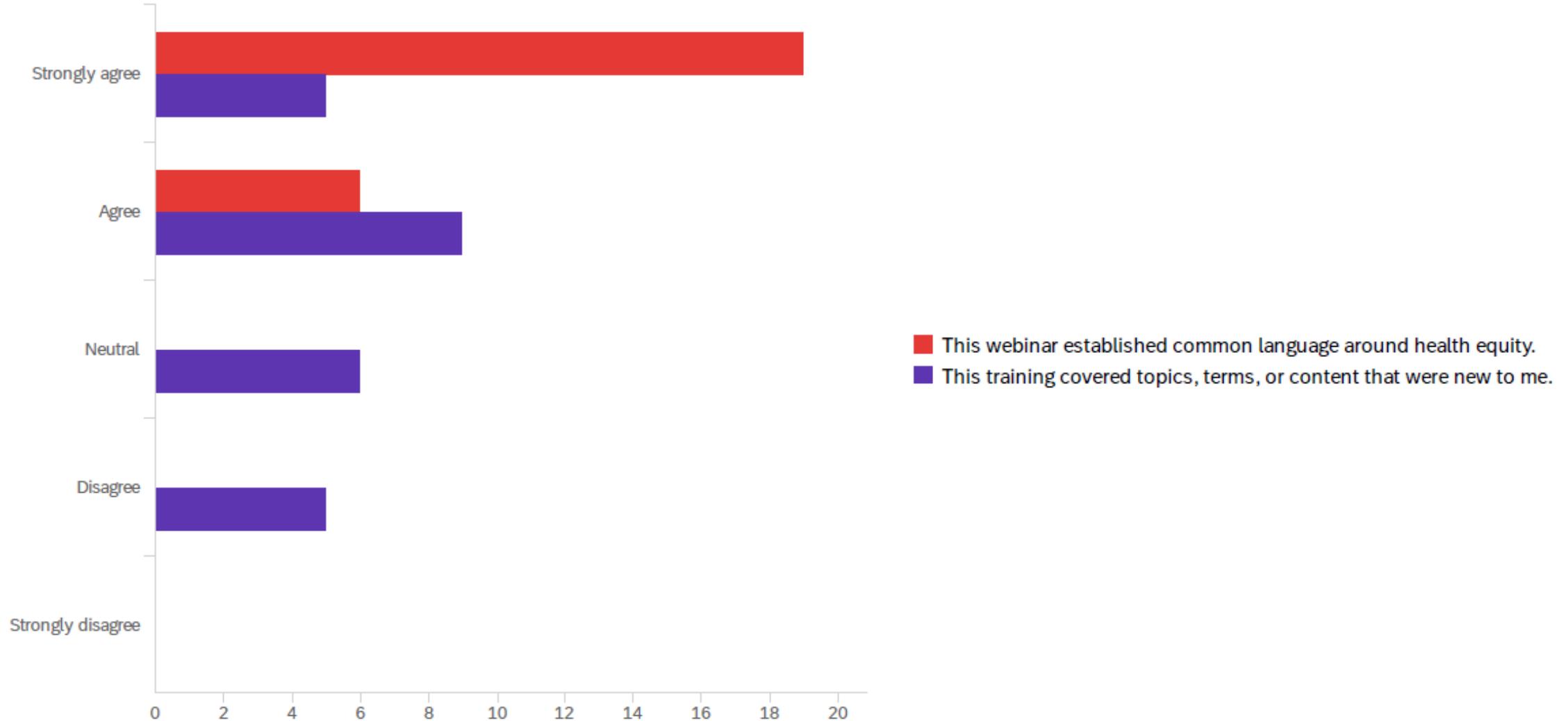


# What did we do in Webinar 1?

- Created shared vocabulary around health equity terms.
- Grounded the discussion on a case of an adult with poorly controlled diabetes.
- Reviewed the Cooperative Extension's National Framework for Health Equity and Well-Being
  - Identified factors that may have contributed to the poor health status of the adult in the case



# Did Webinar 1 meet its goals? (n=25)



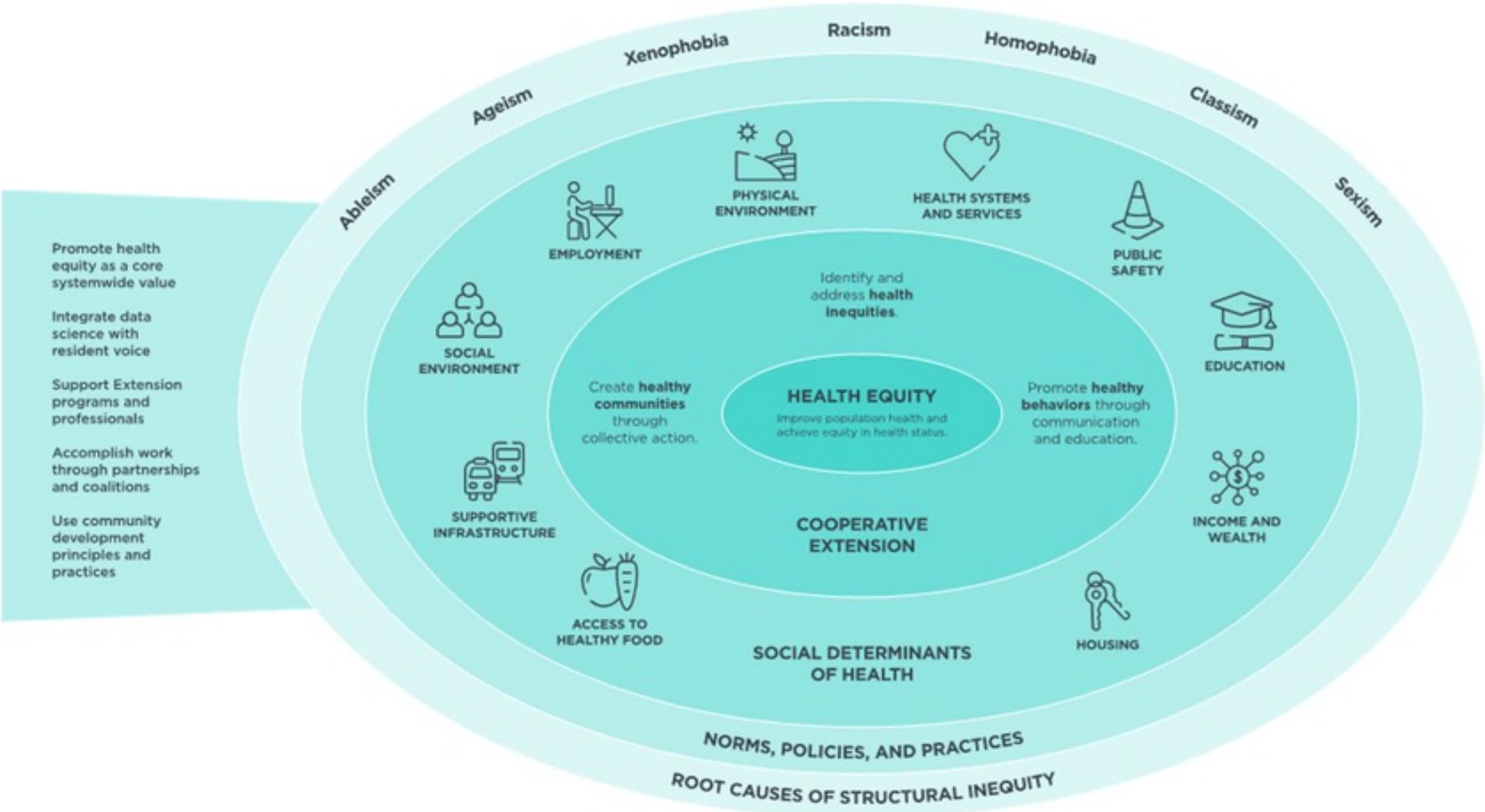
# We heard you! Webinar 1 Feedback

- 25/25 Amount of **content covered** was '**just right**'
- 24/25 Opportunity for **engagement** was '**just right**'
- Suggestions:
  - Explore other **engagement tools**
  - Provide **more examples** to contextualize terms
  - Key in on **application to UC ANR** programs and work

## Case: My patient with diabetes

- MR is a 59 y old woman with very poorly controlled diabetes who has developed signs of eye disease and kidney disease. She is obese and has arthritis of the knees. She is an immigrant from Mexico. Went to 4<sup>th</sup> grade there. Limited ability to read and write in Spanish. Has very limited English skills. Has lived in SF for 20 years, mainly working in elder care and child care. Has family in SF and in Mexico, 2 of whom are on dialysis because of diabetes. Takes two buses to come to appointments, misses many appointments because of work, can only afford the copay for medications sometimes, has had severe food insecurity at times. Has had difficulty modifying diet and exercise. Is currently doing better thanks to new medications and forms of monitoring blood sugars.

# Cooperative Extension's National Framework for Health Equity and Well-Being



# What Social Drivers Did You Identify?

## Access to Healthy Food

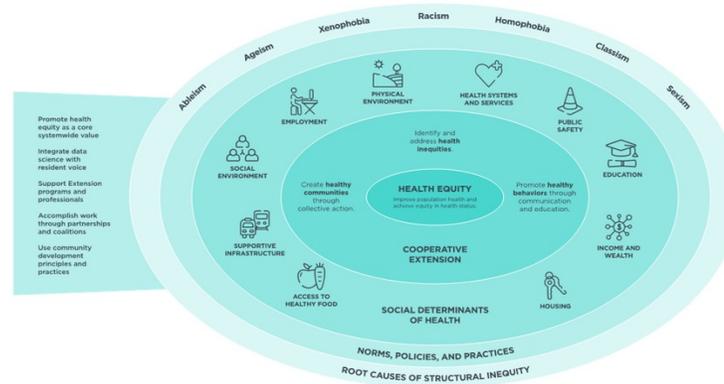
- Food insecurity
- Poor diet
- Limited time to prepare healthy meals
- Limited access to nutritious foods

## Social Environment

- Immigration status and associated stigma/fear
- Interpretation needs and delayed care

## Education and Employment

- Lack of English literacy and general health literacy
- Few options
- Strict work schedule
- Long hours



## Income and Wealth

- Medication affordability and adherence

## Health Systems and Services

- Missed appointments due to work
- Not insured or uninsured
- Comorbidity management
- Medication co-pays

## Physical Environment

- Inability to walk to medical appointments
- Limited grocery stores
- Access to exercise options

## Supportive Infrastructure

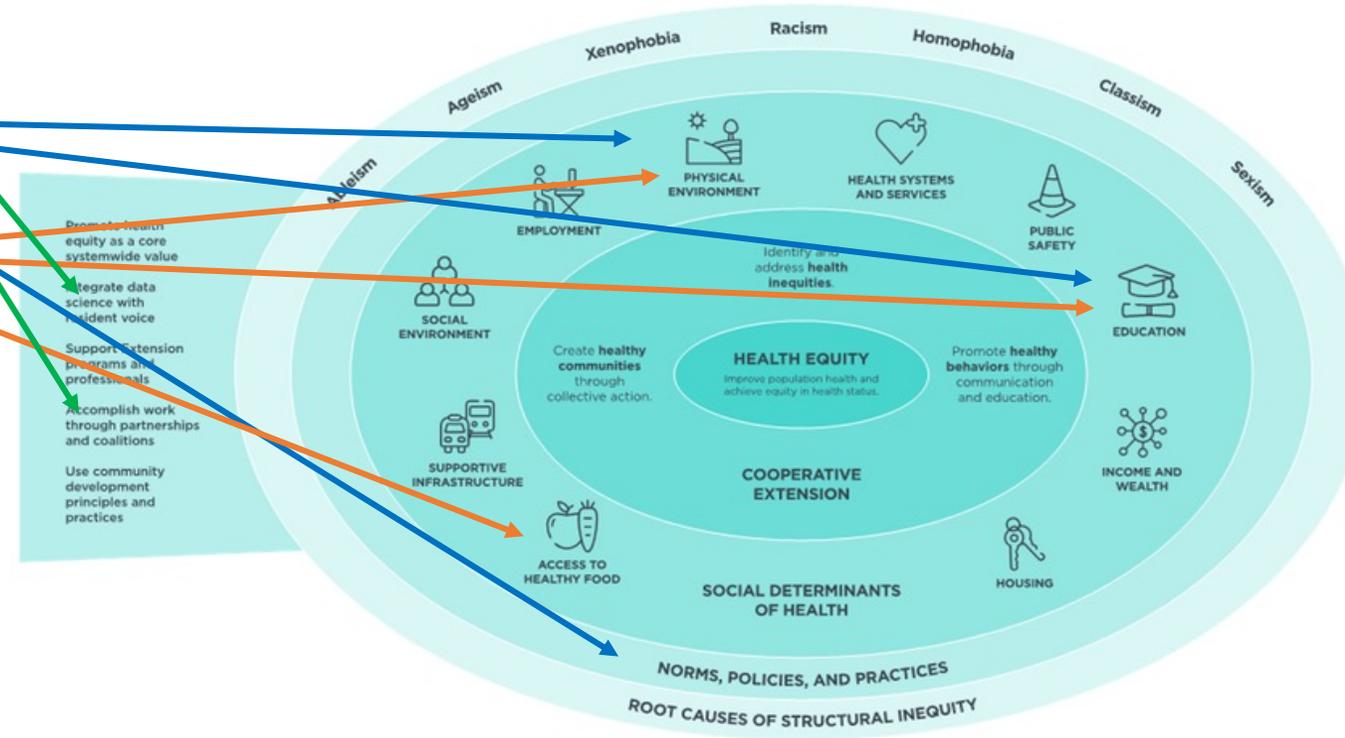
- No transportation / long or multiple bus routes
- Lack of community support

## Youth-led outdoor physical activity strategy is adopted by school district

Empowering youth as leaders to address health issues affecting their families will create change in Imperial County, where there is a high obesity rate among youth and little access to recreational facilities. A CalFresh Healthy Living, UC nutrition educator supported 10 young people in youth-led research. As a result of student findings and advocacy, the district adopted stencils, which created opportunities for outdoor physical activity for 488 students. Eight teachers also adopted garden-enhanced nutrition education, among other physical and nutrition education activities. (Paul Tabarez)



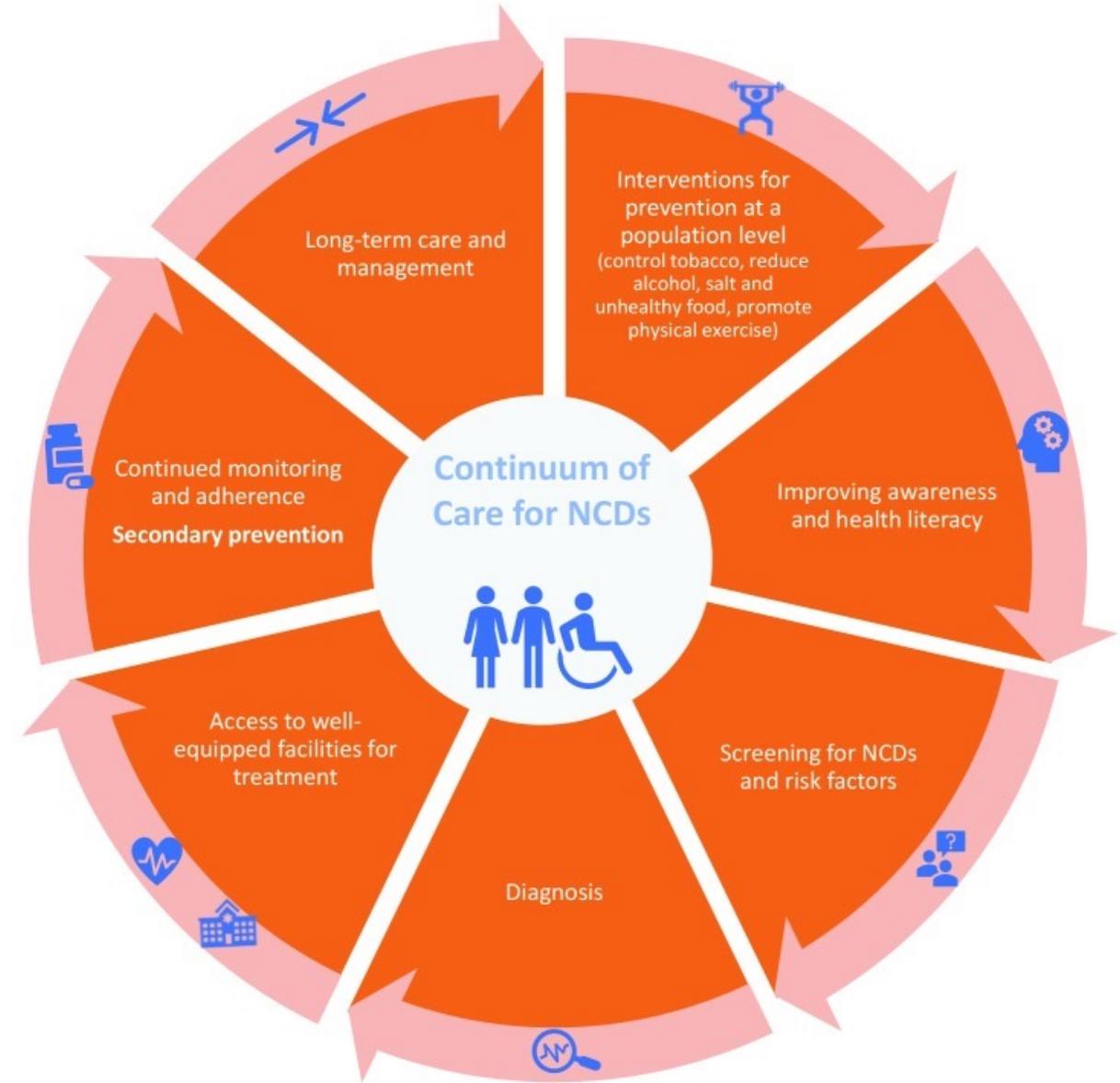
## Example: Linking programs with Health Equity



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2018 UCANR Annual Report



Thapa R, Zengin A, Thrift AG. Continuum of care approach for managing non-communicable diseases in low- and middle-income countries. J Glob Health. 2020

# Impact Stories: Health equity in action in UC ANR

**Identifying successful strategies for grocery store interventions**

Catherine Brinkley, 2020

**UC 4-H mindfulness curriculum promotes positive mental health for youth**

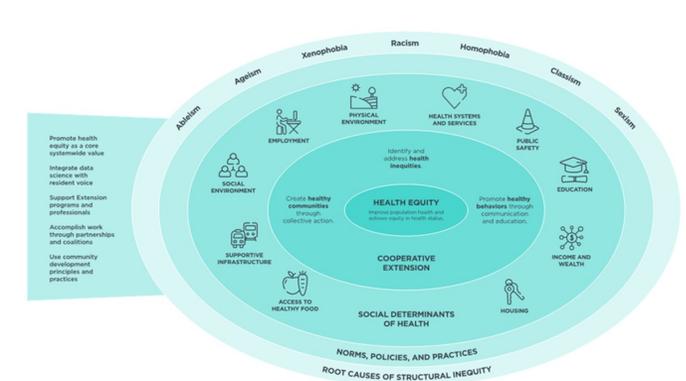
Anne Iaccopucci and Katherine Soule, 2021

**Seniors active in gardens**

Mary Blackburn and Katherine Uhde, 2019

# Small group activity:

- 15 minutes
- Small groups of 5 people
- Each group goes to the jamboard with their group number
- Jamboard will have one of the example impact stories
- Use the National Extension Health Equity Framework (link provided in chat)
  - Where do you see health equity being addressed by the impact story?
  - What are some of the norms, policies and practices that is relevant to this work?
  - For areas of the Framework that are not apparent in the example how might they be addressed?



Large Group Discussion: 10 minutes

Where do you see health equity being addressed by your own work?

Break time!  
5min

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# Start your health equity impact story (15 min)

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- **The Issue**

- What social drivers does your work address?
- Who is your primary audience?

- **What Has Been Done**

- What does your work do to address the social drivers?
  - What are the activities?
  - What are the strategic collaborations?
- How are you using data science and involving community voice?

- **The Outcomes/Impact**

- How will you know your work is successful?
- What has changed or will change because of your work?



# Large group share (10 min)

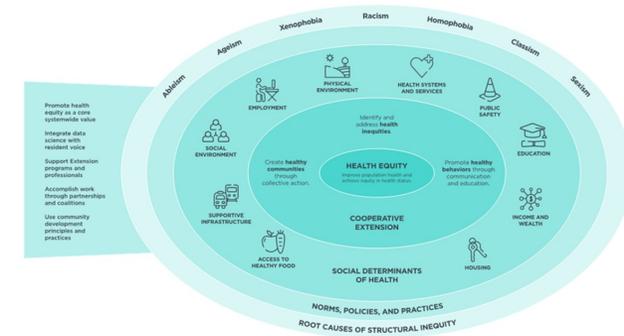
## Who would like to share the draft of their impact story?

- Can ask for input
- Can reflect on what was challenging or what resonated



# What did we cover?

Goal: Identify how the work being done in UCANR fits in with UCANR and the Extension health equity goals.



- Linked impact stories and health equity framework
- Provided opportunity to begin a draft of your own impact story and its link to health equity

