



COMMUNITY INTEGRATION

The Virginia State Office of Rural Health (SORH) provides funds to local agencies who need experience applying for grants or have projects that are not large enough to attract other funders.

- SORH was the recipient of a Rural Communities Opioids Response Planning grant which worked with the **Appalachian Substance Abuse Coalition** to apply for a 501c3 in order to receive future funding. SORH worked with the **St. Mary's Health Wagon** who was awarded \$1 Million to continue the work in southwest VA.



- SORH provided funds to the United Way of Southwest Virginia to hold a 1-day **Rural Childhood Summit** in May 2019. Over 600 people attended the Summit with Keynote addresses by First Lady Pamela Northam and author Jeanette Walls. The purpose of the summit was to bring together all agencies who work with children to begin to address those who are adversely affected by adverse childhood experiences (ACES) and the opioid crisis.

- SORH has provided seed funding to the **Healthy Harvest South Boston Community Garden** to educate high school and middle school students about nutrition, business and how to grow food.



HEALTH EQUITY CONFERENCE & THINK TANK, OCTOBER 2018

The OHE's inaugural conference and think tank featured a dynamic roster of multi-sector speakers, presenters and panelists focused on tackling issues in health disparities and inequities in VA. Attendees also participated in VA's first ever statewide health equity think tank—to collectively brainstorm practical, community-rooted solutions to health inequities. In addition, the health equity work of graduate and professional degree students was highlighted in an evening poster presentation and reception.

TARGETING RESOURCES

DIVISION OF SOCIAL EPIDEMIOLOGY

Health inequities often persist because they go unseen. The Division of Social Epidemiology (DSE) uncovers the harsh reality of health disparities in VA, ensuring they are not ignored. Once identified, we work to help decision-makers target the right resources to the right people, to address the right problems.



Bringing *Visability* to the most vulnerable populations

TO ADDRESS HEALTH INEQUITIES

COST-BENEFIT ANALYSIS

Finding the most effective solution while using the least amount of resources allows us to help more people. The DSE's Health Economist specializes in cost-benefit analysis, outcomes-based financing and economic impact analysis. Our economics capability will allow more robust analysis of the cost and benefits of solutions, resulting in better use of our health dollars.

HEALTH OPPORTUNITY INDEX (HOI)

Identifying disparities comes first but solutions are necessary to end them. When residents of the Norfolk City Health District identified low birth weight as a barrier to well-being, they turned to the OHE's HOI to point them in the right direction. The HOI is a 13-factor index, built at the neighborhood level, to help communities understand how social and economic disparities affect health in their communities.

Innovation begins in RURAL COMMUNITIES

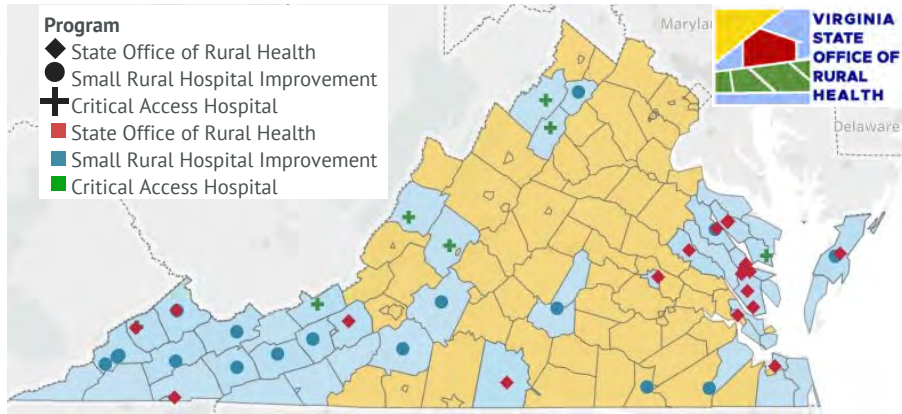
STATE OFFICE OF RURAL HEALTH

Virginia's SORH distributed over \$200,000 in funds to 11 local agencies to implement programs in these focus areas:

- Workforce Development
- Telehealth Services
- Substance Misuse & Recovery
- Behavioral and Mental Health
- Community Paramedicine/Mobile
- Integrated Healthcare

HEALTH PROFESSIONAL SHORTAGE AREAS (HPSAS)

Too often, policy-makers depend on state or county averages. These metrics hide vulnerable populations and mask disparities. The DSE uses **Health Professional Shortage Area** (HPSA) designations to make vulnerable populations visible. The DSE uses granular data to create neighborhood sized HPSAs, such as the dental HPSA they created in Arlandia, a low-income neighborhood straddling Arlington and Alexandria in Northern Virginia. This designation allows the Community Health Center there to attract and retain dentists using OHE's recruitment and retention programs.



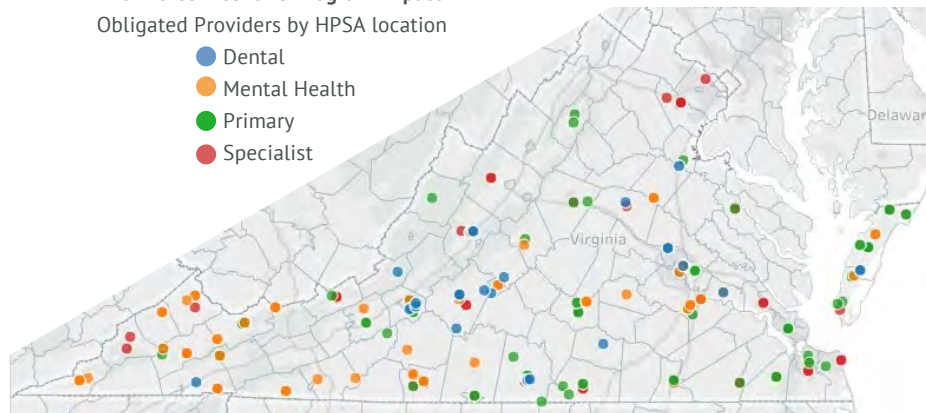
PRIMARY CARE OFFICE (PCO)

PCO's goal is to reduce health disparities by assuring the availability of quality healthcare services to low income, uninsured, isolated, vulnerable and special needs populations by fostering collaboration with similar organizations and identifying communities with the greatest unmet health care needs.

- HPSAs are eligible for certain programs and recruitment opportunities including: The State Loan Repayment Program, J-1 (Conrad 30) Waiver, National Health Service Corps promotion and support, Mary Marshall Nursing Scholarship.
- The PCO also provides administrative support to the Emergency Medical Services Scholarship fund and the Virginia Tobacco Commission State Loan Repayment program.
- **In 2019, The Virginia PCO distributed over \$900,000 in scholarships or loan repayment funds.**

Workforce Incentive Program Impact

Obligated Providers by HPSA location



UNCHARTED TERRITORY



DANVILLE YOUTH HEALTH EQUITY LEADERSHIP INSTITUTE (YHEL)

YHEL is an after-school program dedicated to empowering students to graduate high school on time, with an action plan for the future! The program provides students with knowledge and skills to have successful and fulfilling education and career plans, overcome barriers to education, and decrease health inequities by providing leadership development, life skills, critical thinking skills, mentoring opportunities, college trips/preparation, career planning, financial planning/management skills, and resume building.

- YHEL students perform significantly better academically compared to their peers.
- YHEL is a safe space where students can always feel heard and appreciated, which is a critical component of mental health.



UNCHARTED TERRITORY

Leveraging the strengths of our faith-based and academic networks to respond with *Urgency*

Since 2013, fatal drug overdose has been the leading method of unnatural death in VA, surpassing all other forms of unnatural death including homicide, suicide, motor vehicles accidents, and undetermined deaths.

OPIOID RESPONSE OUTREACH COORDINATOR (OROC) REVIVE! TRAININGS

REVIVE! is the Opioid Overdose and Naloxone Education (OONE) program for the Commonwealth. The VDH-OHE's Partners in Prayer and Prevention (P3) program facilitate the REVIVE! trainings to teach community members to recognize and respond to an opioid overdose emergency with the administration of naloxone (Narcan®).

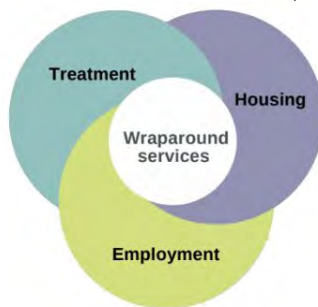
In the past 5 months, P3's response efforts have reached

8,400 persons

through training and community engagement events.

EMPOWERED COMMUNITIES OPIOID PROJECT

ECOP is a regional partnership implemented through the collaborative efforts the VDH-OHE and George Mason University. The ECOP seeks to improve public health by developing and implementing an innovative model of health promotion and management that provides needed medical and social services components to inmates who were found to be drug dependent during incarceration at the Adult Detention Center (ADC) upon their release.



HENRIETTA LACKS COMMISSION

On July 1, 2018, Virginia Governor Ralph Northam signed into law the creation of the Henrietta Lacks Commission and proclaimed September 23-29, 2018 as Henrietta Lacks Legacy Week—to coincide with the inaugural meeting of the Henrietta Lacks Commission. Some additional activities included:

- A worship service at Henrietta Lacks' church home
 - St. Matthew Baptist Church of Clover
- Lacks Legacy Lunch: A VDH lunch & learn to honor Henrietta Lacks' contributions to public health
- An evening panel about Henrietta Lacks and the Henrietta Lacks Commission
- Signing of the Henrietta Lacks Legacy Week Proclamation by State Officials

Highlighting *Resiliency*
Honoring *Legacy*

LGBTQ+ HEALTH EQUITY SYMPOSIUM

On June 27, 2019, the VDH-OHE hosted "The Fierce Urgency of NOW!: Virginia's first LGBTQ+ Health Equity Symposium". This day-long event coinciding with Pride Month was held at VCU's James Branch Cabell Library and aimed to highlight the resiliency of the LGBTQ+ community, while also taking an honest look at who has been left behind in the strides that have been made forward. Focusing on health equity, this gathering proved to be valuable for the 235 healthcare providers, public health professionals, community members, legislators, and allies who attended.