

**The Office of Minority Health
U.S. Department of Health & Human Services**

**A STRATEGIC FRAMEWORK FOR IMPROVING RACIAL/ETHNIC MINORITY
HEALTH & ELIMINATING RACIAL/ETHNIC HEALTH DISPARITIES**

KEY “TAKE-AWAY” MESSAGES

1. Leadership, coordination, and strategic and active partnerships are needed to improve racial/ethnic minority health and address racial/ethnic health disparities. We need the active engagement and sustained efforts over time of all stakeholders, a re-examination of what we are doing/what needs to be done differently, and a determination of how best to work together to enhance individual and collective effectiveness and impacts.
2. The strategic framework developed by OMH can help guide, organize, and coordinate our efforts for better results.
3. There must be a science-based rationale for action(s). The strategic framework offers one way to think about and organize such efforts using current science and knowledge about the nature and extent of the problem, factors that cause or contribute to the problem, strategies and practices that ‘work,’ and desired outcomes and impacts linked to long-term *Healthy People 2010* objectives and goals.
4. “Systems-level” factors play a critical role in promoting or inhibiting success. These factors include: available resources and how they are used; coordination and collaboration through partnerships and communication; leadership and commitment through strategic visioning and sustained attention; user-centered design; and use of science and knowledge to inform programs and policies.
5. Identify expected outcomes and relevant measures for assessing progress as part of the planning process (not after the fact).
6. Evaluate efforts in a systematic fashion to generate new knowledge and facilitate continuous improvement.
7. A “systems approach” is critical to achieving racial/ethnic minority health improvement and racial/ethnic health disparities reductions. This means that we must move beyond our “silos” and work together in more strategic, concerted, methodical, and consistent ways to improve our *collective* effectiveness and impacts.

8. A number of weaknesses and gaps in science and knowledge have been identified. These include, but are not limited to:
 - Nature and extent of minority health/health disparities in small and hard-to-reach populations (e.g., AAPIs & AIANs) due to lack of data;
 - Knowledge and understanding of systems-related factors and how they promote or inhibit minority health/health disparities problems;
 - Relative importance and interrelationships of factors known to inhibit or promote health;
 - Strategies and practices that work, esp. in producing desired outcomes and impacts at the environmental/community and systems levels;
 - Development and testing of outcome measures/indicators, esp. at the environmental/community and systems levels;
 - Evaluation of strategies and practices relative more ‘distal’ outcomes (e.g., behavioral change, improved use of clinical preventive services) vs ‘proximal’ outcomes (e.g., short-term increases in awareness/knowledge, changes in attitudes/perceptions); and
 - User- or practitioner-centered research that brings development and dissemination of research results and integration of such results into practice at the same time.

9. Nature and extent of funding can provide incentives for the kinds of research and evaluation needed.

10. The strategic framework can serve as the basis for – and drive – more results-oriented action by OMH, its partners, and other stakeholders. It is a leadership tool that can promote informed, coordinated, and collective action for minority health improvement and health disparities reduction. Its structure and approach offer a rational and systematic, yet broad and flexible, way of viewing and conducting our efforts. And, it provides context for efforts needed by OMH – and its partners across HHS and the Nation – to:
 - better leverage resources;
 - establish priorities for ensuring effectiveness of programs and activities funded and conducted;
 - identify and promote best practices and concrete solutions at all levels; and
 - create a national results-oriented culture on racial/ethnic minority health improvement and the elimination of racial/ethnic health disparities.