



2015-16 HEALTH EQUITY AND INCLUSION REPORT

FROM THE CHIEF DIVERSITY AND INCLUSION OFFICER



It's said that the biggest part of an iceberg is what you don't see. Only about 10 percent is visible, with the remaining 90 percent underwater. You can easily take that concept and apply it to diversity and inclusion. The way a person or a community looks might catch your attention, yet it's the culture and feelings you can't see that are most important to address — the big chunk of the iceberg.

Our challenge at the American Heart Association/American Stroke Association is to continually respect, appreciate and learn from these differences — seen and unseen — as we strive for health equity, inclusion and diversity in all that we do.

Heart disease and stroke are the world's leading causes of death and impact people of all races, ethnicities, genders, religions, ages, sexual orientations, national origins and abilities. And we know that care and resources are influenced by a diverse range of factors, including education, economics, work styles, learning styles and even geography. Where you live has a lot to do with life expectancy and what you have access to, whether it's affordable housing, healthy food at the grocery store or well-equipped hospitals to provide care in a cardiovascular crisis.

In such an emergency, you'll likely depend on the chain of survival — the critical links to improving your chances of surviving a heart attack or stroke. The AHA works to eliminate as many barriers as possible to make sure that everyone in each community has access to the best the AHA has to offer. As our diverse population continues to grow, millions of lives are depending on us.

Passionate volunteers and other supporters have helped make our work more inclusive, but there's still work to do. Thank you for joining us on the journey to making health equity a reality, helping all Americans lead healthier lives, free of cardiovascular diseases and stroke.

Gerald E. Johnson II
Chief Diversity and Inclusion Officer



DIVERSITY MISSION AND VISION

Our diversity mission is to build a diverse and inclusive workforce and workplace by building leadership capability and organizational capacity for excellence. Our vision is to achieve sustained superior business results in our marketplace.

Diversity is good for business. It's good for society. But it's especially good for the communities the American Heart Association serves in our steadfast efforts to eliminate about heart disease and stroke, the world's top killers. And the AHA's work in minority and multicultural communities is essential to reaching our 2020 Impact Goal to improve the cardiovascular health of all Americans by 20 percent while reducing deaths from cardiovascular diseases and stroke by 20 percent.

The AHA is committed to ensuring that our workforce, workplace and mission make an impact on America's diverse populations. And we're committed to making sure all Americans have access to the treatment they need as well as opportunities to prevent diseases in the first place.

The AHA strongly supports health equity, diversity and inclusion. We know that progress toward our diversity and inclusion goals will make our communities healthier and our workforce stronger. We support diversity on a population scale, for programs in communities and in workplaces across the country. On a national scale, we're pushing for health equity by working to address social determinants of health.

Healthier environments for all

Although deaths from heart attacks and strokes have been declining in recent years thanks to advances in prevention and treatment, factors such as poverty, lack of education and race could reverse that trend, according to the American Heart Association. The incidence of heart disease and stroke in the United States is expected to rise 10 percent by 2030, with the circumstances in which people are born, grow, live, work and age all partly to blame.

African-Americans are two to three times more likely to die from heart disease than white people, according to the latest AHA statistics. African-Americans and other racial and ethnic minorities also have higher rates of premature death from cardiovascular diseases and are at higher risk for high blood pressure and other risk factors for heart disease and stroke.

Many societal and environmental factors affect cardiovascular health, even though they are not traditionally considered health issues. These are known as social determinants of health — important because where and how you live can greatly impact your health. Life expectancy can differ by more than 20 years for people living just 5 miles apart.

Economic issues are a major influence on these determinants. Consider the sheer number of people who may face increased risk of disease because of where they live: There are 10 million Americans living in affordable housing and 23.5 million people without access to healthy foods.

Location affects whether people have access to healthy food, safe places to get active, smoke-free air, educational opportunities and affordable, quality health care. Where you live, work, learn, play and pray greatly impact your health.

That's a big reason the American Heart Association is trying to change unhealthy environments, building a "culture of health" where healthier choices are the easy and popular choices. One way we're doing this is by addressing social determinants such as economic stability, education, neighborhood and societal influences.

These factors, along with the availability of quality health care, disproportionately affect minority populations, who already face increased risk for heart disease and stroke. By improving them, we can help all people live healthier, longer lives.



CEO Nancy Brown (fourth from left) and Chief Marketing & Programs Officer Meighan Girus (fourth from right) welcome a group of Patient Ambassadors, who are helping heart valve disease patients.

"We are committed to improving the cardiovascular health of ALL Americans in every community. The efforts of our volunteers and staff reflect this commitment as we continue striving to advance our guiding principle of Ensuring Equitable Health For All. As an organization, our strength is in our differences. We come from varying backgrounds, and we each bring unique life experiences and points of view to advance our mission. This allows us to be more effective and impactful as we work to connect with people in a way that is culturally appropriate and sensitive to the needs of each population. I am deeply grateful to all of our volunteers and staff for embracing diversity, inclusion and the development of cultural competencies across the American Heart Association."

Nancy A. Brown
Chief Executive Officer





Working in communities

Through our EmPowered to Serve mega-community, we're building healthy environments in faith-based organizations and within affordable housing. We're bringing together businesses, organizations and government agencies to provide health resources helping multicultural communities and individuals.

We also support building standards that promote health and equity. Our advocacy efforts are working to ensure availability of healthy foods and smoke-free living, and easy access to physical activity. Other efforts include initiatives that are building healthier environments for children, such as Voices for Healthy Kids, the Alliance for a Healthier Generation and Healthy Way to Grow.

We continue to advocate for better health care and coverage for all through Medicaid expansion and other policy reforms. Our hospital quality programs and blood pressure initiatives ensure the best care possible, with special emphasis on Federally Qualified Health Centers and hospitals with a large, underserved patient population. We're also helping to build a pipeline for diverse healthcare professionals.

We want to increase healthy living behaviors by improving high blood pressure management and healthy diets, increasing physical activity and reducing tobacco use.



We're also aiming to enhance the Chain of Survival by increasing use of emergency response services in response to CVD/stroke warning signs, and increasing CPR training in multicultural communities. And we work to sustainably transform multicultural community environments by increasing employable skills training opportunities, increasing access to quality health care, eliminating food deserts and increasing access to safe environments for physical activity.

How diversity stacks up at the AHA

We base our work across the country on three pillars that reflect our efforts to engage, educate and meet people where they are: Workforce, Workplace and Marketplace.

Workforce: We rely on volunteers, staff, donors and partners to help foster a smart, collaborative environment. Successful organizations make the most of diversity and inclusion to deliver programs, events and educational opportunities that support a culturally competent workforce that delivers on its mission.

Workplace: Focusing on diversity and inclusion helps enrich us with the talent, creativity and leadership to build healthier lives, free of cardiovascular diseases and stroke. That means providing an inclusive, accessible and adaptable environment equipped with a culture that fosters diversity.

Marketplace: The American Heart Association is committed to ensuring that our mission makes an impact on America's diverse populations — from consumers to partners to suppliers, in healthcare settings, restaurants and retail stores and in communities around the nation.

AHA workplace diversity

The American Heart Association's diversity commitment is so strong that Chief Executive Officer Nancy Brown convenes the CEO Diversity Advisory Committee with employees throughout the organization to ensure that diversity and inclusion are threaded throughout all the work we do. The committee includes high-level executives as well as staff whose departments, duties and level of responsibility vary widely, and it offers annual training and an employee mentoring program to reinforce the importance of diversity.

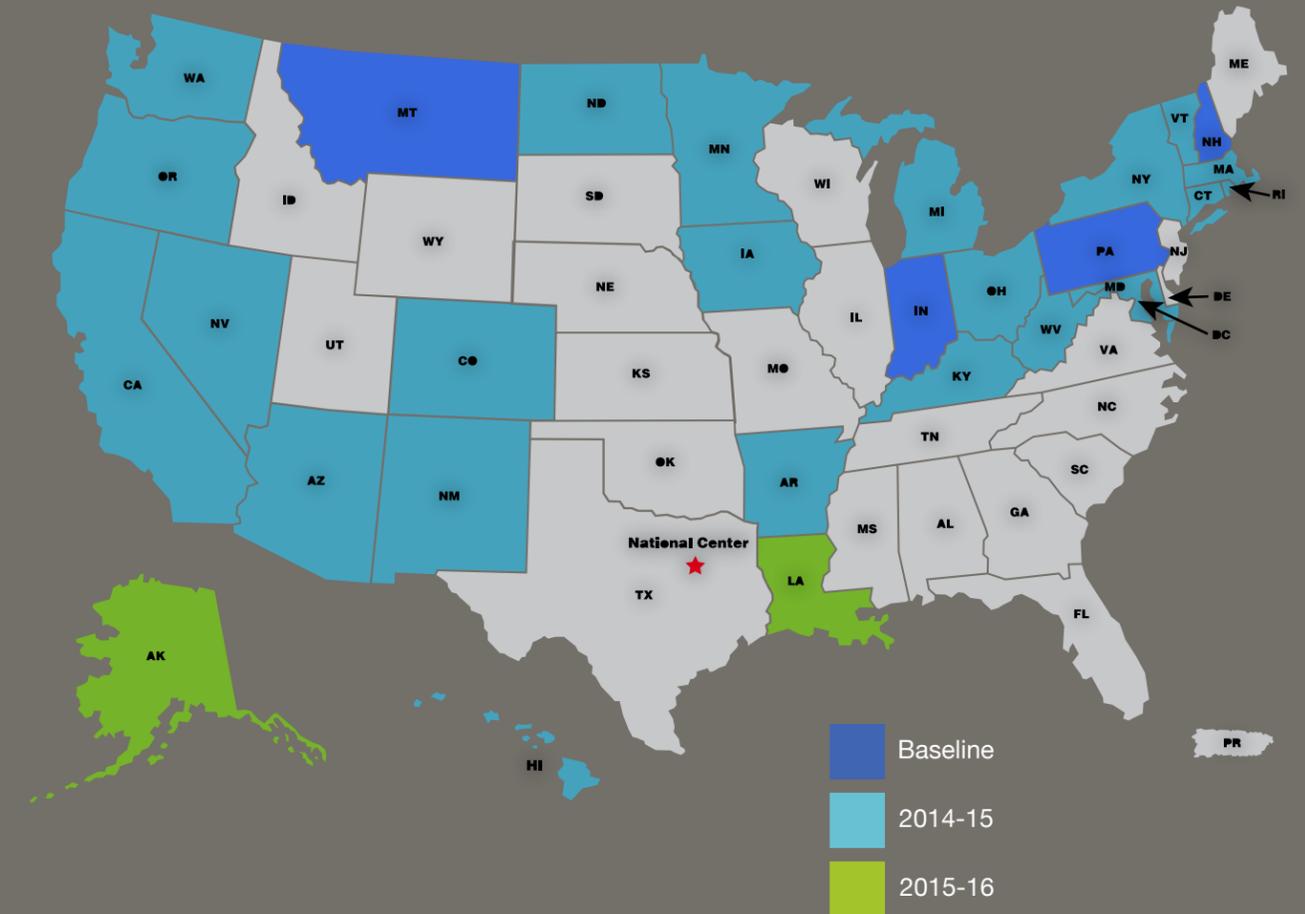


Our commitment to diversity also shows in our engagement with staff and volunteers and in our workforce. We offer cultural and professional development webinars, diversity training, employee resource groups and other initiatives to foster an inclusive organization that reflects the population we serve. We also focus on supplier diversity to ensure that minority- and women-owned businesses are involved in purchasing opportunities.



Medicaid Expansion

Sixty-two percent of Americans live in a state that has adopted expanded Medicaid, providing affordable access to health insurance for low-income adults.



Addressing social determinants of health

The American Heart Association and American Stroke Association use targeted strategies to address the social determinants of health — the circumstances in which people are born, grow, live, work and age — to impact the lives of diverse and underserved populations. Through advocacy, addressing systems of care and EmPowered To Serve, we are working to sustainably transform multicultural communities.

- The AHA works every day to improve the quality of healthcare in hospitals across the nation through Get With The Guidelines. These programs help ensure that healthcare providers use the association’s guidelines to help their patients get the best possible treatment for heart attacks, strokes or other major health issues.

Our volunteers and staff focus on hospitals that treat large underserved patient populations. This work over the past two years has led to more than 340,000 underserved patient discharges receiving treatment using the appropriate Get With The Guidelines module.

- One in three American adults — about 80 million people — have high blood pressure, putting them at increased risk for heart attack, heart failure, stroke, kidney failure and other health problems. Target: BP is motivating healthcare professionals to prioritize blood pressure control and treat patients according to guidelines.

The risks related to blood pressure in underserved populations are extremely high. The American Heart Association’s work is placing Target: BP in healthcare settings that could have the greatest

impact on these populations. This includes Federally Qualified Health Centers, clinics and hospitals that have a large underserved patient population. In just one year, we registered a large number of clinics and hospitals in Target: BP, covering a patient population of more than 29 million.

- The Association of Black Cardiologists announced in collaboration with the Morehouse School of Medicine and the AHA that it will develop a cardiovascular disease registry for underserved populations. Data collected will be used in quality improvement initiatives.

“The work we do every single day matters to us and to lives and generations to come that otherwise would not stand a chance to live longer, healthier lives.”

- Pegui Mariduena, Volunteer Chair, Diversity Leadership Committee

- The AHA works on many policy issues that impact underserved and multicultural populations — from CPR as a graduation requirement to shared use policy to Medicaid expansion. The association advocates to expand Medicaid across the country, with a goal of ensuring that people living at up to 138 percent of the poverty level have access to the health care they need. In 2015-16, two additional states passed laws around Medicaid expansion, meaning a total of 8.2 million people are now covered by this important policy.



Community work makes the world go round

Here are some highlights over the past fiscal year impacting communities around the country:

- The AHA's food and beverage toolkit is helping companies, faith-based organizations, community groups and others make healthier offerings to their customers and constituents. In the past year, organizations impacting multicultural individuals made changes in their food and beverage lineup that made the healthy choice easier for nearly 3.4 million individuals.
- Through our faith-based partnership with Balm In Gilead, 49 percent of these BIG Healthy 2020 churches are adopting the AHA Healthy Food & Beverage Toolkit, reaching about 375,000 people. Overall, 27 faith-based organizations signed and adopted the AHA Healthy Food and Beverage toolkit this past year, reaching more than 565,000 people. Thirty-three percent of BIG Healthy 2020 churches adopted the EmPowered To Serve tobacco-free policy, reaching an estimated 250,000 people who will have access to clean air.
- The AHA's Founders Affiliate established the Northeast Health Equity Consortium to focus on serving high-risk communities in the northeast U.S., with support from the Aetna Foundation.

- Go Red Get Fit, which launched this year, has 8,000 diverse members and growing. The first-quarter challenge motivated women to take 10,000 steps a day and limit their sugar, while the second challenge inspired them to get 30 minutes of cardio at least five days a week and drink more water. Participants have access to fitness trainers and an interactive online support platform. The movement is supported by Macy's.



- Enterprise Community Partners, which operates more than 300,000 affordable housing units reaching more than 1 million people, has partnered to launch EmPowered To Serve in New Orleans, Atlanta and Southern California. Residents are learning about increased physical activity, healthy eating, CPR and advocacy opportunities.

