Call to Action: Children at the Center

Thursday, August 22, 2019
Indian Pueblo Cultural Center
Call to Action: Children at the Center

Call to Action: Children at the Center is a two-year project funded by a grant from the W.K. Kellogg Foundation. Con Alma's health reform work is ongoing, and this collaborative effort represents the next steps in advocating for health reform in New Mexico.

“As the future of health-care reform is uncertain, it is critical that we join together to strengthen our fragile health-care safety net and ensure that we continue to make progress in improving the health of the children, families, and communities so all of us have an equal opportunity to lead healthy lives,” said Dolores E. Roybal, Con Alma’s executive director.
Project Goals

• Create an actionable agenda regarding elements of health reform critical to children and families in New Mexico

• Increase stakeholders’ ability to work together and advocate for the health rights and needs of low-income and vulnerable populations, especially children and families in NM

• Strengthen the health safety net for vulnerable children and families in NM
Community Voice

• Total Participants: 678 individuals*

• Qualitative data collection with 286 individuals to identify patterns and themes:
  – 2 online zoom dialogues
  – 8 key informant interviews
  – 13 small group dialogues
  – 4 presentations at workshops
  – 4 presentations at Project Team meetings

• Online survey with 392 individuals to broaden stakeholders’ participation and deepen an understanding of the qualitative data.

* May include some duplicates.
Data Collection - Purpose

• Show a snapshot of health reform policy actions taking place across New Mexico,
• Identify stakeholders and networks working on health reform issues,
• and recommend a clear path forward.
Key Findings

• Strong commitment and public will to the equity provisions in the ACA.

• Stakeholder interest in policy and financing actions such as the Medicaid Buy In and the New Mexico Health Security Plan and there is opportunity for more stakeholders to get involved.

• Stakeholders involved with local level policy actions where they are prioritizing community as a central force to address the social conditions in their respective communities.

• Strong commitment to support and strengthen an existing and developing network moving forward.
ACA Report

• The qualitative dialogues, online survey, and safety net report reinforce the ACA report recommendations.*
  • Create a cultural of health / coverage for all.
  • Tackle social determinants of health and achieve child health equity in all policies.
  • Prioritize community as a central force to achieve health equity.

* Cacari Stone, L. & Osterfoss, M. (2016), Achieving Equity in Health for Children and Families in New Mexico Through the Affordable Care Act. Con Alma Health Foundation & Robert Wood Johnson Foundation Center for Health Policy, College of Population Health, University of New Mexico
Actions People Want to See and Do

Question 39 asked participants to rank “Solutions Moving Forward” from the initial ACA report recommendations:

1. Create a culture of health coverage for all (7.43)
2. Prioritize community as central force to achieve health equity (5.79)
3. Make payment structures more equitable (5.39)
4. Expand on successful outreach/enrollment (culturally/linguistically aligned) (4.76)
5. Simplify eligibility and enrollment process (5.48)
6. Build on best practices and support systems innovations (4.73)
7. Promote leadership and ensure accountability (3.37)
8. Improve collection of evidence for monitoring/tracking ACA progress (2.68)
9. Tackle Social Determinants of Health (SDOH) and achieve child health equity in all policies (5.91)
Medicaid Buy-In

What is your Buy-In level of interest in Medicaid efforts?

- Interested: 198
- Not Interested: 28
- Moderately Interested: 111

What is your level of involvement in Medicaid Buy-In efforts?

- Not Involved: 224
- Involved: 22
- Moderately Involved: 88
• The most common statewide policy action mentioned in the qualitative dialogues is the **Medicaid Buy In**.
• Project Team partners such as Health Action New Mexico and The Center for Law and Poverty are involved in **The Together for Health Care Campaign**, as well as grassroots organizations (i.e. Dona Ana Communities United, Juntos, Strong Families NM, Together for Brothers) which participated in dialogues or presentations.
• One way communities have been engaged in the **Medicaid Buy In** is through **Strong Families NM Legislative Day**.
New Mexico Health Security Plan

What is your level of interest in the New Mexico Health Security Plan?

- Interested: 162
- Moderately Interested: 113
- Not Interested: 17

What is your level of involvement in the New Mexico Health Security Plan?

- Not Involved: 209
- Moderately Involved: 62
- Involved: 21
Health Policy Actions

• The qualitative data highlighted that in addition to stakeholders being involved in statewide health care reform policy actions, they are focused on local level policy actions tied to the social determinants of health (i.e. campaign for clean buses for healthy children, educating the Navajo Nation on wage theft, early childhood education/prevention, integrated pest management policy, free bus passes for youth, etc.) and behavioral health initiatives.

• Many grassroots organizations are prioritizing community (young men of color, people with disabilities, indigenous people, people who are formerly homeless, etc.) as a central force in their efforts.
Strengthening a Living Network

• There is strong commitment to support and strengthen an existing and developing network moving forward.

• Stakeholders emphasize the importance of connection and collaboration.

• Stakeholders are interested in what other stakeholders who participated in the dialogues are engaged in and opportunities for collaboration around Health Reform.
Strengthening a Living Network
Network Connectors

• There is **strong involvement** across the state in the **NM Alliance of Health Councils** and opportunity to strengthen this network. Local health councils and grassroots organizations serve as strong **community connectors**.

• **Strong Families NM** is a **key connector** linking grassroots organizations to the *New Mexico Together for Health Care* campaign on the Medicaid Buy In. **Health Action NM** and the **Center for Law and Poverty** are also instrumental in this effort.

• Stakeholders utilizing **Health Impact Assessment** to inform policies focused on the social determinants of health are often connected to the **NM Health Equity Partnership**.

• There is a great opportunity to engage stakeholders in **NM’s Public Health Institute**.
What is your level of interest in New Mexico’s Public Health Institute?

Interested: 118
Not Interested: 37
Moderately Interested: 118

What is your level of involvement in New Mexico’s Public Health Institute?

Not Involved: 233
Involved: 13
Moderately Involved: 28
“What populations are you primarily working with?” or “What populations are you working with or do you want to work with?”

- Children and Adolescents: 150
- Women: 144
- LGBTQ: 100
- Native Americans: 130
- Latinos/Hispanics: 153
- African Americans: 94
- Asians/Pacific Islanders: 68
- Immigrants and Refugees: 112
- People by border: 75
- Rural/ frontier people: 159
- People with disabilities: 108
Safety Net

“Services, facilities, and programs which help provide access to health care for uninsured or underinsured individuals” - Santa Fe Project Access

Key Safety Net Report Findings confirm feedback from project gatherings, interviews, and survey.

- Prioritize community as central force to achieve health equity
- Tackle Social Determinants of Health (SDOH) and achieve child health equity in all policies
Safety Net

Opportunities to prioritize community and tackle social determinants of health include:

• Further development of Accountable Health Communities
• More flexibility in county indigent funds to supplement preventative care/health coverage
• Continued support for Community Health Workers/Promotores/Tribal Community Health Representatives
• Continued support for Community Health Centers
• Continued support for School-Based Health Centers
Who did we speak with overall?


- **Populations**: African Americans, Immigrants, Indigenous people, LGBTQ people, low-income people, people of color, people with disabilities, people who are formerly homeless, people who are formerly incarcerated, people impacted by environmental injustice, and youth.

- **Geographic regions**: Southwest, Southeast, Metro, Northwest and Northeast regions / Rural, Urban, Colonias, Border region, and Tribal Communities.
Limitations

• The qualitative data was collected via the HCR Project Team. Stakeholders were identified based on a network of networks, thus providing a certain lens and perspective into what is taking place around the state.

• The quantitative data allowed us to reach a broader range of stakeholders. However, not everyone may have received or have access to the online survey.

• A few of the survey questions were tweaked part way through data collection.
Stay Connected

To stay connected and receive updates regarding this project, text CAHF to 22828 or sign up for our “Health Care Reform Call to Action” mailing list. Thank you!
Thank You!

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Resources

Project Description  https://conalma.org/call-to-action-children-at-the-center/

Key Findings Story Map  http://arcg.is/1DHPub

Partnering for Health Equity: Project Kickoff Event  https://conalma.org/partnering-for-health-equity/

Project Survey Results  https://www.surveymonkey.com/results/SM-NNXTSNP87/