



## CDPC Health Equity Workgroup Environmental Scan Phone Calls / Research

Achieving health equity requires the elimination of health and healthcare disparities. Many organizations have prioritized health equity and the social determinants of health (SDoH) in the public and private sectors.

Our environmental scan provides a snapshot of what other organizations in New Mexico are doing to reduce disparities. Through literature reviews and key contact interviews we've compiled a list of opportunities and programs that are taking place in New Mexico to advance equity.

If you have an ongoing project you would like to share with us, Please email complete responses to: [rcwarnerconsulting@gmail.com](mailto:rcwarnerconsulting@gmail.com) and CC: [laurel@chronicdiseasenm.org](mailto:laurel@chronicdiseasenm.org) and [impactassociates@aol.com](mailto:impactassociates@aol.com). Thank you!

CDPC Health Equity Workgroup Purpose Areas	Description
<b>Education</b> (for us and others and includes Assessment & Communication)	Provide <b>further awareness / education</b> to other entities / partners Speak and <u>share a common language</u> Learn and be able to <b>share information</b> Put a needed <u>spotlight on Health Equity</u> <u>Improve health literacy - Language of health care</u>
<b>Collaboration</b>	<u>Create connections / partnerships</u> to better address the health inequities that exist. <u>Find ways to engage and partner with community members</u> in creating greater equity Create a <b>space for learning / dialogue / discussion</b> on the topic to explore, learn, discuss, and implement HE.
<b>Advocacy &amp; Action</b>	Be part of systems change with <b>advocacy and influencing policy</b> (how do we influence funding / supports move towards better reducing inequities. Operationalize <u>health equity to "make it real"</u>

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
Health Equity Council (HEC)	Enrique Cardiel, Executive Director <a href="mailto:enrique@bchealthcouncil.org">enrique@bchealthcouncil.org</a>	~ Albuquerque & Bernalillo County ~ Population: Focus on people of color and the working class (this may be expanded with time)	Yes
<p><b>2) Emphasis Area(s) / Purpose</b> The Health Equity Council (formerly the Bernalillo County Health Council) sees its public health work—especially the health promotion work it does as focused on improving health equity. The purpose of the Council is to engage people in its communities in enhancing their control over their own health, especially by supporting involvement in programs, community events and committees.</p>			
<p><b>3) 2-3 Specific Activities (past / present / future)</b> In particular, the HEC facilitates community-based committees to address certain public health issues (like substance abuse), getting out into the community to participate with people in health-based activities like walking, getting fresh foods from farmers markets, and the like, and training people/taking part with them in certain community risk/harm reduction actions like removing used syringes from public areas. Community outreach consists (less so with COVID) of interpersonal interactions with people in the community, and staff also does much community training and facilitation. Two activities recently undertaken were the Earth Day Event in the city, as well as the CiQlovía (“open streets”) Walk/Ride/Play city event to promote healthy, active behaviors. <b>Insert activity web address (if applicable):</b> <a href="https://www.healthequitycouncil.net/">https://www.healthequitycouncil.net/</a></p>			
<p><b>4) Key strengths / skills</b> HEC staff have particular strong skills/capacities (but are not limited to) in: listening and bi-directional communication with community members, health promotion at the grassroots level, community training and training of trainers, doing community outreach in such a manner that they are not always “preaching to the choir,” and developing collaborations by starting small with like-minded groups and then gradually, through mutual learning, increasing a collaborative group size by including more members that are not quite as supportive of an issue (thus being more inclusive).</p>			
<p><b>5) What other health equity groups do you work with? Open to working w like groups?</b> The Health Equity Council has a history of partnering with other groups and sharing information/skills, and will continue to do so. Some particular groups with relations to the HEC include: Deconstructing Racism in New Mexico, the NM Health Equity Partnership, various other health councils (McKinley), the Department of Health, Senior Social Services, the International District Health _____, Albuquerque’s Office of Equity and Inclusion (Community Safety Department), East Central Ministries, NM Women.org, Cannabis Equity Coalition (new), Presbyterian’s Community Services, and the Collaborative for Health Equity, among others. <b>Other Notes:</b> There is currently a staff of 10, and approximately 6 contractors for various grants.</p>			

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
Center for Health Equity, American Medical Association (CHE)	Joaquin Baca <a href="mailto:joaquin.baca@ama-assn.org">joaquin.baca@ama-assn.org</a>	National, but strongly consider rural/urban areas showing inequities in their populations. Focus on racial populations with inequity issues.	Yes
<p><b>2) Emphasis Area(s) / Purpose</b>  The AMA’s CHE purpose is to carry out several approaches, among them: embed equity within the AMA itself; share with and assist physicians from marginalized populations; push efforts upstream to better address social determinants of health; foster racial healing and transformation; and to ensure equity and innovation (for example through promotion of key accelerators or catalysts, like AI technology, to foster equity in the field of medicine.</p>			
<p><b>3) 2-3 Specific Activities (past / present / future)</b> Activities or tactics to move these aims forward include: embedding equity through education and training (an organizational change model); provision of resources; building alliances and partnerships (see two examples below); working through the channel of grand rounds to educate physicians and affect the culture of medicine in a positive way and improve quality of services; helping local entrepreneurs, from Black and other disadvantaged populations, gain access to funding streams—like venture capital—to build services and businesses meant to address and improve upstream factors affecting community economic/health development; and also participating in truth, reconciliation and healing efforts (such as apologizing to African American physicians formerly denied membership in AMA.  (Examples being (1) support of the Westside United community collaboration in Chicago to address social and political determinants of health in an underserved community); and (2) partnering with Essence magazine on a campaign to reduce blood pressure among African American people in a way that does not blame the patient for the problem.  <b>Insert web address (if applicable)</b> <a href="https://www.ama-assn.org/topics/ama-center-health-equity">https://www.ama-assn.org/topics/ama-center-health-equity</a></p>			
<p><b>4) Key strengths / skills</b>  Key strengths of the CEH staff include deep content expertise on health equity, especially in policy and advocacy, and a commitment to health equity principles.</p>			
<p><b>5) What other health equity groups do you work with? Open to working w like groups?</b> The AMA has a broad reach, working with its state associations, as well as national and state medical specialty associations and the Federation of Medicine. It works with the National Hispanic Medical Association, Association of American Indian Physicians, and Asian-American Physicians Association. In New Mexico, there are ties to the Center for Health Innovation, the Pacific Institute for Research and Evaluation, and the NM Birth Equity Collaborative.</p> <p>Other Notes:</p>			

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
Center for Health Innovation (NM’s Public Health Institute)	Susan Wilger, Executive Director	Whole State Underserved populations, some focus on rural areas	Yes
<p><b>2) Emphasis Area(s) / Purpose</b>  Work with communities to advance health and social justice through innovative and effective policies and programs. Work to make healthy communities possible for all people, especially those who are typically underserved. We empower groups and individuals at a local, state and national level to determine the future well-being of their communities through policy, <a href="#">advocacy</a>, <a href="#">education</a>, and <a href="#">programs</a>.</p>			
<p><b>3) 2-3 Specific Activities (past / present / future)</b> CHI’s approach is to work through a health equity lens—both on internal staff capacity-building efforts—as well as in external programs. Such an approach, applying health equity principles is to start all program with a needs assessment that includes such questions as: what health equity issues/populations exist that need to be specifically considered or addressed in the context of the overall program. For example, in the CHI’s Workforce development there is a concentration on helping build a workforce that reflects the diversity of the state’s populations to serve people better. In its NM CDC database work and Data-to-Action training, staff structure the data to include health equity indicators, and they work with groups doing community health assessments to identify health equity indicators—even in small geographic neighborhoods in their mapping. Finally, there is a strong focus on health equity—factors, current status, potential consequences—in relation to the development of policy priorities, policies themselves, and strategies.</p> <p><b>Insert web address (if applicable)</b> <a href="https://chi-phi.org/">https://chi-phi.org/</a></p>			
<p><b>4) Key strengths / skills</b>  With regard to health equity, CHI is currently working to assess these skills/capacities in their staff to enhance their capacity to do this type of work. CHI is working to design appropriate tools to do these types of worksite assessments.</p>			
<p><b>5) What other health equity groups do you work with? Open to working w like groups?</b>  CHI works with a great variety of other organizations that are public health related in the state, and it is a strong supporter of the NM Alliance of Health Councils (as well as managing at least one county health council itself). It is open to working with other health equity-related groups.  Other Notes:</p>			

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
City of Albuquerque, Office of Equity and Inclusion	Michelle Melendez, Director <a href="mailto:Michellemelendez@cabq.gov">Michellemelendez@cabq.gov</a>	Albuquerque, but interact with other NM cities/counties and with other states. Focus on populations most marginalized/underserved	Yes
<p><b>2) Emphasis Area(s) / Purpose :</b> To inspire and equip city government to make Albuquerque a national role model of racial equity and social justice, through...</p> <ul style="list-style-type: none"> <li>• Developing a city workforce representative at all levels of city demographics</li> <li>• Increasing local purchasing and contracting with companies owned by people of color or women</li> <li>• Investing in areas of the city that have been under invested</li> <li>• Ensuring that the city delivers city services in an equitable and inclusive manner.</li> </ul>			
<p><b>3) 2-3 Specific Activities (past / present / future)</b></p> <p>~ Involvement in Healthy Neighborhoods ABQ—to develop partnerships and collaborative projects that leverage anchor institutions' capacities to move “upstream” to buy local (and from minority firms) and hire local, as well as promote business development in underinvested neighborhoods—helping to change institutional and city government policies regarding equity and inclusion.</p> <p>~ Assessing/monitoring equity indicators (social determinants of housing, food, other supports) in general and with regard to COVID assistance</p> <p>~ Building the capacity of city offices to provide equitable services, integrate equity principles into operations/policies and providing resources</p> <p>~ Work through the Offices of African American Affairs, Native American Affairs, and Immigrant &amp; Refugee Affairs to strengthen, support their efforts in the community to assist and mobilize community efforts</p> <p>~ Serve as a gatekeeper for resources, jobs, ways to inform and educate the public; helping marginalized people navigate the city’s various departments and system to get the assistance to meet their needs (civil rights issues, immigration status, etc.)</p> <p>~ Work with the city to ensure the development of a diverse workforce (racial, language, life experiences, etc.); training in equity and inclusion for all city departments—includes Plain Language work and integrating health literacy concepts into the forms and communication the city government uses to communicate with those from marginalized populations</p> <p><b>Insert web address (if applicable)</b> <a href="https://www.cabq.gov/office-of-equity-inclusion/office-of-equity-inclusion-about">https://www.cabq.gov/office-of-equity-inclusion/office-of-equity-inclusion-about</a></p>			
<p><b>4) Key strengths / skills</b></p> <p>Implement equity work within the lens of public health; assessment and monitoring; building capacity in health/racial equity, diversity, inclusion, navigation of the city systems; building the city’s capacity to be responsive to underserved communities; challenging officials and staff to think about how underserved/marginalized people’s perceive/view things and how they engage in issues; training</p>			
<p><b>5) What other health equity groups do you work with? Open to working w like groups?</b></p> <p>Work with a variety of groups, community groups, organizations, APS, GARE, and coalitions and health councils. Open to working with other groups.</p> <p>Other Notes:</p>			

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
NM Alliance of Health Councils (NMAHC)	Sharon Finarelli, Executive Director sharon@nmhealthcouncils.org	Statewide/ County populations, especially marginalized ones	Yes
<p><b>2) Emphasis Area(s) / Purpose</b>            Improve the health of all people living in New Mexico by supporting and strengthening county and tribal health councils, advocating for health equity, and by providing a strong voice for community and public health. Note the NMAHC works through 33 county health councils and 6 tribal councils.</p>			
<p><b>3) 2-3 Specific Activities (past / present / future)</b>            ~ Currently in organizational development phase to build capacity to address health equity within a racial (especially indigenous) equity frame.            ~ Re advocacy and policy efforts, internal documents &amp; external reports—review documents and efforts for health equity issues.            ~ In community work, research/identify gaps—as in broadband access—to address; recently prepared a tool for communities without strong access to broadband to use in making it more available for a time            ~ Implement through councils wellness visits to disadvantaged populations (elderly, disabilities); work with DOH on setting up accessible COVID vaccine clinics; setting up community gardens in food desert areas in counties.            ~ Councils bring all sectors in community to the table for planning and action related to health and health equity  <b>Insert web address (if applicable)</b> <a href="http://www.nmhealthcouncils.org/">http://www.nmhealthcouncils.org/</a></p>			
<p><b>4) Key strengths / skills</b>            Many health councils going through capacity building in a variety of areas now. Currently have community engagement and facilitation skills; members work with the state on community health assessments/health improvement plans; strong skills in policy and advocacy.</p>			
<p><b>5) What other health equity groups do you work with? Open to working w like groups?</b>            Work strongly with DOH, NMSU, UNM, CHI, NMPHA, NM First and others. Open to working with others.            Other Notes:</p>			

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
<b>New Mexico Social Justice &amp; Equity Institute (NMSJEI)</b>	Ms. Anna Rondin Phone: (505) 879-3666 <a href="mailto:nmsjei@gmail.com">nmsjei@gmail.com</a>	Mostly NW Primarily Tribal populations	Yes, and growing
<p><b>2) Emphasis Area(s) / Purpose</b></p> <p>The NMSJEI is planning strategically and building infrastructure to continue changing and “decolonizing” systems that perpetuate health disparities, in particular those resulting from decades of environmental degradation by the uranium mining industry, institutional racism directed at Indigenous communities, and multi-generational trauma. The focus is building community member capacity in civic engagement, community-based research, policy change, advocacy and leadership. It intends, in the future and at the national level to bring about Constitutional amendments to remove language-related barriers to anti-racism, and to resolve disparities caused by historical treaties. The staff engage the community (McKinley County, Zuni Pueblo and the Navajo, in particular) to carry out collective action through education and institutional knowledge to generate public and policy change; organize and mobilize cohorts of informed and equipped community members to take action that will improve their lives; sponsor training and provide technical assistance on conducting health impact assessments.</p>			
<p><b>3) 2-3 Specific Activities (past / present / future)</b></p> <p>NMSJEI has mobilized the McKinley and Navajo residents in place-based teams to research and develop health impact assessment (HIA) (an assessment tool that provides a set of evidence-based recommendations of how a potential (or current) policy will affect community health to inform policy-level decision-making) of negative uranium mining effects on health. It is currently working on an HIA considering the affordable housing shortage in McKinley County. Staff are training community members in community-based participatory research and HIA development. The Institute, with other partners, is involved in the current Navajo water issues, in the Navajo-Hopi Covid Relief Plan and Innovation in Sustainability. It continues to build relationships with other community, state and national groups to build the base for larger civic engagement efforts. It is also involved with the Spirit Farm and Spirit Learning Centers.</p> <p><b>Insert web address (if applicable) <a href="https://nmsocialjustice.org/">https://nmsocialjustice.org/</a></b></p>			
<p><b>4) Key strengths / skills</b> NMSJEI has expertise in conducting health impact assessments that seek to maximize the positive health impacts and minimize the negative health impacts of proposed policies, programs, and projects. It is developing greater strength in policy analysis, CBPR, community leadership, networking, and ways to effectively address racism and health inequities. It is looking strongly at the Strong Families model of working with communities to address legislative and policy issues. It also has strengths in holding community convenings, virtual and in-person town halls, organizing marches and has been involved heavily in the COVID rapid response activities in McKinley and on the Navajo.</p>			
<p><b>5) What other health equity groups do you work with? Open to working w like groups?</b></p> <p>NMSJEI is constantly networking and creating relationships with other health equity/equity/anti-racism organizations and community groups. It has strong working relations with the McKinley Community Health Alliance, TREE, Rio Grande Community Development Corporation, the Navajo Nation, CHI, NMAHC, Forward Together Action, Strong Families, McKinley Worker Justice Coalition, SOMOS, the NM Planning Association, and many others.</p>			

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
UNM, Transdisciplinary Research, Equity and Engagement Center for Advancing Behavioral Health (TREE)	<b>Director and Principal Investigator</b> Lisa Cacari Stone, PhD <a href="mailto:lcacari-stone@salud.unm.edu">lcacari-stone@salud.unm.edu</a> Email: <a href="mailto:treecenter@unm.edu">treecenter@unm.edu</a> Office: <a href="tel:505-994-5081">505-994-5081</a>	New Mexico—underserved populations, esp. Native Americans and Latinos	Yes
<b>2) Emphasis Area(s) / Purpose</b> Among twelve research centers of excellence funded by the <a href="#">National Institute of Minority Health &amp; Health Disparities</a> . The TREE Center cultivates local state, tribal and national stakeholders to create opportunities for transformative impact to: (1) Improve behavioral health equity among diverse communities; (2) Nurture community/academic ways of knowing; and (3) Prepare the next generation for conducting transdisciplinary multi-level intervention research. Holds the <a href="#">Equity in Policy Institute</a> , a unique training and on-going technical assistance, with “policy dialogues,” that foster the development and implementation of more equitable policies; contribute to good governance and democracy; and broaden and increase engagement of people most impacted.			
<b>3) 2-3 Specific Activities (past / present / future)</b> The Center’s transdisciplinary academic-community team science highlights the social determinants of behavioral health, including ACE, historical trauma, and intersectional effects of poverty and discrimination to improve conditions and outcomes related to youth suicide, alcohol and drug misuse, depression, and access to behavioral health services. Four aims: <ol style="list-style-type: none"> <li>1. Implement a synergistic co-leadership model to promote transdisciplinary, multi-level intervention research to advance the knowledge and science to improve behavioral health outcomes.</li> <li>2. Operationalize integration of theories, study design, and analysis into collaborative, multi-level interventions that improve behavioral health outcomes for socioeconomically disadvantaged and underserved rural populations with a southwest regional focus.</li> <li>3. Expand development of a diverse scientific workforce by training new and early stage under-represented minority investigators (URMs) in a transdisciplinary context to conduct community engaged, multi-level intervention behavioral health research.</li> <li>4. Cultivate equitable research collaborations with community and tribal stakeholders, regionally and nationally, to translate and co-disseminate transdisciplinary research evidence into practice and policy.</li> </ol> <b>Insert web address (if applicable)</b> <a href="https://hsc.unm.edu/population-health/research/tree-center/">https://hsc.unm.edu/population-health/research/tree-center/</a>			
<b>4) Key strengths / skills</b> <ol style="list-style-type: none"> <li>1. Transdisciplinary, multi-level research; training new and early stage under-represented minority investigators; Cultivate equitable research collaborations with community and tribal stakeholders, regionally and nationally, to translate and co-disseminate transdisciplinary research evidence into practice and policy; training to create local champions and academic researchers to learn how to conduct policy analysis from decolonized and racial justice approaches.</li> </ol>			
<b>5) What other health equity groups do you work with? Open to working w like groups?</b> Centro Sávilá, Encuentro, New Mexico Dream Team, New Mexico Immigrant Law Center, and many others. Other Notes:			



Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
UNM, White Coats for Black & Indigenous Lives--Hiring Practices Subcommittee	<a href="tel:505-277-8900">505-277-8900</a> <b>Jamie Majdi</b> , MD, MSPH, PGY-2, Family and Community Medicine, WC4BIL	UNM School of Medicine-specific	Yes
<p><b>2) Emphasis Area(s) / Purpose:</b>            Focused on documenting, understanding, and transforming hiring practices for faculty and staff within the UNM HSC. Our top priorities at this early stage of work are to fully understand and document how hiring occurs within the UNM HSC and create recommendations to improve the hiring process where necessary, with the goal of ensuring that everything possible is being done to improve the representation of diverse groups within all levels of the UNM HSC.</p>			
<p><b>3) 2-3 Specific Activities (past / present / future)</b>            Leadership must center the treatment and rights afforded to those most marginalized and underrepresented members of our New Mexico community. A subcommittee aims to advance an antiracist framework at our institution around the following areas: Investments/Divestment, Relationships with Police and Prisons, Obligations to Indigenous and Indigent Communities, and Low Wage Workers. Another committee works to change the inequitable admissions process for all schools at the HSC, in order to promote and institutionalize a more diverse student body that recognizes the importance of cultural heritage and community. One priority is to reevaluate current pipeline programs throughout the HSC and make positive adjustments where needed to ensure the success of students, especially those from marginalized backgrounds. An education subcommittee works on reform to both curriculum and student support resources across the Health Sciences Center, building capacity and tools for faculty training regarding how to dismantle racism within their institution.</p> <p><b>Insert web address (if applicable)</b> <a href="https://hsc.unm.edu/culture/white-coats-for-black-indigenous-lives.html">https://hsc.unm.edu/culture/white-coats-for-black-indigenous-lives.html</a></p>			
<p><b>4) Key strengths / skills</b></p>			
<p><b>5) What other health equity groups do you work with? Open to working w like groups?</b></p> <p>Other Notes:</p>			

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
New Mexico Transgender Resource Center	ADRIEN LAWYER (HE/HIM), CO-FOUNDER & EXECUTIVE DIRECTOR 505-200-9086	Albuquerque and New Mexico—transgender, nonbinary, gender non-conforming, and gender variant people	Yes

**2) Emphasis Area(s) / Purpose**

Provides advocacy, education, and direct services in support of transgender, gender nonconforming, nonbinary, and gender variant people and their families.

**3) 2-3 Specific Activities (past / present / future)**

TGRCNM offers training on transgender lives and issues for any class, workplace, or group that invites it; holds a Drop-In Center open Monday, Wednesday, and Friday 1-5pm, with a wide variety of services and assistance; holds groups for support issues; and has a Food Access Project that addresses issues of food insecurity and chronic hunger in the trans community within a social justice framework. They also provide crisis line information.

**Insert web address (if applicable)** <https://tgrcnm.org/>

**4) Key strengths / skills** (See activities above)

**5) What other health equity groups do you work with? Open to working w like groups?**

TGRCNM has a number of New Mexico and National partners with whom it collaborates. These include, but are not limited to: ACLU of New Mexico, Albuquerque Healthcare for the Homeless, Albuquerque Pride, Albuquerque Public Schools, Alianza of New Mexico, American Veterans for Equal Rights-NM, National Immigrant Justice Center...

Organization / Group	Contact Person Phone / Email	Geographic / Population Focus	Currently Active?
New Mexico Immigrant Law Center	Adriel Orozco Executive Director (505) 247-1023	New Mexico—immigrants, refugees, DACA	Yes
<p><b>2) Emphasis Area(s) / Purpose</b>  The purpose of the NMILC is to advance justice and equity by empowering low-income immigrant communities through collaborative legal services, advocacy, and education. The mission is to advance justice and equity by empowering low-income immigrant communities through collaborative legal services, advocacy, and education.</p>			
<p><b>3) 2-3 Specific Activities (past / present / future)</b>  NMILC provides holistic and trauma-informed legal services to immigrant survivors of crimes living in New Mexico, and to survivors living in two of New Mexico’s immigrant detention centers; helps first-time, low income, eligible candidates fill out their initial DACA application, while continuing to assist current recipients with permit renewals; provide free pro se assistance to individuals seeking asylum; advocate for detainee and asylum seekers’ rights, and fight for the abolition of dehumanizing and incarcerating immigration systems; and more.</p> <p><b>Insert web address (if applicable)</b> <a href="https://www.nmilc.org/">https://www.nmilc.org/</a></p>			
<p><b>4) Key strengths / skills</b>  To make high-quality legal representation accessible (pro bono) to low-income immigrant communities.</p>			
<p><b>5) What other health equity groups do you work with? Open to working w like groups?</b></p> <p>Specific partners include: ACLU of NM, UNM School of Law, Catholic Charities (Archdiocese of Santa Fe and Las Cruces), New Mexico Asian Family Center, New Mexico Bar Children’s Law Section, New Mexico Legal Aid, Enlace Comunitario, Highland High School, La Familia Medical Center, and many others.</p>			