

**Join us as a Champion of Health Equity**

With a track record of helping to save and improve lives for nearly 100 years, the American Heart Association is taking bold actions – we call them our **10 Commitments** – to remove barriers to health and advance cardiovascular health for all. We invite you to join us in this life-changing, lifesaving work.



Learn More

- 1 Investing \$100 million in new research programs and grants** focused on science-based solutions to health inequities and structural racism.
- 2 Investing at least \$100M in community-led solutions** to address health inequity and structural racism, through our Social Impact Fund, Bernard J. Tyson Impact Fund, and community issues campaigns including Voices for Healthy Kids.
- 3 Improving access to and the quality of health care** for under-resourced populations and those in rural communities, as part of our 50-state focus on Medicaid expansion.
- 4 Leveraging our advocacy, science and news media enterprise** against companies targeting individuals in disadvantaged communities with unhealthy products.
- 5 Through a \$32M award to the AHA, engaging health centers and communities** to elevate quality, education and patient engagement to improve blood pressure control, as part of the U.S. Department of Health and Human Services (HHS) \$121M National Hypertension Control Initiative.
- 6 Using our extensive clinical registry programs** to capture data and create new scientific knowledge on the health effects of social determinants of health and health care quality variances among racial and ethnic groups.
- 7 Collaborating with our CEO Roundtable to architect a road map, conceptual framework, and related tools** for employers to identify and dismantle practices and policies in the workplace that contribute to structural racism and health inequities.
- 8 Creating a digital learning platform for clinicians, health professionals, and scientists** with courses on issues of reversing structural racism and improving health equity in the delivery of health care.
- 9 Elevating the focus of our scientific journals**, including Circulation and Stroke, on disparities, anti-racism, health equity, community participatory research and implementation science.
- 10 Increasing the diversity of our workforce**, by filling at least one-third of hires with diverse individuals and providing ongoing learning and development experiences for current staff and managers to reduce bias in health care.



### Women’s Heart Health Actions Outlined

Women continue to be underrepresented in cardiovascular disease care, and it’s hurting their heart health. A new American Heart Association advisory outlines ways to address health inequities, including efforts to more accurately measure and respond to the particular risks’ women face. [Read more](#)

### The Research

The United States has the highest maternal mortality rate among industrialized countries, and cardiovascular disease is the leading cause of pregnancy-related mortality in the U.S. (Mehta et al., Circulation, 144:e251, 2021). Major racial disparities exist in maternal health outcomes. Black

women experience pregnancy-related death at a rate 2.5 times higher than White women and 3.5 times higher than Hispanic women, and American Indian/Alaska Native women experience pregnancy-related death more than twice as often as White women (Hoyert, NCHS Health E-Stats, 2021). College-educated Black women are still at higher risk than White and Hispanic women with less than a high school diploma, and Black college-educated women are five times as likely to die than White college-educated women (Petersen et al., Morbidity and Mortality Weekly Report, 68(35), 2019; Bond et al., Circ Cardiovasc Qual Outcomes, 14:e007643, 2021).

## Health Equity Research Network (HERN): On Disparities in Maternal-Infant Health Outcomes

### Acknowledging The Lay Peer Reviewers for Maternal Health

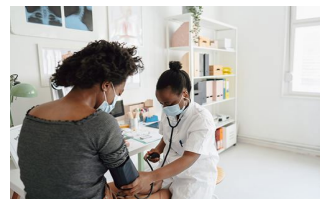
**Phase I** Donna Gray, Monique Acosta House, Coletta Barrett; Sandra Perez; Debora Grandison; Kristen Gradney; Yolanda Darville; Yolanda Vaughn

**Phase II** Debora Grandison and Leroy Miles

## Network Overview and Structure

Disparities in Maternal-Infant Health will be a single Network that will include multiple projects. An overall project plan will be developed by self-identified sites and submitted to the AHA as a coordinated submission. Proposed projects will have a common fundamental theme that will assess pathophysiologic mechanisms, an intervention or approach to the optimization of health outcomes for mothers and/or infants. **All aspects of the network application (each Project and the Coordinating Center) were reviewed as a collective program.** The successful Network application will be one wherein each Project and the Coordinating Center are judged to be exemplary.

### CALL TO ACTION



Maternal mortality is alarmingly high at about 700 deaths a year in the United States, with cardiovascular disease (CVD) being the leading cause of pregnancy-related death.

AHA is committed to leveraging advocacy efforts and working with strategic partners to develop sustainable and impactful solutions for preventing maternal death and ensuring all individuals experiencing pregnancy can live healthy lives before, during, and after giving birth.

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AHA recommends a multi-pronged approach to help reduce US maternal mortality rates, including: improving health literacy and public awareness on preconception care; achieving cultural competency and bias reduction among providers; mitigating the impact of social and structural determinants of health; transforming payment and a promoting value-based care; modernizing healthcare delivery infrastructure and expanding care-coordination; improving public health infrastructure and digitally enabled healthcare; improving quality reporting of maternal outcomes and health metrics; and expanding access to quality postpartum care. [Read the full article in Circulation »](#)

# THE FISCAL YEAR IS ENDING

## Thank you

We would like to express our sincerest appreciation to all the lay stakeholder volunteers who have served or are waiting to serve for your valuable efforts and willingness to stand ready for an assignment in 2021-2022.

The strength of the American Heart Association is in its volunteers.

### Lay Stakeholder Science and Research Task Force

Many thanks to the Jackie Ng-Osorio, PhD, Sally Powers, Tara Robinson, Larry Sadwin, and Shirley Yoshida for passionately and faithfully completing their term on Task Force .

#### 2021 – 2022 Lay Stakeholder Task Force Members



Bernie Dennis, Chairperson,  
Richard James, Jackie Ng-Osorio, PhD, Sally Powers, Tara Robinson, Larry Sadwin, Shirley Yoshida

It has been a productive and powerful year for the patient community! Achievements include an influential patient voice on AHA research and science committees and projects, new strategies for recruiting more non-scientist volunteers from under-represented groups, new strategies for public acknowledgment of lay stakeholder volunteers - The Lay Stakeholder's Virtual Awards Ceremony on December 7, 2021, more than 172 volunteers with varying backgrounds, patient health profiles, caregiver profiles, and service experience retained for recruitment on committees and projects.

The task force touched base with AHA Regional Executive Vice Presidents and others to revisit the Lay Stakeholder Initiative and encourage nominations of lay stakeholders in all regions to widen volunteer diversity (ethnicity, sex, race, age). Interviews with science volunteers provide an opportunity to highlight patient advocate involvement and the value of involvement. **What a year!**

## ACKNOWLEDGING JUNETEENTH



A celebratory time from history, Juneteenth National Independence Day, also known as Jubilee Day, Emancipation Day, Freedom Day and Black Independence Day which is a federal holiday in the United States commemorating the emancipation of enslaved African Americans. Often observed for celebrating African American culture. Originating in Galveston, Texas, it has been celebrated annually on June 19 in various parts of the United States since 1865.

If interested in serving please contact [Elizabeth.Cooper@heart.org](mailto:Elizabeth.Cooper@heart.org) or [Angela.McCarty@heart.org](mailto:Angela.McCarty@heart.org)