

THE HEART OF

# RESEARCH

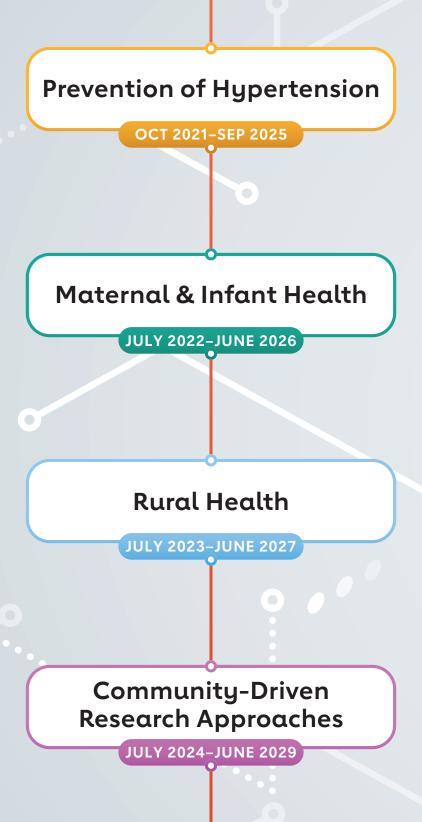








**HEALTH EQUITY RESEARCH NETWORKS** 



In 2021, the American Heart Association committed to funding new initiatives aimed at breaking down barriers to equity in healthcare. With this goal came the inception of the Health Equity Research Networks (HERN). Each network connects academic institutions and community organizations to address adverse social determinants of health and advance care for impacted communities. Between 2021 and 2024, the American Heart Association committed \$80 million to fund four HERNs.

### **Prevention of Hypertension**

NYU Grossman School of Medicine

### Add**RE**ssing **Social Determinants TO** p**R**event hyp**E**rtension (RESTORE)

Testing various interventions to help people overcome barriers to health caused by lack of access to healthcare, healthy food, and exercise.

**COORDINATING CENTER** 

### PROJECT

NYU Grossman School of Medicine

### Community-to-Clinic Linkage Implementation Program (CLIP)

Engaging barbershops to connect Black men to cardiovascular healthcare and hypertension screenings.

Enlist 30 barbershops to screen Black men for hypertension, provide healthy lifestyle advice, and be a liaison to cardiovascular healthcare while testing the impact of providing "expert help" to participating barbershops.



### **PROJECT**

The University of Alabama at Birmingham

### Equity in Prevention and Progression of Hypertension by Addressing Barriers to Nutritional and Physical Activity (EPIPHANY)

Collaborating with churches to provide dietary and physical activity coaching to Black adults with unmedicated high blood pressure.

Enlist 30 rural Alabama churches to identify Black adults with untreated high blood pressure to participate in one of two interventions, providing either group health education with access to exercise classes and healthy cooking shows or online support of dietary and exercise goals from a health coach.



#### **PROJECT**

Wayne State University

# Linkage, Empowerment, and Access to Prevent Hypertension (LEAP-HTN)

Deploying mobile health units to deliver personalized healthcare to Black residents of Detroit with high blood pressure.

Employing mobile health units and community healthcare workers for direct provision of personalized healthcare to Black adults in Detroit living with high blood pressure to understand the impact of personal care and coaching on blood pressure.



#### **PROJECT**

Beth Israel Deaconess Medical Center

### Groceries for Black Residents to Stop Hypertension (GOFRESH)

Piloting virtual grocery list program to examine the impact of weekly healthy food deliveries on the blood pressure and cholesterol of Black adults with high blood pressure in Boston.

Evaluating a novel virtual grocery list program in conjunction with three months of weekly healthy food deliveries to Black residents of Boston who have high blood pressure. Groceries are balanced under the Dietary Approaches to Stop Hypertension (DASH) healthy eating plan.



Johns Hopkins University School of Nursing

Home Blood Pressure Telemonitoring Linked with Community Health Workers to Improve Blood Pressure (LINKED-BP)

Measuring impact of community health workers and mobile health apps in conjunction with home blood pressure monitoring on blood pressure.

Examining the impact of supplementing a home blood pressure monitoring intervention with help from community health workers and a mobile app on blood pressure over the course of a year.



### Disparities in Maternal-Infant Health Outcomes

The University of Alabama at Birmingham

Pregnancy and Postpartum/Postnatal: Enhancing Access and Quality To Achieve Equitable Maternal and Infant Health (P3EQUATE)

Understand and address factors resulting in disproportionate pregnancy-related health outcomes in Black, Native American, and rural communities.

**COORDINATING CENTER** 

#### **PROJECT**

The University of Alabama at Birmingham

## P3 Providing an Optimized and emPowered Pregnancy for You (POPPY)

Examine the impact of a digital health intervention and a community health worker intervention on pregnancy health outcomes.

Compare outcomes of using a digital health intervention to send health reminders to pregnant people and answer questions via text message versus having community health workers provide check-ins and health reminders.



#### PROJECT

Northwestern University

### Dismantling Structural Racism to Promote Equitable Maternal Health Outcomes (DREAM)

Devise a method to measure the impact of structural racism on Black-white inequities in pregnancy and maternal-infant health.

Collaborate with a diverse group of pregnant people, community members, and organizations to gather data on structural racism and calculate the impact of addressing it on Black-white inequities in maternal and infant health.



University of Pennsylvania

### Implementation and Evaluation of a Perinatal CV Risk-Assessment Algorithm to Improve Maternal and Infant Health During Pregnancy, Peri & Postpartum: (IMPACT)

Establish a cardiovascular risk assessment for pregnant and postpartum patients to reduce cardiovascular-related mortality during pregnancy.

Institute a cardiovascular risk assessment that will identify 90% of cardiovascular-related pregnancy deaths before they occur and ensure follow-up testing for at-risk patients in Philadelphia.



#### PROJECT

The Ohio State University College of Medicine

# Better birth outcomes and Experiences Through Technology, Education and Reporting (BETTER)

Develop an intervention to mitigate the social issues that contribute to poor maternal-infant health outcomes.

Collaborate with pregnant people to identify the most pressing social issues they face and develop an intervention to help medical professionals learn about and address these issues to improve maternal and infant health.



#### PROJECT

University of North Carolina School of Medicine

# Building Equitable Linkages with Interprofessional Education Valuing Everyone (BELIEVE)

Transform health services to be more equitable and personal by developing a training program for medical personnel to counter race-based disparities.

Build a training program to address traumas caused by structural healthcare disparities and improve trust in the healthcare system to reduce disparities on a national level.



# Improving Access to Care and Other Health Inequities in Rural America

University of Washington

# Reciprocal Innovations to Improve Cardiovascular Care in Rural America (Rural PRO-CARE)

Testing technology-based strategies to implement evidence-based interventions in rural America.

**COORDINATING CENTER** 

#### **PROJECT**

University of Washington School of Medicine

# GROW-RURAL: A Global to Rural Innovation Network to Adapt Evidence-Based Cardiovascular Interventions to Context

Adapting healthcare interventions used in other countries to rural America while identifying obstacles and opportunities to improving cardiovascular health care.

Exploring geographical barriers to care for rural ethnic groups such as Native Americans and Latinos and adapting interventions used in other countries to bridge these gaps and improve cardiovascular healthcare in the rural United States.



### **PROJECT**

Cincinnati Children's Hospital Medical Center

# Implementation and Scale-up of the American Indian Heart Disease Partnership (IN-STEP)

Bringing heart disease diagnosis closer to home for American Indians by teaching community health workers to use portable ultrasound machines.

Teaching nonexpert healthcare workers in Native American communities to use portable ultrasound machines to conduct heart disease screenings in order to bring heart disease diagnosis closer to these communities.



### **PROJECT**

Duke University School of Medicine

### Developing and Testing Drone-Delivered AEDs for Cardiac Arrests in Rural America

Expedite responses to out-of-hospital cardiac arrest patients by equipping drones to deliver AEDs to cardiac arrest victims in rural areas.

Using drones to deliver AEDs to cardiac arrest victims in rural areas where response time from emergency responders is slowed, with the aim of improving outcomes for sudden cardiac arrest patients.



#### **PROJECT**

Oregon Health and Science University

### Rural Community Peer Partnerships for Improving Methamphetamine-Associated Heart Failure Screening and Engagement

Train rural health peer specialists in the assessment of risk heart failure for those who use methamphetamine to improve treatment of heart failure in rural areas.

Instructing existing rural health peer recovery specialists in heart failure risk assessment to improve heart failure care amongst methamphetamine users in rural Oregon. Those deemed at-risk will be assigned a remote heart expert team or referred for care locally.



#### **PROJECT**

Palo Alto Veterans Institute for Research

Implementation and Evaluation of Pharmacist-Based Management of Chronic Heart Failure for Veterans (PHARM-HF)

Increase care for rural veterans with heart failure by training pharmacists on heart failure care and modifying an existing smart phone education app to deliver heart failure education.

Training pharmacists on heart failure care to expand heart failure care delivery in rural areas, especially to veterans. Modifying an existing education app to educate rural veterans about heart failure.



### **Community-Driven Research Approaches**

#### **PARTNER HUB**

### Advancing Food Justice Through Partnered Community-Driven Research

Their focus is to re-imagine how resources and information flow between communities and institutions. Their goal is to advance food justice in California's San Diego County through three core programs: a community-led granting program that funds community priorities; an academic-led scientific methods program; and a postdoctoral training program. Allowing everyone to eat healthful diets and achieve cardiovascular health through research and collective action work that is community-driven, diverse and inclusive.

ACADEMIC PROJECT
Research Methods Core to
Advance Community-Driven
Research

The Regents of the University of California San Diego

COMMUNITY BASED PROJECT
Community Granting Program
to Advance Food Justice

YMCA of San Diego County



### **COMMUNITY ENGAGEMENT RESOURCE CENTER**

University of Texas Health Science Center at San Antonio

# COmmuNity eNgagEment for building Capacity, Trust, and Ownership of Research (CONNECTOR)

Identify, evaluate and manage community-based solutions for fighting heart disease that match what people think they need and are willing to support to bring about local changes for better health.

#### **PARTNER HUB**

# Amplifying Community Power in the Research to Identify Systems Changes Towards Health Equity

The team will form a community advisory board to create a model for training people on community engagement. They will study the effectiveness of research projects in which individuals of lived experience have a more powerful voice, and specifically how that may improve health inequities. The team will also explore how local policies have impacted chronic disease across counties in South Carolina and the Deep South.

ACADEMIC PROJECT
Understanding and
Building Capacity for More
Effective Community Based
Participatory Research and
Partnerships

**Furman University** 

COMMUNITY BASED PROJECT Understanding Perceptions of Community Power in the Context of Local Government Decision Making

LiveWell Greenville



### PARTNER HUB

### **JUSTResearch**

This team will explore why people who are incarcerated, along with their family members, are likely to have an increased risk of poor heart health. They will work together to design research projects to identify barriers to health. The team will collect data on health risk factors and the best interventions. The team plans to develop protocols and practices for a toolkit that can be used by community-academic partnerships to engage people impacted by mass incarceration in future research.

**FamJUSTICE** 

Yale University

COMMUNITY BASED PROJECT INJUSTICE

**JustLeadershipUSA** 



