

# Holes in the Mitten

## Health Equity In Michigan: A Toolkit for Action Fact Sheet: Healthcare Access

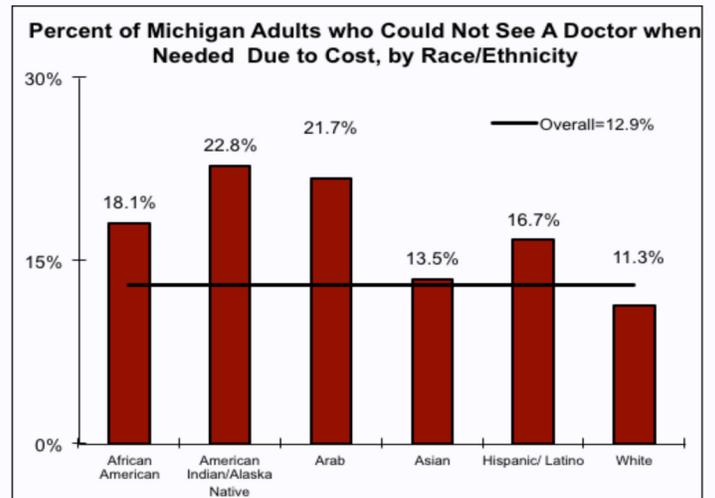
**CULTURE** is the way a group of people (religious, ethnic, or social) do things. It is seen as a way of life. Culture includes people's language, religion, music, clothing, what they eat and the holidays they celebrate.

### WHAT WE KNOW

Inequities in healthcare and less access to healthcare are more likely to happen when there is not cultural understanding between patients and healthcare providers.

### GOOD COMMUNICATION BETWEEN PATIENTS AND PROVIDERS IS CRITICAL TO PROVIDING QUALITY HEALTHCARE.

Efforts have been made to make sure that cultural and language differences are addressed by healthcare providers. The National Standards on Culturally and Linguistically Appropriate Services (CLAS) have been developed by the Office of Minority Health. CLAS provides information to healthcare organizations and others on how to make their practices more accessible to persons of various cultures or who speak a language other than English.



### Holes in the Mitten: Addressing Michigan's Gaps in Health Equity

*Holes in the Mitten* is part of *Health Equity In Michigan: A Toolkit for Action* and aims to improve health equity in Michigan communities. The toolkit includes a video series, discussion guide, fact sheets, and other resources. The toolkit can be obtained through the Michigan Department of Community Health.

## WHAT IS BEING DONE TO IMPROVE CULTURAL COMPETENCE AND HEALTHCARE ACCESS IN MICHIGAN?

Providers are working to improve their employees' understanding and acceptance of cultural and social norms that are different from their own. They are working to incorporate culturally appropriate recommendations into their patient health plans.

Organizations are also providing health system navigators to help bridge cultural, social and educational barriers to healthcare access. Providers are also working to increase the availability of translators and translated materials so that language is less of a barrier.

### Michigan facts by race and ethnicity

Indicator	African American	American Indian/Alaska Native	Arab	Asian	Hispanic/Latino	White	Total Michigan Population
When seeking healthcare, percent whose experience was worse than that for people of other races, %	17.1%	NA	NA	NA	11.1%	3.4%	5.5%
Percent who could not see a doctor due to cost, %	18.1%	22.8%	21.7%	13.5%	16.7%	11.3%	12.9%
Percent with no healthcare coverage, %	20.4%	19.8%	15.6%	7.2%	13.9%	14.2%	15.2%

Sources:

1) American Community Survey, US Census Bureau (2006-08) 3) Michigan BRFSS, MDCH (2006)

2) Michigan BRFSS, MDCH (2007-09)

## WHAT CAN YOU DO?

Advocate for more culturally inclusive programming at all levels of education. Support local institutions that work to provide healthcare access to at risk populations. Advocate for the provision of translators and translated materials for doctor's offices, hospitals, and health insurance plans.

### Michigan Department of Community Health (MDCH)

The Health Disparities Reduction and Minority Health Section (HDRMHS) provides a persistent and continuing focus on eliminating health disparities in Michigan's populations of color. The five populations served by HDRMHS include African Americans, American Indians/Alaska Natives, Arab and Chaldean Americans, Asian Americans and Pacific Islanders, and Hispanics/Latinos.

The major functions of HDRMHS are: 1) To support and initiate programs, strategies, and health policies that address disease prevention, health service delivery, and applied research for populations of color; 2) To collaborate in the development of all MDCH programs and strategies that address prevention, health service delivery, and applied research for populations of color and 3) To facilitate an ongoing integration of culturally appropriate and linguistically appropriate health services into the public health system.

Michigan Department  
of Community Health



Rick Snyder, Governor  
Olga Dazzo, Director