



## Foreword

We are united by missions that protect and improve the lives of individuals, families, and communities. Where Americans live, work, play, and learn directly impacts the health and vitality of our society. Evidence of growing inequalities in access to health care and disparities in health outcomes point to an immediate need for solutions that address the social, economic, environmental, and cultural determinants of health.

For racial and ethnic minorities, poor, and other underserved populations in the United States, the existence of health disparities is undisputed. In an era of increasing fiscal responsibility, an important part of the solution to ending disparities is to work across the public and private sectors using common objectives. Since the factors that affect health are varied and complex, the response must be equally varied and intricate. Understanding current health trends and realizing the social and economic benefits of health equity, the question that confronts us is: What actions can be taken to improve outcomes while concurrently improving the effectiveness and efficiency of our collective efforts and investments?

The vision for the *National Partnership for Action to End Health Disparities* (NPA) was shaped by the voices of individuals who shared their *lived* experiences and expertise through a series of regional conversations and meetings held by the Office of Minority Health (OMH), U.S. Department of Health and Human Services. The NPA brought together diverse organizations and individuals who shaped priority strategies for improving health and health outcomes of African Americans, Hispanics, Asian Americans, Native Hawaiians and Pacific Islanders, and American Indians and Alaska Natives.

This collaborative process involved individuals; community and faith-based organizations; tribal leaders; healthcare providers; health system representatives; academic and research faculty; employers; local, state, tribal, and federal public health officials; representatives from housing, education, transportation, veteran affairs, agriculture, environmental protection, commerce, and defense; and national associations. Through spirited dialogue, the NPA provided a forum for identifying and defining a strategic landscape of actions to advance the elimination of gaps in health care and health status.

The *National Stakeholder Strategy for Achieving Health Equity* and parallel Blueprints for Action are products of the NPA. Twenty common strategies were defined and organized around five core areas for improvement: awareness, leadership, health system and life experience, cultural and linguistic competency, and data, research, and evaluation. The *National Stakeholder Strategy*, which was posted on-line for public review, provides a roadmap—a starting point—of the collaborative strategies and collective actions. The information provided should serve as a menu from which specific actions at the local, state, tribal, regional, and national levels can be advanced.

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We extend our appreciation to the individuals and organizations that contributed their time and energy; the Federal Interagency Health Equity Team for their thoughtful leadership; the Implementation and Evaluation Teams for their guidance on accountability, sustainability, and methods for evaluating progress; and to the National Visionary Panel (NVP), and National Health Disparities Plan Consensus Meeting participants for their expertise and feedback.

It is time to refocus, reinforce, and repeat the message that health disparities exist, that achieving health equity benefits all Americans, and that cooperative, leveraged, and evidence-based actions are necessary to reduce inequalities in health and healthcare outcomes. It is time for action—together we can, together we will.