EQUITY AND INCLUSION DASHBOARD

Leveraging diversity, equity and inclusion to drive our mission.

Q3 FY20-21 June 2021





INTERNAL IMPACT

How we engage diverse staff and volunteers to deliver the mission through the lens of "equity first"

Overall Staff Diversity Goals*

Newly Filled Positions (posted jobs only)

Diverse candidates will comprise 33% of newly-filled positions (internal or external, posted jobs only) this fiscal year. Diverse candidates are defined by race/ethnicity, veterans, individuals with disabilities and LGBTQ+. Through Q3 our diverse hires and job changes were 42.7%.

АНА	Total Hires	Total Job Changes	% Diverse Hires & Job Changes
Eastern States	29	14	30.23%
Midwest	11	12	30.43%
National Center	78	58	50.74%
South East	25	13	34.21%
South West	28	15	39.53%
Western States	18	8	50.00%
Association Wide	189	120	42.72%





Protected Veteran Status

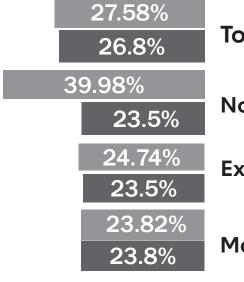
The percentage of our workforce who qualify in a protected veteran status is 1.1%, the hiring benchmark is 5.6%.



Disability Status

The percentage of our workforce who qualify as an individual with a disability is **5.3%**, our affirmative action goal is **7%.**

Staff Diversity | Race/Ethnicity

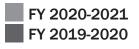


Total diverse workforce

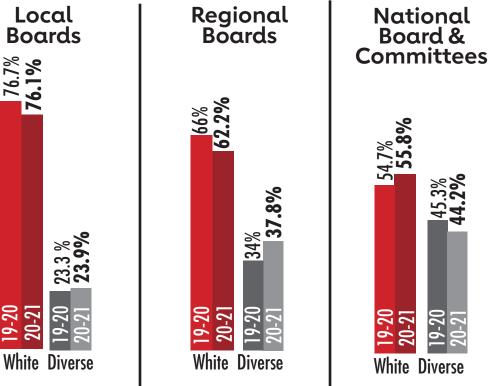
Non-exempt staff

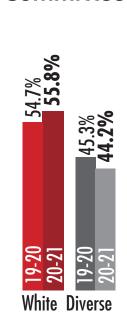
Exempt staff

Managers and officials



Volunteer Diversity - Boards and Committees





National

Board &

Employee Engagement

Employee Resource Groups

399→489 members

14.3%-▶18%

of staff participated in at least one ERG

M.O.R.E **Mentoring Data**

2.6%

of staff participated in June 2020 and

5.6% in June 2021

Office of Health Equity Office Hours

- Launched in November 2020
- Provides a platform for AHA staff to continue to learn and evolve the understanding of health equity, addressing structural racism and create an inclusive environment for all staff.
- Over 31 sessions with average of 150-250 attendees

Structural Racism & Health Equity Trainings

Learning and Development

Heart U Channel

Heart U Channel: videos, books, book summaries, courses, etc.

Timeframe	In Progress	Completed
January 1 - June 7, 2021	275	174

Live Training

87% of staff attended Health Equity training

88% of staff attended Structural Racism training



^{*}All gender, race/ethnicity, veteran, disability and LGBTQ+ data is self-reported.



How we drive equitable health impact with communities and in markets across the globe

Medicaid Expansion



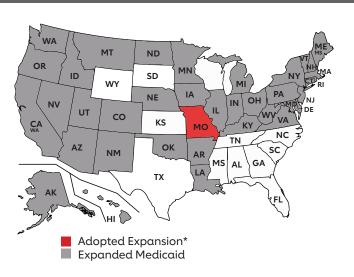
Expansion efforts continue in **12** remaining non-expansion states.



OK and MO pursuing expansion through ballots



Coronavirus continues to disrupt state budgets and threaten access to care.



EmPOWERED to Serve



The **EmPOWERED Women's Roundtable** series featured critical topics around health equity and health justice for women of color. The **4 part** series brought together **22 influential volunteers** who shared their time, voice and influence for our mission.



Collective key performance indicators' include:

- Over 2,500 total views
- 3,770 registrations
- 800+ new emails
- Media outreach- 365,554,712 impressions and 78 outlets

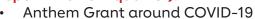


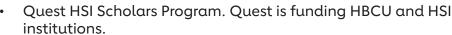
EmPOWERED Black History Month Campaign:

- VMT (virtual media tour) 945 media outlets in top 25 AA markets
- SoMe engagement- 2,600 views of storytelling videos
- 1,874+ new email leads
- 3 events
 - o Fireside Chat o ERG Collaboration o Roundtable



New pipelines of funding and opportunity for Health Equity (will have report info next quarter):







Kresge-A National Clarion Call:

- Exceeded goals for church feasibility studies and will be offering 12 studies total vs. the initial 2-4 planned
- 2 webinars highlighting housing and food systems/hypertension and faith
 Total views for both as of June 10- 410



EmPOWERED to Serve Business Accelerators have grown to multiple regional events:

- Minnesota, Eastern States, Oregon and SW Washington
- Nationally

Social Impact Fund/Bernard J. Tyson Fund

- Launched investment windows in Atlanta, Chicago, Philadelphia, Reading, PA and Washington, DC
- Increased our portfolio by 236% from 19 to 64 investees
- Over the course of FY 19-20, the Funds raised **\$2.5M**. Through June 1, 2021, the Funds raised **\$16.2M** with an additional **\$1M** projected by FYE 20-21.

Communications & Social Media

Traditional Media

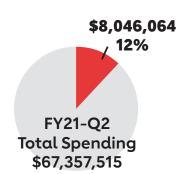
- 2.95+ billion media impressions
- 3,500+ news hits:

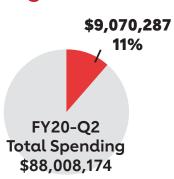
Associated Press, Chronicle, Fortune, Market Insider-Business Insider, Medscape, Science Daily, US News and World Report, Yahoo Finance, and Yahoo News

Topics Covered:

- Structural Racism Presidential Advisory
- AHA's programs to address the need for more Black healthcare professionals
- AHA and HHS national hypertension control initiative
- Social Impact Fund launch with KLA and announcement of the Chicago fund recipients
- Disproportionately high COVID-19 hospitalization rates in Black and Hispanic Americans

Supplier Diversity*







Quality Improvement*

We continue our focus on implementing quality improvement programs in hospitals that serve diverse and historically underserved populations. This year we are focusing on measuring and growing our impact in 231 designated care variation counties throughout the country.

Our Yearly Success



1,187 care variation hospitals implementing **2,060** of our quality programs, with **65%** of care variation hospitals implementing one or more GWTG modules.



We continue to engage participation in the COVID registry with 171 sites enrolled and an increase from 34,000 registry patient records in December 2020 to over 44,000 patient records as of April 2021, of which 47% of population captured is diverse.

Voices for Healthy Kids

7 new Strategic Advisory

- Committee SAC members

 All of whom are diverse and three represent former or current grantees with community-based organizations.
- 5,744 clicks (Voices website) on racial equity guide since release in December 2020.
- Grantmaking--Developed new process for tracking health equity technical assistance requests for grantees.

National Hypertension Control Initiative (NHCI)

In December 2020, the American Heart Association was awarded a total of \$32 million dollars through a series of cooperative agreements with the US Department of Health & Human Services (HHS) to address hypertension in racial and ethnic minority populations over a three-year period. The newly formed collaboration, named the National Hypertension Control Initiative (NHCI), brings together the American Heart Association, the HHS Office of Minority Health (OMH) and the Health Resources and Services Administration (HRSA) Bureau of Primary Health Care in an evidence-based, community-driven effort to improve blood pressure control among the most vulnerable populations in our country.

Community Impact

- Thus far in FY21, we have achieved 113 local policy, systems, or environmental changes in communities impacting over 7 million under-resourced and diverse individuals.
- Thus far in FY21, we have achieved 332 clinical system changes impacting over 2.7 million under-resourced individuals.
- We held 10 Tobacco Free Schools Community workshops engaging 112 school districts and community partners on decreasing tobacco/vaping among youth.

Issue-Based Fundraising & Community

- \$14.5M has been raised in Q3 and Q4 to date with \$6.1M coming from Live Fierce.
- A few market wins:
 - Pittsburgh closed TWO Live Fierce. Stand for All. Platform sponsors at \$75,000 each!
 - Cincinnati Christ Hospital signed for \$125K for a GRFW platform sponsorship an upgrade of \$25k.
 - Milwaukee By leveraging the Take Action campaign, "Doctor It's Been Too Long," the team was able to close a \$325k Live Fierce sponsorship.



*Supplier Diversity

- FY20-Q2 Tier 1 & Tier 2 total diverse spend was \$9,070,287 compared to FY21-Q2 Tier 1 & Tier 2 total diverse spend of \$8,046,06
 - o Less overall spend meant less spend with diverse suppliers too... Spend was down 12% period over period
- Our percentage of diverse spend compared to addressable spend was lower in large part due to the cancellation of in-person events.
 - o Spend with Women owned businesses was down 49%; Ex: our event bus service (Kushner) was down >\$250K
- The largest reduction in Tier II spend came in the contingent labor category, which was lower by almost 30%.
 Awards to diverse companies in the first half = over \$2M

Medicaid Expansion

- Oklahoma's Medicaid expansion will officially begin coverage on July 1, so they can move into the grey color on the map on that date it's a for certain done deal though, enrollment began today, and its fully funded in the state's budget that just passed.
- Missouri was supposed to be fully implemented on that same July 1 date as well, but their legislature has refused to appropriate funding, and now it has ended up in the courts with a lawsuit filed.

 Medicaid expansion has still been adopted and will happen there at some point in the future, but not until the litigation is resolved. In the meantime, they'll have to stay red as an "Adopted Expansion" state.
 - Efforts to expand Medicaid continue in remaining 12 non-expansion states
 - Coverage in Oklahoma officially begins July 1, 2021
 - The American Rescue Plan Act provides additional incentives for states to expand Medicaid, although no state has acted on it yet.

Social Impact Fund/Bernard J Tyson

- The Fund's received a \$5 million donation from the Walmart Foundation, marking our largest gift to date.
- In relation to the Walmart gift, we launched our largest investment window to date, garnering \$48.8 million worth of funding requests from 154 from social entrepreneurs.
- One of the Bernard J. Tyson Fund investees was feature in Fortune Magazine's World's 50 Great Leaders for 2021.
- Through a first of its kind collaboration, New York Life Investments launched the HART ETF that focuses on sustainable investments into publicly traded corporations that are focused on positively impacting heart health. A portion of the funds raised for this ETF will go to the AHA to support the Social Impact Fund.

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The NHCI will work to address hypertension rates in 350 HRSA funded community health centers and community-based organization. The program's goal is to increase blood pressure control by working in tandem with community members, businesses and organizations and community health centers across the country to remove barriers to health equity and improve health for under-resourced communities.

Throughout the remainder of 2021, AHA will continue to provide training and technical assistance to help the health centers achieve a 60-80% blood pressure control rate among their patients. The initiative is also aiming to reach and enroll community-based businesses and organizations to become touchpoints with blood pressure resources, social determinants of health resources and tools in their local communities, thus helping to eliminate some of the barriers to access for many people with a focus on under-resourced communities.

For more information about the NHCI, please visit our website: www.heart.org/hbpcontrol.

This initiative is supported by a cooperative agreement with the Office of Minority Health (OMH) of the U.S. Department of Health and Human Services (HHS), as part of a financial assistance award totaling \$12.2 million in partnership with the Health Resources and Services Administration (HRSA). The contents do not necessarily represent the official views of, nor an endorsement by OMH/OASH/HHS or the U.S. Government. For more information, please visit https://www.minorityhealth.hhs.gov/

Community Impact

- Thus far in FY21, we have achieved 113 local policy, systems, or environmental changes in communities impacting over 7 million under-resourced and diverse individuals.
- Examples include:
 - 16 Community organizations have established connections with health centers to support blood pressure self-monitoring.
 - 24 Community organizations have adopted food security screening and referral systems in order to ensure people are getting the nutrition they need.
 - 13 Communities have established farmers markets, mobile markets, pop-up markets, and other sustainable access to fruits and vegetables in areas identified as food deserts.
- Thus far in FY21, we have achieved 332 Clinical system changes impacting over 2.7 million under-resourced individuals.
- Examples include:
 - 165 health centers have adopted at least one evidence-based BP practice improvement.
 - 116 Clinics have established blood pressure self-monitoring programs in partnership with community organizations
 - 28 Health centers have initiated food security screening and referral to nutrition assistance.
- Number of diverse patients covered by ambulatory initiatives to date:

Target BP
Check.Change.Control
Target Type 2 Diabetes

• 10 Tobacco Free Schools Community workshops engaging 112 school districts and community partners on decreasing tobacco/vaping among youth.

Quality Improvement

We prioritize engagement in Get With The Guidelines contracts from hospitals in these care variation counties by "weighting" them within our MPOs. More specifically, there are 3 groups of high mortality counties that are included in our definition of "care variation" counties including:

Any county that had 500 or more cardiovascular deaths and an age adjusted mortality rate greater than 125. This totals 156 counties.

Counties that had over 1,000 CVD deaths and a raw mortality rate of greater than 125. This totals 32 counties.

Counties that had an age-adjusted rate greater than 300. This totals 43 counties.

This totals 231 counites that are high mortality.

Science

Professional Membership:

Champions from all 16 scientific councils continue to identify paths to recruit, retain and support a diverse cardiovascular and stroke workforce.

Science and Medicine

2020 AHA/ACC Professionalism and Ethics Report Published - In response to unprecedented public challenges and emerging needs, this report updates guidance for a wide range of specific issues including conflicts-of-interest; professional diversity, equity, and inclusion; clinician well-being; patient autonomy; and ensuring social justice in modern health care delivery systems.

Lifelong Learning:

High profile sessions at Scientific Sessions and ISC on structural racism were thought provoking and prominently featured topics that impact researchers and clinicians ("Structural Racism as a Public Health Crisis" and "Racing to Greater Life Expectancy by 2030: Is Racism a Tangible Target to Achieve Cerebrovascular Health Equity?").

Diversity in faculty for scientific conferences continues to be emphasized through guidelines for program planning which include gender equity and representation of underrepresented racial and ethnic groups.

Publishing:

American Heart Association's flagship scientific journal Circulation published an inaugural special issue focused on disparities in cardiovascular medicine. The AHA journals adopted new guiding principles and detailed standards for publishing disparities research.

Research:

Awarded the first grants under a new mechanism to provide supplemental funding to AHA awardees specifically for pre- and postdoctoral fellows from racial and ethnic groups under-represented in science. Top 30% for under-represented pre- and postdoctoral fellow applicants funded compared to 20% for non UREG applicants only.

Equity First Highlight:

As part of the 2024 goal to drive equitable health and wellbeing for all, a digital learning platform has been created for clinicians, health professionals, and scientists on structural racism and health equity. The learning platform will include learning modules, videos, podcasts, and other digital resources.