Disparities Impact Statement (DIS 2.0)

Larke Huang, Tenly Biggs, Martha Kent
Office of Behavioral Health Equity
Office of the Assistant Secretary
The Disparity Impact Statement (DIS) is a data-driven, quality improvement approach to advance equity using grant programs. The DIS helps grantees identify underserved populations at risk of experiencing behavioral health disparities. The aim is to increase inclusion of underserved populations in SAMHSA-funded grants, achieve behavioral health equity for disparity-vulnerable populations, and help systems better meet the needs of these population.
The Disparity Impact Strategy


Secretarial Priority #1

1. Assess and heighten the impact of all HHS policies, programs, processes, and resource decisions to reduce health disparities. HHS leadership will assure that:

   (c) Program grantees, as applicable, will be required to submit health disparity impact statements as part of their grant applications.

Such statements can inform future HHS investments and policy goals, and in some instances, could be used to score grant applications if underlying program authority permits.

TAKEAWAY: SAMHSA’s Office of Behavioral Health Equity was the first to develop an actual disparity impact statement requirement for their grant applications.
The DIS Issue: Grant Enrollment by Race/Ethnicity
What is the purpose of a DIS?

• Identify, contextualize, and address health disparities
• Develop and implement a disparity reduction quality improvement plan to address close the identified gap(s)
• Achieve targeted behavioral health equity for disparate populations and improve systems addressing the needs of these populations

**NOTE:** Grant recipients are encouraged to view their DIS as a living document!
Terms and Conditions in the Notice of Award (NoA)
Due within 60 days of the start of the grant project
Must be submitted as .pdf in eRA Commons

Resource:
www.samhsa.gov
Grants-> Grants Management  -> Disparity Impact Statement
Special Conditions of Awards for Behavioral Health Disparity Impact Statement (DIS) | SAMHSA
DIS Sections

Section 1:
Identifying behavioral health disparities

Section 2:
Addressing disparities using the funding opportunity

Section 3:
Developing a disparity reduction quality improvement plan
Section 1: Identifying Disparities

- **Identifying the problem** grantee is seeking to address using this grant program (funding opportunity)
- **Use data to support** evidence that this problem needs to be addressed
- **Identifying the focus population** experiencing disparate access, use, and outcomes
- **Disparity Table** *(identify the gap or difference at individual/client, organizational, or systemic level)*
Step 1: Use data to identify the disparity/problem/gap you are seeking to address.

**Decide: Who?**

- Who experiences disparities in access, use or health outcomes in your area of focus?
- What groups of people within the populations your program aims to serve/reach/train might have a harder time accessing or using the services or trainings offered by the grant?
- What data leads you to believe this disparity exists?
- Consider demographic characteristics that might contribute to the disparity (e.g. race, ethnicity, gender, sexual orientation)

**Use Caution!**

The disparity population *is not everyone* your program serves/trains.

**Complete DIS Section 1**

- Describe the scope of the problem (Worksheet box 1a) and the disparity-vulnerable(Worksheet box 1b).
- Create a table that breaks out the subpopulations you aim to serve/reach/train based on the demographic characteristics that are relevant to the identified disparity.
### Potential Data Sources

<table>
<thead>
<tr>
<th>Source</th>
<th>Source</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>The National Survey on Drug Use and Health (NSDUH)</td>
<td>The U.S. Census Bureau and the American Community Survey (ACS)</td>
<td>Other data from the Center for Behavioral Health Statistics and Quality</td>
</tr>
<tr>
<td>Behavioral health agencies</td>
<td>Public health agencies</td>
<td>Other state agencies</td>
</tr>
<tr>
<td>Colleges or Universities</td>
<td>Community needs assessments</td>
<td>County health rankings</td>
</tr>
<tr>
<td>Law enforcement or judicial data</td>
<td>Hospital or emergency medical services</td>
<td>Program Evaluator</td>
</tr>
</tbody>
</table>
Section 2: Addressing Disparities

Grantee is asked to identify one or more of the five SDOH domains and fifteen National CLAS Standards for Behavioral Health that can be improved with this funding opportunity (grant).

- Social Determinants of Health
- National CLAS Standards for Behavioral Health
Step 2: Decide how you will address the disparity/problem/gap so that everyone you aim to serve/reach/train is able to access and use services/trainings achieve better outcomes.

Decide: How?

- How can the disparity be addressed?
- What social determinants of health can be addressed to improved in the environment in which the disparity-vulnerable was born, lives, learns, works, plays, and worships that could help to reduce the disparity?
- Can services/trainings be improved so that they are more culturally and linguistically appropriate for the disparity-vulnerable to help address the problem? Which CLAS Standard does this reflect?

Use Caution!

Don’t forget to explain how your proposed activities will reduce disparities for the population of focus.

Complete DIS Section 2

✓ Explain how you will address the identified SDOH domain (Worksheet box 2a) and CLAS Standard (Worksheet box 2b).
CLAS Standards

- **CLAS standards** provide a structure that helps grantees ensure their planned activities are aligned to culturally and linguistically appropriate standards.

<table>
<thead>
<tr>
<th>CLAS domain</th>
<th>Example standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governance, leadership, and workforce</td>
<td><em>Standard 4</em>: Educate and train governance, leadership, and workforce in culturally and linguistically appropriate policies and practices on an ongoing basis</td>
</tr>
<tr>
<td>Communication and language assistance</td>
<td><em>Standard 5</em>: Offer language assistance to individuals who have limited English proficiency and/or other communication needs at no cost to them to facilitate timely access to all health services</td>
</tr>
<tr>
<td>Engagement, continuous improvement, and accountability</td>
<td><em>Standard 13</em>: Partner with a community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness</td>
</tr>
</tbody>
</table>

Adapted From: [The Office of Minority Health’s Behavioral Health Implementation Guide](#)
Social Determinants of Health (SDOH)

Identifying SDOH in the DIS helps grantees ensure their planned activities are aligned to address root causes of disparities that they hope to improve.

<table>
<thead>
<tr>
<th>SDOH domain</th>
<th>SDOH goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Economic stability</td>
<td>Help people earn steady incomes that allow them to meet their health needs</td>
</tr>
<tr>
<td>Education access and quality</td>
<td>Increase educational opportunities and help children and adolescents do well in school</td>
</tr>
<tr>
<td>Health care access and quality</td>
<td>Increase access to comprehensive, high-quality health care services</td>
</tr>
<tr>
<td>Neighborhood and built environment</td>
<td>Create neighborhoods and environments that promote health and safety</td>
</tr>
<tr>
<td>Social and community context</td>
<td>Increase social and community support</td>
</tr>
</tbody>
</table>

Adapted From: [Healthy People 2030](https://www.healthypeople.gov/2030)
Section 3: Quality Improvement Plan

- Grantee is asked to develop a quality improvement plan that will allow for reduction of disparities for the duration of the grant project period and beyond.
- Describe implementation using SMART goals/objectives.
- Describe intended outcomes and impact expected with disparate population after implementation of grant activities.
- Describe client, peer, and stakeholder involvement with addressing disparities through this funding opportunity (grant).
- Describe the projected timeline needed to implement the grant activities.
- Describe how you will measure the process, progress, and outcomes of improving disparities with the funding opportunity (grant).
- Describe how the organization will sustain improvements made to continue improving disparities.
Step 3: Provide details on the activities you will implement to reduce disparities for the disparity-vulnerable population.

Decide: What?
- What activities will you implement?
- Who will be involved in the activities?
- What will be your timeline for implementing activities?
- What will result from your activities?
- How will you know if you are making progress towards outcomes?
- What data will you use to measure this?
- How will you keep the work going?
- Who will be involved?
- What processes will need to be in place?

Use Caution!
Make sure activities are SMART: Specific, Measurable, Achievable, Relevant, and Timebound.

Complete DIS Section 3
- List the activities (using SMART) (Worksheet box 3a).
- Describe your intended outcomes (Worksheet box 3b).
- Describe how you will engage client/peer/partners (Worksheet box 3c).
- Provide a timeline for the activities (Worksheet box 3d).
- Describe how you will evaluate your progress (Worksheet box 3e).
- Describe a plan for sustaining the activities (Worksheet box 3f).
Resources

• **DIS Training**
  – Disparity Impact Statement 101 training video: https://www.youtube.com/watch?v=GC65r_YbQdM

• **CLAS Standards**
  – Training on “Improving Cultural Competency for Behavioral Health Professionals”: https://thinkculturalhealth.hhs.gov/education/behavioral-health

• **Social Determinants of Health**
  – CDC: https://health.gov/healthypeople/priority-areas/social-determinants-health
SAMHSA’s mission is to lead public health and service delivery efforts that promote mental health, prevent substance misuse, and provide treatments and supports to foster recovery while ensuring equitable access and better outcomes.

www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) ● 1-800-487-4889 (TDD)