

Office of Minority Health Impact Report 2024-2025

Dedication

This report is dedicated to the underserved and overlooked populations across Tennessee, those whose health outcomes are shaped by systemic barriers, geographic isolation, economic hardship, and historical inequities. In Tennessee, gaps in healthcare access disproportionately affect rural communities, communities of color, and those living with chronic conditions such as diabetes, hypertension, and mental illness (Tennessee Department of Health, Division of Health Disparities Elimination, 2024). Their strength, perseverance, and dignity drive our commitment to health excellence and inspire our mission to empower communities to support optimal health for all and to eliminate disparities for racial, ethnic, and underserved populations.

We also honor the healthcare workers—nurses, physicians, community health workers, and public health professionals—who serve these communities with dedication and compassion. From Memphis to Mountain City, they are the backbone of Tennessee’s public health infrastructure. Their efforts are evident in the programs discussed in this report, which bring care to the most remote corners of our state. This report is a testament to their work and reflects the ongoing efforts of the Tennessee Department of Health, as well as the numerous local organizations, striving to eliminate disparities and build a more equitable healthcare system.

To those who continue to strive for health excellence in Tennessee, this report is for you.

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Introduction

The **Division of Health Disparities Elimination (DHDE)** serves as the Tennessee Department of Health’s coordinating body for programs that eliminate barriers to care and advance health excellence, which is the achievement of the highest possible level of health and well-being for all people. DHDE unites three offices—the Office of Minority Health, the State Office of Rural Health, and the Office of Faith-Based and Community Engagement—to align outreach, training, and policy initiatives through a shared health excellence lens. The health excellence lens is a tool to identify and remove barriers, enhance engagement, and apply best practices in planning, developing, implementing, and evaluating policies, services, and programs to support optimal health outcomes for all. The division’s work spans statewide health equity training, expansion of healthcare access in rural communities, and faith- and community-based engagement to address the social and environmental drivers of health.

Within DHDE, the **Office of Minority Health (OMH)** leads Tennessee’s efforts to reduce health disparities among racially, ethnically, and culturally diverse populations. OMH develops and implements public health policies and programs that promote equitable access to care and health outcomes across the lifespan. Through partnerships with state divisions, community organizations, and federal agencies, OMH advances culturally responsive programming and provides workforce development opportunities focused on health equity, mental health awareness, and community empowerment. Its initiatives reflect Tennessee’s vision of “Healthy People, Healthy Communities, Healthy Tennessee,” where every person has the opportunity to achieve their highest level of health.

Together, DHDE and OMH represent the Tennessee Department of Health’s commitment to transforming data into action. This report celebrates the progress made in narrowing health disparities, highlights innovative community-driven approaches, and outlines the path forward—one grounded in collaboration, equity, and sustainable impact for all Tennesseans.

Executive Summary

Guided by the 2024 Health Disparities Report, Health Disparities in Tennessee, 2024, from the Division of Health Disparities Elimination (DHDE), this report documents Tennessee's progress toward health equity through collaborative strategies, workforce development, and targeted interventions. The report underscores The Office of Minority Health's (OMH) role in translating DHDE's statewide goals into tangible outcomes across key program areas: the Health Excellence Advisory Team (HEAT), the Pathways, Connections, and Impact (PCI) Team, Minority Mental Health Program, Community Health Workers Initiative (CHW), COVID-19 Health Disparities Initiative, and the CDC-funded Racial and Ethnic Approaches to Community Health (REACH) Program.

Priority Work Areas

The Office of Minority Health's Initiatives are a testament to DHDE's Priority Work Areas as outlined in the 2024 Health Disparities Report. Specifically, OMH's programs are aligned with:

- Workforce development
- Community Engagement
- Health Equity Training
- Healthcare Structure Support
- Disparities and Chronic Disease Reduction

Impacting Health Excellence in Tennessee

In FY25, OMH staff trained over **330 individuals** in topics related to health equity, including **Mental Health First Aid** and foundational sessions conducted by the **Pathways, Connections, and Impact** team.

The **Health Excellence Advisory Team** has led the charge in developing the **Health Excellence Roadmap**, with the goal of transforming the way health equity is integrated into TDH's service delivery.

Grant Funded Programming

The Office of Minority Health directs multiple federally funded grant programs. Through the programs highlighted in this report, the office has stewarded over forty-five million dollars to subcontractors across the state over the last four years. These programs support activities and strategies aligned with the recommendations of the 2024 Health Disparities Report, Health Disparities in Tennessee, 2024. In the spring of 2025, federal funding cuts resulted in the termination of two of OMH's largest grant-funded programs: the Community Health Workers (CHW) Initiative and the COVID-19 Health Disparities Initiative. This report aims to capture the impact of those programs beyond FY25, in addition to the annual impact update for other programmatic areas.

Community Health Workers Initiative

\$6 million

During the four-year grant period, the Community Health Workers Initiative engaged **over 6,600 individuals**, including over **1,500 referrals** for wraparound services and over **550 vaccinations provided**. The Initiative was terminated in the spring of 2025 due to the discontinuation of federal funds.

COVID-19 Health Disparities Initiative

\$38.8 million

During the four-year grant period, the COVID-19 Health Disparities Initiative funded **276 total activities** through 20 partners and 60 subcontractors, reaching **74 of the 95 Tennessee counties**. The initiative was initially funded with \$38,830,892 through the CDC's OT21-2103 Grant. The initiative was terminated in the spring of 2025 due to the discontinuation of federal funds.

Racial & Ethnic Approaches to Community Health

\$680k in FY25

With an annual budget of \$680,038 in FY25, REACH funded **four detailed community design planning projects** across TN. Those projects are bringing physical activity designs to Davidson, Hamilton, Knox, and Shelby counties. REACH is also working on strategies to address **nutrition access** in Tennessee and implementing a **Family Healthy Weight Program** in collaboration with other state partners.

Overview

The Tennessee Department of Health's Division of Health Disparities Elimination (DHDE) is committed to improving health outcomes for all Tennesseans by addressing the root causes of health inequities. The Office of Minority Health Report builds upon the Health Disparities in Tennessee, 2024 report and is structured to demonstrate how OMH programs have acted upon the recommendations and priority work areas identified therein. While the 2024 report provided a comprehensive analysis of health disparities and social drivers of health across Tennessee, this report focuses on implementation—highlighting the progress, partnerships, and measurable impacts achieved since its publication.

Each section of this report features a distinct OMH initiative, outlining its purpose, accomplishments, and alignment with statewide health disparity priorities. Programs are showcased for their role in advancing workforce development, mental health support, community engagement, and the prevention of chronic diseases.

Each initiative section includes a "Meeting the Need" summary, directly connecting program outcomes to the specific recommendations outlined in the Health Disparities Report. By organizing the report in this way, the Office of Minority Health underscores its role as both a convener and a catalyst—translating data into equity-focused action. Together, the programs and stories presented here reflect Tennessee's continued dedication to reducing barriers to care, strengthening local partnerships, and fostering a healthier, more equitable future for all residents.

Health Excellence Advisory Team

The Health Excellence Advisory Team (HEAT) is a collective of departmental personnel, led by DHDE, with representation from each division of the Tennessee Department of Health. In 2023, the Department participated in the Robert Wood Johnson Foundation's Strategies to Restore Equity and Transform Community Health (STRETCH) Initiative—a collaborative effort among ASTHO, the CDC Foundation, and the Michigan Public Health Institute. This national initiative supports our agency in embedding optimal health into its priorities, programs, policies, and practices, creating sustainable changes necessary to achieve healthy and resilient communities. HEAT helps cultivate guidelines that encourage the department to apply a health excellence lens to its programs and initiatives by utilizing the STRETCH framework and the Health Excellence Roadmap.

The Health Excellence Roadmap provides a statewide framework that equips public health professionals with clear direction, actionable tools, and shared accountability to achieve measurable health outcomes.

The Health Excellence Advisory Team convened monthly from December 2020 until Spring 2024 to collaborate on health excellence initiatives across the Department of Health and develop the implementation of the STRETCH framework. Since the last convening in 2024, the HEAT Core Team, led by staff members from the Office of Minority Health, has prioritized applying the STRETCH framework to the Health Excellence Roadmap.

Meeting the Need

The Health Excellence Advisory Team is effectively addressing the following Priority Work Areas from the *2024 Health Disparities Report*:

- **Workforce Development**
- **Health Equity Training**

DHDE has continued to expand its work in these priority areas by providing training to offices and divisions across TDH in addition to external audiences.

Strengths of HEAT

The Core Team conducted a survey in December 2024 about the previous iteration of HEAT and the team's future directions. Seventeen survey participants across the Tennessee Department of Health identified the top strengths of the Health Excellence Advisory Team. The survey also indicated that a decisive majority (80%) of participants want to participate in HEAT's future convenings. HEAT has helped

inform the new direction DHDE will be taking to engage TDH staff in health excellence efforts through the implementation of the Health Excellence Roadmap. From an open-ended survey question about the strengths of the HEAT Team, free responses from participants included the following highlights:

- Having TDH staff and **leadership buy-in** for system change
- Being able to **connect with people** from different areas and specialties
- **Breaking down silos** that exist in public health
- **Interagency representation** from most offices and divisions of TDH

Respondents were also given the option to select from a list of strengths. The results show collaboration and connection as the top strengths of HEAT

- 30% connection (6)
- 25% collaboration (5)
- 15% system change (3)
- 15% diversity (3)
- 10% expertise (2)
- 5% universal outreach (1)

Pathways, Connections, and Impact

The Pathways, Connections, and Impact (PCI) Team provides training, facilitation, and coaching that equips participants to confidently engage in meaningful conversations about public health. Through these experiences, individuals strengthen their understanding and ability to lead in advancing health excellence.

TDH offices and divisions partner with the PCI Team to extend and apply the foundational Health Excellence modules developed by the training team. In addition, the PCI Team supports community-led initiatives, place-based solutions, and workforce development by offering tailored training, implementation guidance, and capacity-building strategies that drive sustainable impact.

Over the past year, the PCI team has advanced workforce development across TDH, contributed to the Nutrition Security Collaborative, and supported DHDE-sponsored events statewide. They also partnered closely with the Health Excellence Advisory Team to shape and update the Health Excellence Road Map

Meeting the Need

The Pathways, Connections, & Impact Team is effectively addressing the following Priority Work Areas from the *2024 Health Disparities Report*:

- **Workforce Development**
- **Health Equity Training**

PCI partnered with the following to strengthen Tennessee's public health workforce and provide training centered around health equity:

- TDH Offices and State Agencies
- Health Councils
- Community Organizations
- Conference Participants

The PCI Team's Impact

- 16 workshops facilitated
- 8 facilitated coaching sessions
- 313 individuals engaged
- 4.4 average effectiveness rating of workshops (out of 5)

Workforce Development

Throughout FY25, the PCI Team strengthened Tennessee's public health workforce by facilitating workshops at all-staff in-services, conferences, and events across Tennessee. To better align with the evolving needs, the team launched the Health Excellence Series, a set of foundational sessions designed to build knowledge, skills, and confidence among Tennessee's public health professionals in advancing health equity.

While the Health Excellence Series provides a foundation, the PCI team also continues to design specialized workshops and coaching experiences tailored to partner goals. This dual approach ensures efficient workforce and community engagement that creates lasting impact.

Foundational Sessions

- Health Excellence Starts with Us: Culture, Connection, and Care
- Mindset Shifts That Move Us: Reimagining Public Health for Lasting Impact
- Achieving Health Excellence 101: Building a Shared Foundation
- Five Domains to Health Excellence- The Stretch Framework
- SMARTIE Goals - Turning Purpose into Progress
- Orientation to The Health Excellence Roadmap- Foundational Learning

Stories of Success: Session Participant Testimonials

- "The super power activity was great. I will listen more intentionally when interacting with our clients."
- "This reminded me to be more considerate of the challenges clients maybe dealing with before coming to the health department."
- "Today's session reminded me that social drivers impact us and our clients."

Minority Mental Health Training Initiative

The Minority Mental Health Training Initiative is primarily responsible for providing Mental Health First Aid (MHFA) Training. This training program is conducted through the National Council for Mental Wellbeing. Mental Health First Aid is an early intervention public education program that teaches adults how to recognize the signs and symptoms that suggest a potential mental health challenge, how to listen nonjudgmentally and give reassurance to a person who may be experiencing a mental health challenge, and how to refer a person to appropriate professional support and services (National Council for Mental Wellbeing, n.d.).

Mental Health First Aid

In FY25, OMH's part-time MHFA trainer facilitated MHFA training to **22 doulas** through a collaboration with the Tennessee Doula Association.

Mental Health conditions are the most common complications during pregnancy and up to a year after childbirth. Early recognition of symptoms is crucial to providing timely support and preventing adverse pregnancy outcomes. Through this collaboration, OMH was able to provide the doulas with the knowledge and skills to recognize signs of mental health challenges, offer initial support, and connect individuals with appropriate professional help as needed.

Meeting the Need

Minority Mental Health is effectively addressing the following recommendations from the *2024 Health Disparities Report*:

Mental Health and Trauma:

- Develop mental health training to support violence reduction strategies, including short-term de-escalation techniques and mid-term peer counseling programs.
- Raise awareness of suicide risk factors and provide community-based suicide prevention gatekeeper training opportunities.

Racial & Ethnic Approaches to Community Health

Racial and Ethnic Approaches to Community Health (REACH) is a grant-funded program administered by the Centers for Disease Control and Prevention (CDC) which aims to improve health, prevent chronic disease, and reduce health disparities among racial and ethnic populations with the highest risk or burden of chronic disease (Centers for Disease Control and Prevention, 2024). In December 2023, the Tennessee Department of Health was awarded the five-year REACH Grant for the first time. In Tennessee, the focus areas include high-burden communities in Shelby, Davidson, Hamilton, and Knox Counties. The grant will support three REACH Strategies in Tennessee:

1. Community Design for Physical Activity
2. Nutrition
3. Family Healthy Weight Programs

Meeting the Need

REACH is effectively addressing the following recommendations from the *2024 Health Disparities Report*:

Community Health and Prevention:

- Design physical activity programs and campaigns to encourage exercise and recreational access

Chronic Disease:

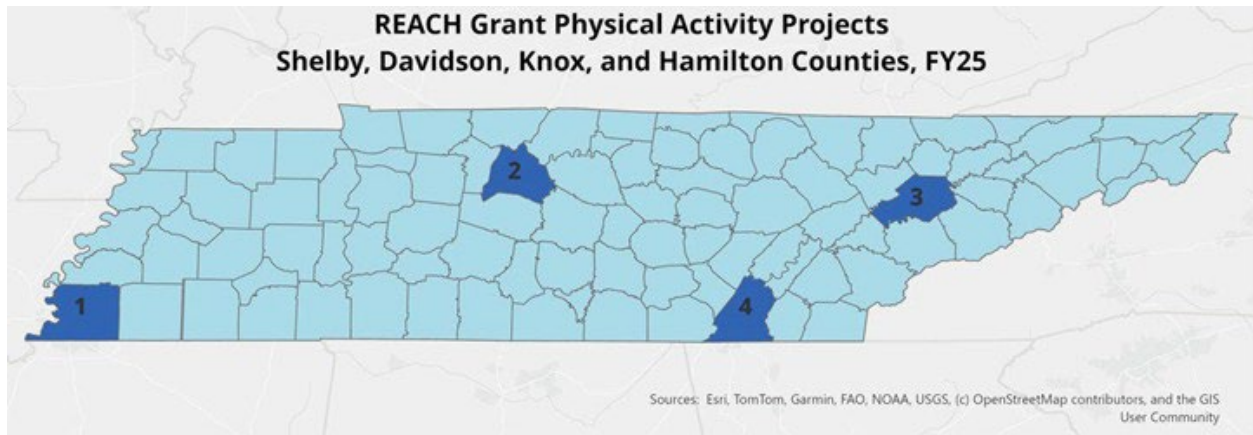
- Promote nutritional security and healthy eating habits through expansion of fruit and vegetable prescription programs, community-based programs, and farmers' markets.

Age-Specific Health

- Collaborate with school and community programs to implement nutrition and physical activity support.

Community Design for Physical Activity

In December 2024, TDH selected four subgrantees to implement projects focused on creating safe and accessible opportunities for physical activities. The Works Inc. in Shelby County, the Civic Design Center in Davidson County, the City of Chattanooga in Hamilton County, and the United Way of Greater Knoxville in Knox County each received \$50,000 for a community design. The funded projects focused on connecting pedestrian, bicycle, and transit networks to everyday destinations in parks and neighborhoods.



1. **Shelby County:** Lick Creek Park
2. **Davidson County:** Bordeaux and Haynes Neighborhood Health Equity Plan
3. **Knox County:** Dr. Walter Hardy Park Redesign
4. **Hamilton County:** George Washington Carver Park

Progress



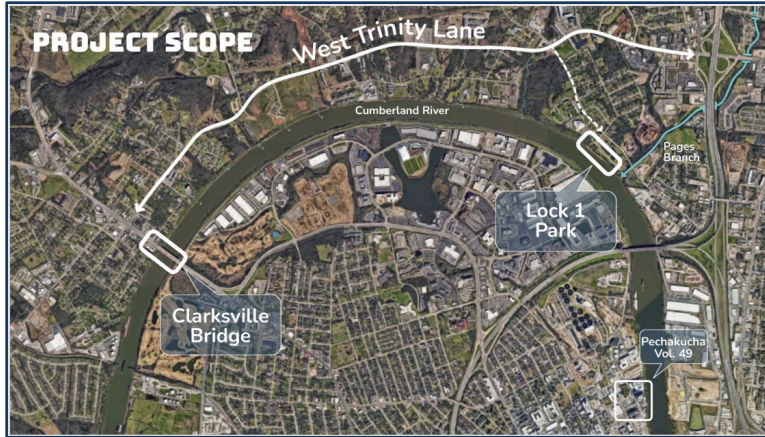
Dr. Walter Hardy Park

United Way of Greater Knoxville developed the final design plan for Dr. Walter Hardy Park by conducting multiple listening sessions with community members, stakeholders, and organizations to gather input. Feedback was incorporated into successive drafts, ensuring the design reflected the community's needs and vision. Photo provided by United Way of Knoxville.



George Washington Carver Park

The site concepts for George Washington Carver Park were developed through community engagement, incorporating feedback on desired features such as sports facilities, gathering spaces, and ecological elements. Input was gathered from community members and stakeholders during events and presentations. Photo provided by the City of Chattanooga



Bordeaux and Haynes Neighborhood Health Equity Plan

Through equitable urban planning and community engagement, the Civic Design Center and Cumberland River Compact have developed a community plan to improve health and safety in Nashville's Bordeaux and Haynes neighborhoods. This plan includes multiple projects that address historic disinvestment, promote active living, and reduce health inequities in these predominantly Black, underserved neighborhoods. Photo provided by the Civic Design Center.



Lick Creek Park

The site concepts for Lick Creek Park were developed through community engagement sessions led by The Works, Inc. and the design team. These sessions incorporate feedback from local residents to refine plans for features like parking, trails, and recreational spaces. Photo provided by The Works, Inc.

Family Healthy Weight

REACH recipients select from six different evidence-based family healthy weight programs approved for use by CDC, and which meet American Academy of Pediatrics recommendations for childhood obesity interventions. Tennessee has chosen to implement a program called MEND – Mind, Exercise, Nutrition, Do it! – which is a program designed to help children and their families improve health, fitness, and self-esteem through a combination of physical activity, healthy eating, and behavior change techniques.

Community of Practice

In addition to REACH Grant funding, CDC supports a Diabetes-focused grant (2320 Grant) and the High Obesity Program (HOP) within the state. TDH's Division of Family Health and Wellness (FHW) and the University of Tennessee (UT) Extension received funding from the CDC's 2320 and HOP Grants, respectively. These initiatives are also utilizing the MEND Program. Working collectively with these other Grant recipients, the Office of Minority Health has supported joint training of MEND coaches in the state in February and September of 2025. The REACH Program is leading the development of a community of practice (CoP) for MEND coaches, which will support the expansion of this evidence-based family healthy weight approach to communities across the state.

Statewide Partnership to Rollout MEND

Statewide Partnerships to Roll Out MEND



MEND Program Partnership

The REACH program is partnering with clinicians at Methodist Le Bonheur Healthcare to recruit families to participate in the MEND program in Shelby County. The clinic will contact qualifying children's families (children between the ages of 7 and 13 with a diagnosis of overweight or obesity and residing in Shelby County) and refer them to TDH to enroll in the community-based program.

Families who participate in the MEND Program will experience 12 weekly educational sessions on topics including **nutrition, portion sizes, label reading, and psychological factors driving behavior**. Additionally, the children will have the opportunity to enjoy structured, **play-based physical activity sessions** while the adult caregivers engage in **peer-supported discussion** of behavior change efforts and challenges.

Through this partnership, the clinic will conduct screenings and research, while REACH will provide coaching and materials for the program. REACH currently has plans to expand to additional clinic sites in other counties in the upcoming year.

Nutrition

The REACH program is actively working to improve nutrition access and education in Tennessee through three key nutrition-related initiatives.

1. REACH is working with the TN Food Security and Nutrition Collaborative on implementing the **Federal Food Service Guidelines** at partnering food pantry and congregate feeding sites. They are also working with the PCI team to develop a free, online, self-paced training focused on the waste diversion aspect of these guidelines.
2. REACH is identifying locations across Tennessee that accept **fruit and vegetable vouchers**. These vouchers can be used at food pantries, farmers' markets, grocery stores, and other outlets. They aim to make fresh produce more accessible to communities in need.
3. REACH is identifying Healthcare providers who issue **produce prescriptions** for increased fruit and vegetable consumption as a preventive and treatment measure for diet-related diseases. These prescriptions also address food insecurity and may be coordinated with voucher programs to enhance access.

Community Health Workers Initiative

The Community Health Workers (CHW) Initiative funds the recruitment, training, hiring, and retention of CHWs within Tennessee’s network of community health centers, county health departments, and other community and/or faith-based organizations. This program supports academic institutions that provide CHW training and the state Community Health Worker Association in implementing and sustaining evidence-based projects to improve health outcomes and reduce healthcare worker shortages caused by the COVID-19 pandemic.

The CHW Initiative distributed funding in two rounds. The first round funded nine community organizations with existing community health worker programs. The second round concluded in June 2025, with six community organizations participating.

Meeting the Need

The CHW initiative is aligned with DHDE’s **Workforce Development, Community Engagement,** and **Healthcare Structure Support** priority work areas and is effectively addressing the following recommendations from the *2024 Health Disparities Report*:

Community Health and Prevention

- Address vaccine hesitancy and promote vaccine confidence through partnerships.

Infectious Disease

- Promote vaccination for high-impact respiratory illnesses like influenza, COVID-19, and RSV.

CHW Initiative Timeline

- **July 2021:** Tennessee Department of Health, DHDE, is awarded \$6 Million through the CDC’s Community Health Workers Initiative
- September 2021: 7 community partners are awarded with the first round of funding.
- **July 2022:** A second round of funding was disbursed to 2 additional community partners
- **May 2023:** Public Health emergency is lifted and strategies shift to include social determinants of health, general health needs, and offering routine vaccines like the flu shot.
- **June 2025:** The CHW Initiative concludes with the expiration of funding

Impact of the CHW Grant

At the conclusion of the Community Health Worker Initiative, recipients of the CHW grant were surveyed about its impact. The survey was only sent to the six organizations that participated in the second round of the grant; all six organizations responded. Through the grant, these six organizations were able to hold events, form partnerships, provide testing and vaccination, implement data systems, and provide or refer to wraparound services.

Expansion

- One hundred percent of recipient organizations were able to expand the scope of their services.
- One hundred percent of recipient organizations increased their staffing levels or capabilities.
- Recipient organizations partnered with over 2250 organizations throughout the grant's duration.

Reaching Goals

- The average effectiveness rating for achieving the intended program goals was **4.1** out of 5.
- The average success rating for reaching intended individuals and communities was **4.6** out of 5.
- Over 500 COVID-19 tests were administered, including the distribution of at-home tests.
- Over 550 individuals were vaccinated through CWH programs
- Over 1500 wraparound service referrals were made, including rental assistance and social services.

Stories of Success: InterFaith Health Center

InterFaith Health Center is an organization that received funding through the CHW grant. The passage below describes the success the organization achieved through the CHW grant.

Through this funding, InterFaith Health Center introduced Community Health Workers (CHWs) into its care model, creating a program that has profoundly impacted thousands of lives and reshaped the way healthcare is delivered in their community. The CHWs became a lifeline for underserved individuals, offering personalized case management and addressing barriers to health and stability. They connected patients to essential resources like transportation assistance, food support programs, and basic needs services. For those facing food insecurity, CHWs provided emergency food kits and helped patients enroll in local food banks and SNAP programs. Beyond resource navigation, they led wellness and life skills classes, empowering participants to manage chronic diseases, improve workforce skills, and take control of their overall well-being.

Over the grant period, CHWs had face-to-face interactions with 6,600 individuals, provided case management to 614 patients, and delivered immediate, life-changing assistance in over 1,000 "move the needle" moments—such as delivering fresh produce to a food-insecure family or arranging transportation to ensure a patient didn't miss a critical appointment. They also attended 518 public events to raise awareness about InterFaith's services and COVID-19 safety, and led 271 individuals through classes in healthy living and workforce development.

But the impact goes far beyond the numbers. By building trust and forming meaningful relationships, CHWs bridged the gap between clinical care and daily life. Their consistent follow-up and support reduced missed appointments, improved adherence to care plans, and ultimately led to better health outcomes for some of the community's most vulnerable members.

This program has not only changed lives but also transformed InterFaith Health Center itself. What began as a new initiative has become an indispensable part of their care model. The organization now recognizes the vital role CHWs play in addressing the social determinants of health and is actively seeking funding to ensure the program continues. InterFaith Health Center is deeply grateful to the Tennessee Department of Health for investing in its vision and helping it come to life. This program's success stands as a testament to the power of community-centered care, and InterFaith looks forward to continuing this important work to build healthier, more resilient communities.

COVID-19 Health Disparities Initiative

The COVID-19 Health Disparities Initiative addressed COVID-19 risk in underserved and rural communities across Tennessee, provided connections to wraparound social services, and addressed COVID-19-related health disparities to advance health equity. The program was initiated with the Division of Health Disparities Elimination's receipt of the CDC's OT21-2103 grant (2103 Grant).

Through this grant, the Office of Minority Health stewarded funding to 20 organizations across Tennessee that provided a range of clinical and non-clinical services to vulnerable Tennesseans. Those organizations included three academic institutions, five internal TDH offices and divisions, three Rural organizations, and nine Task Force partners. DHDE launched the Tennessee Health Disparities Task Force, now the Health Disparities Advisory Group, to address disparities that were highlighted during the pandemic. The task force examined existing data, monitored trends, and listened to those living, working, and serving in vulnerable communities to generate responsive solutions and policies that reduce these disparities.

Meeting the Need

The Health Disparities Initiative is aligned with DHDE's **Community Engagement** and **Disparities and Chronic Disease Reduction** priority work areas. Effectively addressing the following recommendations from the *2024 Health Disparities Report*:

Infectious Disease:

- Promote vaccination for high-impact respiratory illnesses, including influenza, COVID-19, and RSV
- Collaborate with local agencies to conduct outreach events aimed at improving adult vaccination coverage among high-risk populations.
- Partner with community health councils (CHCs) and local organizations to identify community resources/agencies providing screenings for uninsured individuals and education regarding respiratory illnesses, including COVID-19.

Grant Partners

- Academic institutions
- TDH internal agencies
- Rural agencies
- Task Force partner

Health Disparities Initiative Timeline

- **May 2021:** Tennessee Department of Health, DHDE is awarded \$38,830,892 through the CDC's OT21-2103 grant
- **June 2021:** DHDE awards 20 partners with strategies dedicated to COVID-19 related initiatives
- **May 2023:** Public Health emergency is lifted and strategies shift to emphasize the overall mitigation of upper respiratory diseases
- **March 2025:** Funding is terminated at the federal level, concluding the COVID-19 Health Disparities Initiative

2103 Grant Funded Activities

The 2103 Grant recipients utilized funds for activities across four strategies. The strategies originally prioritized reducing COVID-19-related disparities among populations at higher risk and those who are underserved. However, they later shifted their focus beyond COVID-19 to encompass a broader range of upper respiratory diseases. This initiative concluded with the termination of the 2013 Grant funding at the federal level in March 2025. A timeline of the initiative can be seen above.

Through subcontracting, our partners distributed 2103 Grant funding to more than sixty community organizations in seventy-four counties across the state.

Through our twenty direct partners, the 2103 Grant funded 276 activities across four strategies. Over the course of three award years, 163 unique activities were funded. The following page shows a breakdown of the total activities by strategy and partner type. Each strategy focused on a specific tactic for reducing the risk of respiratory disease for vulnerable populations, including expanding prevention services, improving data and reporting efforts, improving infrastructure, and mobilizing collaborators. The list of final strategies is included on the next page.

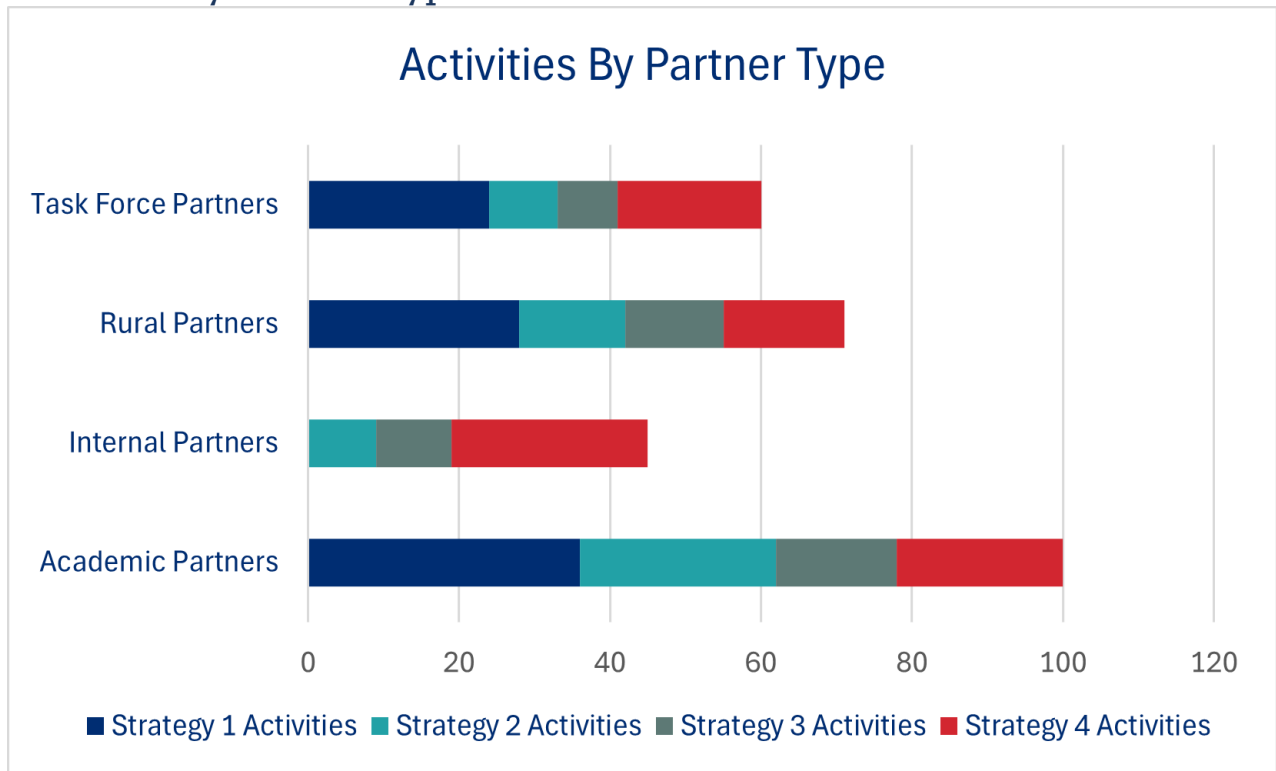
Final 2103 Strategies

- **Strategy 1:** Expand existing and/or develop new mitigation and prevention resources and services
- **Strategy 2:** Increase/improve data collection and reporting
- **Strategy 3:** Build, leverage, and expand infrastructure support
- **Strategy 4:** Mobilize partners and collaborators

Activities by Strategy

- 88 Strategy 1 Initiatives (31.9%)
- 58 Strategy 2 Initiatives (21%)
- 47 Strategy 3 Initiatives (17%)
- 83 Strategy 4 Initiatives (30.1%)

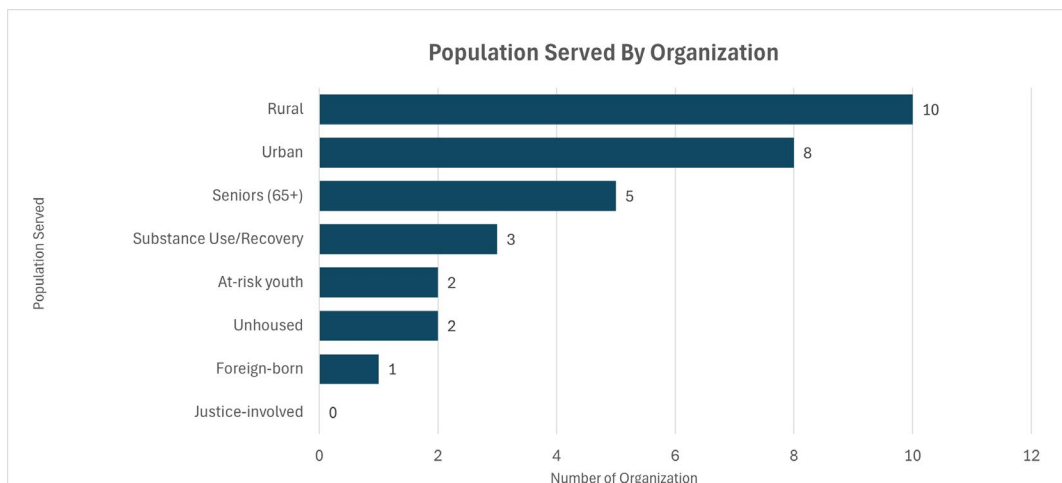
Activities by Partner Type



Impacts of the 2103 Grant

At the conclusion of the Health Disparities Initiative, recipients of the 2103 Grant were surveyed about the impact of the grant. Twenty-seven organizations responded to the survey. The survey revealed a range of populations served across Tennessee, with the most organizations serving rural populations. Respondents reported that the 2103 grant funding helped change the scope of normal operations for the organization by expanding the scope of service, directing efforts to include new populations, and/or expanding the population being served. Respondents also reported that the 2103 Grant funding helped change the operational capacity or infrastructure of the organization by expanding or improving facilities, acquiring new or improved equipment, increasing service hours, and/or increasing staffing levels or capabilities.

- One hundred percent of respondents reported changes in the scope of normal operations.
- Five respondents reported their organizations acquired new or improved equipment
- Twelve respondents reported increased staffing levels/capabilities at their organizations
- Ten respondents reported that this initiative helped expand the populations they serve
- Seven respondents reported being able to increase their organizations' service hours



Stories of Success: Tennessee Charitable Care Network

The Tennessee Charitable Care Network was a rural partner organization that received funding through the 2103 grant. Read more about the success they had with the grant below:

The Tennessee Charitable Care Network (TCCN) has made significant progress in addressing COVID-19 health disparities and advancing health equity through the OT21-2103 initiative. By empowering Community and Faith-Based Charitable Care Providers (CFBs), TCCN reached uninsured and underserved populations with critical healthcare services and resources.

One of the most impactful efforts was the creation of Community Health Worker (CHW) programs, which logged hundreds of face-to-face interactions, attended public events, and formed partnerships with local organizations. For example, InterFaith Health Clinic's CHWs connected patients to essential resources, including food, housing, and mental health support, while Healing Hands Health Center provided translation services to Hispanic patients, ensuring culturally appropriate communication.

Infrastructure improvements also played a key role. CrossRoads Medical Mission secured a new office in Bristol, equipped with isolation areas and expanded mental health services, while Mountain Hope Good Shepherd Clinic added primary care and behavioral health resources, including culturally tailored services for the Hispanic community. Data-driven approaches enhanced care delivery. Partners for Healing utilized electronic health records to track patient needs and outcomes, while Keystone Dental improved data metrics to guide responses to health disparities.

Community engagement was central to success. Servolution Health Services hosted a resource fair, providing wraparound services, while Siloam Health distributed rapid COVID-19 test kits and offered targeted education to immigrant and refugee communities. Volunteers in Medicine Chattanooga created a welcoming environment, achieving 100% compliance with vaccination surveys and fostering trust among patients.

These efforts resulted in increased vaccine uptake, expanded access to healthcare, and strengthened infrastructure, creating a lasting impact on health equity across Tennessee. TCCN's work exemplifies the power of collaboration and innovation in addressing health disparities

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