



SCHOOL OF
PUBLIC HEALTH
UNIVERSITY OF MINNESOTA

ANTIRACISM AND HEALTH EQUITY

Strategic Plan for Antiracism
Center for Antiracism Research for Health Equity
Research
Education
Partnerships & Community Engagement
Health Equity Work Group

Making Health a Human Right

**Discover how the University of Minnesota
School of Public Health is advancing
antiracism and health equity in our school,
community, and the world.**



OUR COMMITMENT TO ANTIRACISM AND HEALTH EQUITY

Never has public health needed to step up and contribute more fully and vocally to the change we need as a nation. We must acknowledge and make perfectly clear to others that public health is a field that actively works for justice.

*At the University of Minnesota School of Public Health (SPH), that work plays out in our research, our teaching, and our partnerships with the communities around us. We believe that **health is a human right** and assuring that right drives everything we do.*

We have a solid history of health equity research and we are expanding our studies to expose specific health challenges in underrepresented groups such as veterans, Indigenous communities, birthing people in rural America, and the aging. Our work is essential to understanding barriers to health, investigating their causes, and providing evidence for policies and actions to break them down.

We are determined to pave the way for crucial social change that will give all people the chance for a healthy life.

*Our school is committed to the vital work of antiracism — the conscious effort to dismantle racism and advance justice. That commitment is directed outward to the students and communities we serve, but also inward as we examine our school's own areas for growth and development. In 2021, we launched two efforts — our **Strategic Plan for Antiracism** and the **Center for Antiracism Research for Health Equity** — to guide us toward a future where our school advances a society newly and firmly grounded in equity and justice.*

-UNIVERSITY OF MINNESOTA SCHOOL OF PUBLIC HEALTH



an·ti·rac·ism n.

To be antiracist is to actively and consistently challenge racism in any of its forms.

“If the values of our school and public health, in general, are to mean anything, social justice has to be at the center of our work.”

LAUREN JONES

STRATEGIC PLAN FOR ANTIRACISM

BUILDING EQUITY, DRIVING JUSTICE

In July 2021, we launched our school's Strategic Plan for Antiracism. The plan represents a new era for SPH, one where we challenge our country's pattern of institutional racism. With a clearly defined set of goals and actions, the plan focuses on *embedding antiracism, equity, and diversity into our school's policies, practices, and decisions*.

The plan builds on our core values and will guide us over the next five years as we transform SPH into a school where there is justice and equity for all; everyone has the same opportunity to contribute and thrive; and each person feels welcomed and respected.

A Collective Effort

Everyone at SPH is being called on to play an active role in achieving the change we seek. ***"Building Equity, Driving Justice: Commit | Challenge | Change"*** is the theme we have developed to support the launch of our plan. It acknowledges the importance of this moment, calls on people to take a stand, and inspires action.

- **Commit** — We commit to prioritizing antiracist efforts to make SPH a more welcoming, equitable, and just organization.
- **Challenge** — We are determined to challenge racism when we see it, whether it's in our school, ourselves, or the systems around us.
- **Change** — We are willing to change our beliefs, attitudes, and actions to move toward equity and justice.

Training and Development

Understanding antiracism is essential to creating change. Key SPH training initiatives include:

- The **Equity, Diversity, and Inclusion Training Team (EDIT)** shapes our internal training initiatives for SPH faculty, staff, and students.
- The **Justice in Public Health Speaker Series** hosts experts who lead discussions around topics at the nexus of public health and antiracism.
- The UMN Office of Equity & Diversity offers a certificate program and diversity communities of practice for faculty, staff, and students.

Measuring Change


Becoming an antiracist school requires action and accountability. We will regularly evaluate our actions, progress, and outcomes in the following ways:

- **Tracking Data** - Standardized and authentic processes will gather, analyze, and report data
- **Annual Report** - Yearly snapshot of our actions and progress toward goal areas
- **Biannual Climate Assessment** - Gauges the "cultural temperature" of our school around diversity, equity, and inclusion

LAUREN JONES

Director, Diversity, Equity, and Inclusion

In 2020-2021 Jones led a school-wide initiative to develop the SPH Strategic Plan for Antiracism. Learn more: sph.umn.edu/antiracism

A portrait of Rachel Hardeман, a Black woman with long, dark dreadlocks, smiling. She is wearing a black blazer over a black top and a white skirt with black polka dots. Her hands are clasped in front of her. She is wearing a gold watch on her left wrist and a black bracelet on her right. The background is a stone wall with a warm light source on the left.

“A concerted effort to specifically address the issues of structural racism and to uncover and change the structures shaped by racism is necessary to achieve health equity.”

RACHEL HARDEMAN

CENTER FOR ANTIRACISM RESEARCH FOR HEALTH EQUITY

IN PURSUIT OF HEALTH EQUITY AND JUSTICE FOR ALL

Research into health inequities often starts with the premise that there is something inherently different about people of color that makes them sicker and die younger than white people. In reality, more than 400 years of racism have driven racial inequities in health.

In 2021, Blue Cross and Blue Shield of Minnesota gave SPH a \$5 million gift to establish the **Center for Antiracism Research for Health Equity (CARHE)**. CARHE aims to be a leader in antiracist research — a revolutionary method grounded in the understanding that racism is a fundamental cause of health inequities and that puts the people who are grappling most with health inequities at the center of research design and decision-making.

CARHE will not only engage in antiracist research, but will also drive authentic community engagement, develop education and training, serve as a trusted community resource, and do the hard work of changing the narrative about race and racism to one where whiteness is not the ideal standard for human beings.

Examples of the Center's Societal Impact

As CARHE advances its work, it will create significant impact by working closely with communities to develop tools and activities, such as (not an exhaustive list):


- **The Multidimensional Measure of Structural Racism**, a tool that will allow people to examine the linkage between structural racism and health
- **Innovative antiracist research** on police violence, reproductive health, healthcare delivery, and other areas where racism impedes health
- **An infrastructure for community-led research methods** that will serve as a resource for others to learn about and apply authentic community engagement to their work
- **Support for communities** as they seek to understand, document, and respond to racial injustices that are contributing to health inequities
- **Research, data, and guidance to decision makers** at both the state and federal levels

Success in our work will mean we understand and are better able to address racial health inequities, and that we disseminate that knowledge to others who are committed to improving care, health, and wellbeing in communities of color.

RACHEL HARDEMAN

Associate Professor and Founding Director, SPH Center for Antiracism Research for Health Equity (CARHE)

Hardeman created the vision for CARHE and she serves as its founding director.

A portrait of Tetyana Shippee, a woman with long brown hair, wearing a dark blazer over a white top. She is standing outdoors with a blurred background that includes a building with red lettering and a white lamp post. The image is framed by a dark red geometric pattern at the bottom and sides.

“The racial/ethnic disparities across long-term services and supports such as assisted living and nursing homes are not due to race, but institutional racism built into the healthcare sector and other areas that result in worse health outcomes for marginalized communities.”

TETYANA SHIPPEE

RESEARCH

HEALTH EQUITY AND ANTIRACISM THROUGHOUT A LIFETIME

Health equity is fundamental to our research, and as we move through this century, research that specifically explores health inequities and leads to meaningful and sustainable interventions will become even more critical. Our experience in this realm includes studies that examine the impacts of health inequities and racism at all stages of life, beginning even before birth.

Examples of Our Work

Facing Down Racism From the Start

Before babies are born and as they grow, racial inequities put them at risk. Our experts strive to give them a healthy start:

- Assistant Professor Jaime Slaughter-Acey is finding that skin tone bias, or colorism, is a driver of preterm births.
- Associate Professor Rachel Hardeman is investigating the association between racialized police violence and preterm birth and low birth weight among Black infants. Hardeman also found that the in-hospital death rate of Black newborns is a third lower when they are cared for by Black physicians rather than white physicians.

Quality of Life in Nursing Homes

Associate Professor Tetyana Shippee is driven by one question: How can we make care toward the end of life a more positive experience, regardless of race, ethnicity, or culture? Her recent research found that compared to white residents in nursing homes, Black, Indigenous, and residents of color have a significantly lower quality of life, no matter the racial/ethnic composition of the facility. “We need to start addressing the mechanisms for disparities in experience of care and quality of life for these groups and make sure that they have a voice in their care,” says Shippee.

Tailoring Medications

American Indians and Alaska Natives (AI/AN) suffer disproportionately from smoking-related illness and mortality. To help achieve health equity, Assistant Professor Dana Carroll is partnering with tribes and communities to study how quickly AI/AN individuals metabolize nicotine and how the speed relates to their genetic makeup. She is also exploring the social and cultural determinants of smoking in AI/AN groups and using focus groups to assess perceptions of and barriers to participating in genetic studies.

TETYANA SHIPPEE

Associate Professor and Associate Director for Research, SPH Center for Healthy Aging and Innovation

Shippee is breaking new ground in exploring the role of race and culture in quality of life measures. Learn more: sph.umn.edu/chai



“Cancer prevention is a social justice issue of global importance. Worldwide, people from marginalized communities often experience higher exposures to cancer risk factors and lack access to cancer screening and other control measures. Building capacity for cancer prevention research, particularly in places with limited resources, is a step towards addressing these disparities.”

IRINA STEPANOV

RESEARCH

EQUITY AND ANTIRACISM IN OUR SYSTEMS

Structural racism is built into the systems that underlie our society, such as law enforcement, banking, medicine, and city planning, as well as those that give power and provide a sense of belonging, such as education, clubs, and organizations.

Our work examines the systems and policies that influence health outcomes and reveals both challenges to health equity and efforts that foster wellbeing in marginalized communities. With novel research, such as exploring how to bridge political divides with health disparities messaging and how to increase access to affordable, healthy food in underserved neighborhoods, we will continue to advance health equity in new ways to meet the needs of the changing world.

Examples of Our Work

Health Equity Through Global Cancer Prevention

Tobacco use is one of the main risk factors for increasing cancer rates across the globe. There are striking disparities in smoking prevalence in the U.S., and nearly 80% of the 1 billion smokers in the world live in low- and middle-income countries. Air pollution is another cause of cancer that disproportionately affects populations of lower socioeconomic status, and Black, Indigenous and people of color, women, and children are generally at higher risk for exposure both in the U.S. and globally.

The new **Institute for Global Cancer Prevention Research**, led by Professor Irina Stepanov, is developing a world-wide program to more easily transfer cancer research findings from one country's medical system to others across the globe to reduce tobacco, environmental, and infection-driven cancer on a global scale.

Community-Driven Solutions

In the U.S., Black men between the ages of 18 and 44 are more than three times as likely as white men of the same age group to be killed by police. Professor Rhonda Jones-Webb wants to find out what causes these lethal interactions and how to reduce them.

In a recent study with SPH colleagues, she interviewed young Black men, parents, educators, police officers, and staff in youth-serving organizations and found fear and distrust among both youth and police as a common cause for violence. Jones-Webb feels building trust and designing community-driven solutions can prevent future violent encounters.


Understanding and Preventing Trauma

When bias is directed against Black, Indigenous, and students of color, it builds on the trauma they experience in many other parts of their lives and from an historically racist society. To help select Minnesota school communities understand and address this trauma, Professor Marizen Ramirez worked with them to create **Link for Equity**, a system to prevent violence, especially racial trauma, and its adverse impacts.

IRINA STEPANOV

Professor and Director, Institute for Global Cancer Prevention Research

Stepanov focuses on the link between tobacco products and cancer by tracing harmful chemicals in tobacco products to their transformations in the human body. Learn more: igcpr.umn.edu



“As a professor, one thing I ask students is, ‘What populations are involved in the study and what does that mean for the conclusions that can be drawn? And with that in mind, how well do the results of the study generalize to someone like yourself?’”

MARK FIECAS

EDUCATION

PREPARING FUTURE LEADERS

Achieving health equity and dismantling racism in the U.S. will be a long and hard task, and today's students will be on the front lines tomorrow to lead this work. At SPH, students find a rich array of opportunities to better understand the far-reaching effects of racism and health inequities and to create and use tools essential to building a better future.

To further favorable health outcomes, SPH offers groundbreaking educational choices through minors, certificates, and the **Summer Public Health Institute**. Students also participate in experiential learning, such as partnering with Minneapolis's Native American Community Clinic to build pop-up COVID-19 testing locations.

Our school's **Diversity Network** is a community-building student organization that focuses on cultivating personal and professional development in diversity, equity, and inclusion and gives students the chance to engage in conversation and learn from each other.

Our courses across all areas of study include new ways to learn about past and current challenges as well as to explore creative approaches and solutions to health inequities. Infused throughout the day-to-day class work at our school is our determination to advance equity and drive justice and we offer many classes specifically focused on these goals.

Selection of SPH Courses Focused on Health Equity

- PubH 6055 Social Inequalities in Health
- PubH 6066 Building Communities, Increasing Health: Preparing for Community Health Work
- PubH: 6241 American Indian Public Health and Wellness, Health Policy, Law, Health Services Administration
- PubH 6242 Cultural Humility with American Indian Populations
- PubH 6244 American Indian Health and Wellness Equity
- PubH 6245 American Indian Environmental Health Tribal Case Studies
- PubH 6246 General History of American Indians Post Colonization & Review of Historical Trauma
- PubH 6606 Children's Health: Life Course & Equity Perspectives
- PubH 6675 Women's Health
- PubH 6745 Rural Health
- PubH 6815 Community-based Participatory Research


SPH Minors & Certificates Related to Health Equity

- Graduate Minor in American Indian Health and Wellness
- Graduate Minor in Health Equity
- Graduate Minor in Sexual Health
- American Indian Public Health and Wellness Certificate

MARK FIECAS

Associate Professor, Biostatistics

Fiecas is engaged in efforts to recruit people of color, women, and students from other underrepresented backgrounds into the field of biostatistics.



“With this program, we’re being responsive to the needs of immigrant dairy workers who often don’t have the access to mental health support structures that others do.”

JEFF BENDER

PARTNERSHIPS & COMMUNITY ENGAGEMENT

CREATING CHANGE WITH COMMUNITIES

In our resolve to end unequal opportunities for health, we forge ongoing collaborations to expand our knowledge and reach.

Examples of Our Work

Collaborating to Build Homes for the Homeless

Two groups have come together in Minneapolis to make a bold idea a reality — create an intentional community of “tiny homes” to provide stability and better health for people who do not have a place to live. Street Voices of Change, an organization of those experiencing homelessness, and Upstream Health Innovations, a non-profit dedicated to removing barriers to health, call their initiative Envision Community.

Over the course of a semester, a group of SPH students used our school’s unique problem-solving method to bring new and critical information to Envision as they explored potential solutions to their funding needs.

Joining Forces for Community Well-Being

SPH is home to Interdisciplinary Research Leaders, a multi-year Robert Wood Johnson Foundation initiative that brings two academic researchers from different fields and a community leader together as equal partners to solve persistent challenges to health equity. With the communities that shape their research, the teams produce action-oriented, community-engaged research that helps give all people the opportunity for a healthier life.

Health Equity for Rural America

The Rural Health Research Center conducts studies to improve the lives of rural residents and families, to advance health equity, and to enhance the vitality of rural communities. Recent projects include:

- Improving Racial Equity for Rural Mothers and Infants
- Rural/Urban Differences in Health and Health Care Access for LGBT Adults
- Rural/Urban Differences in Postpartum Health Insurance, Healthcare Use, and Health Outcomes
- The Direct Care Workforce in Rural Areas

Promoting Safety and Health for Immigrant Dairy Workers

Working in dairies is one of the most dangerous and difficult jobs in the nation, yet the immigrant workers who do most of the labor often lack adequate training due to cultural and language barriers.

The Upper Midwest Agricultural Safety and Health Center (UMASH), an SPH collaboration, tackles this issue through a project called **Promoting Safety and Worker Health for Immigrant Dairy Workers**. The project consists of trainings in Spanish, at no cost, to dairy workers on safety and health issues, including mental health.

The project involves a team of clinicians, veterinarians, producers, workers, and community health centers and serves as a national model for preparing the next generation of dairy employees and producers.

JEFF BENDER

Professor and Director, Upper Midwest Agricultural Safety and Health Center (UMASH)

Bender is a veterinarian and specializes in One Health issues as he leads UMASH.
Learn more: umash.umn.edu



“Engaging with the community and involving key stakeholders is critical in identifying community-driven solutions.”

RHONDA JONES-WEBB

HEALTH EQUITY WORK GROUP

LONGTIME EMPHASIS ON EQUITY

SPH established the **Health Equity Work Group** in 2005 under the leadership of Professors Rhonda Jones-Webb and Kathleen Call. Its mission is three-fold:

1. Promote and give greater visibility to health equity research;
2. Develop collaborations with faculty and community partners; and
3. Ensure students and faculty are well-trained to work in a diverse society.

The Health Equity Work Group carries out its work through three main areas:

Research & Training

The work group promotes health equity research and provides networking and training opportunities for faculty and students, including a **Graduate Minor in Health Equity**. The minor provides students with comprehensive skills and an understanding of the structural factors that cause health disparities and inequalities. Graduates are well-equipped to enter a professional public health career as effective advocates. The minor is open to all graduate students at the University of Minnesota.

Community Engagement

Through community engagement, the work group increases awareness of current health equity issues and fosters community partnerships. Its primary activity is the high-profile annual **Health Disparities Roundtable**. Round tables have focused on topics such as COVID-19 health disparities, climate change, and health equity.

Student Engagement

The Health Equity Work Group develops and implements activities that provide leadership opportunities for students in health equity.

For example, the group piloted a project called **Health Equity Volunteers** and supported the work of a SPH student who was developing a database of the burial assistance benefits for each county in Minnesota (currently there is no such database). The work is ultimately aimed at assisting families of low-income Black, Indigenous, and people of color during the burial process for loved ones lost to COVID-19. When the database is complete, the student will share it with the Minnesota Department of Health.

RHONDA JONES-WEBB

Professor and Co-Director, SPH Health Equity Work Group

Jones-Webb is discovering new ways to disrupt violent encounters between police and young Black men and is a leading scholar on alcohol use and alcohol-related challenges among Black Americans.

SELECT CURRENT GRANTS

The following is a list of select SPH-led active grants related to antiracism and health equity. Bold indicates SPH researcher.

Tim Beebe, Simone French, Sarah Gollust, Rachel Hardeman, Rhonda Jones-Webb, Jude Mikal, Julian Wolfson: National Institute on Minority Health (NIH), "Center for Chronic Disease Reduction and Equity Promotion Across Minnesota (C2DREAM)"

Mary Butler, Kathleen Call, Janette Dill, Stuart Grande, Rhonda Jones-Webb, Manka Nkimbeng, Rachel Widome: U.S. Department of Health & Human Services AHRQ, "Strategies to Address Racial, Ethnic and Related Socioeconomic Disparities in Health and Healthcare"

Dana Carroll: NIH NIDA National Institute on Drug Abuse, "Summer Research Program for Diversity Students in Pharmacology/Immunology," Co-Investigator

Dana Carroll, Rachel Widome: NIH National Cancer Institute (NCI), "Development and Pilot Testing of a Culturally-Tailored Smartphone-Delivered Intervention for Commercial Smoking Cessation in American Indians"

Shekinah Fashaw-Walters, Rachel Hardeman: University of California at Davis, "Lifecourse Exposure to Community Violence and Risk of Cognitive Decline, AD/HD Among African Americans"

Sarah Gollust: University of Pennsylvania, "Using Disadvantage Indices to Address Structural Racism and Discrimination in Pandemic Rationing and Beyond: Defining the Shape of a Novel Paradigm to Promote Health Equity"

Rachel Hardeman: NIH National Institute of Child Health and Human Development, "Unequal Parenthoods: Population Perspectives on Gender, Race, and Sexual Minority Disparities in Family Stress and Health During Crises," Co-Investigator

Rachel Hardeman: University of California Davis, "Lifecourse Exposure to Community Violence and Risk of Cognitive Decline, AD/HD Among African Americans," Principal Investigator

Rachel Hardeman, Jaime Slaughter-Acey: Commonwealth Fund, "Developing Measures of Structural and Institutional Racism in US Health Care for Black Birthing People, A Pilot Study"

Rachel Hardeman, Jaime Slaughter-Acey: NIH National Institute of Child Health and Human Development, "Community Trauma and Pathways to Reproductive Health Inequities," Principal Investigator, Co-Investigator

Rachel Hardeman, Tongtan Chantarat, Shekinah Fashaw-Walters, Anna Hing, Peter Huckfeldt, J'Mag Karbeah, Katie Kozhimannil: Robert Wood Johnson Foundation, "Systems Thinking for Antiracist Research (STAR) Hub"

David Jacobs: Kent County Memorial Hospital, "Racial/ Ethnic Disparities in Heart Failure: A Cross-Cohort Collaboration," Principal Investigator

Rhonda Jones-Webb, Kathleen Call, Irina Stepanov: NIH National Cancer Institute, "Cancer Related Health Disparities Training Program," Co-Investigators

Melissa Laska, Lisa Harnack: East Carolina University, "Examining Validity and Sensitivity of Pressure-Mediated Reflection Spectroscopy as a Measure of Fruit and Vegetable Consumption in a Diverse Community Sample," Principal Investigator, Co-Investigator

Melissa Laska: NIH National Cancer Institute, "Innovation in Measurement for Diet-Related Disease Research: Optimizing Utility and Reach to Reduce Health Disparities," Co-Investigator

Dianne Neumark-Sztainer: "Examining How Psychosocial Stress Gets 'Under the Skin' and Leads to Cardiovascular Disease Risk in Diverse Children: A Mixed-Methods Study"

Dianne Neumark-Sztainer: NIH National Heart, Lung, and Blood Institute, "Healthy Weight Promotion in Youth and Families from Diverse Communities: An Applied Epidemiology Training Program," Principal Investigator

Dianne Neumark-Sztainer, Melissa Laska, Richard Maclehose, Susan Mason: NIH National Heart, Lung, and Blood Institute, "Eating, Activity, and Weight-Related Problems Across the Life Course in Diverse Populations," Principal Investigator, Co-Investigators

Jim Pankow: Drexel University, "Contribution of Longitudinal Neighborhood Determinants to Cognitive Health and Dementia Disparities within a Multi-Ethnic Cohort," Principal Investigator

Jim Pankow, Aaron Folsom, David Jacobs, Pam Lutsey: National Heart, Lung, and Blood Institute, "Multi-Ethnic Study of Atherosclerosis - Field Center"

Mark Pereira, Dianne Neumark-Sztainer: NIH National Center for Complementary and Integrative Health, "Feasibility of a Yoga Intervention in Sedentary African American Women," Principal Investigator, Co-Investigator

Marizen Ramirez: NIH National Institute of Minority Health, "Evaluation of Link for Equity: A Program to Reduce Racial/ Ethnic School Violence Disparities," Principal Investigator

Simon Rosser: NIH National Cancer Institute, "Restore: Improving Sexual Outcomes of Gay and Bisexual Prostate Cancer Survivors," Principal Investigator

Jaime Slaughter-Acey, Pamela Schreiner: NIH National Heart, Lung, and Blood Institute, "Beyond Black and White: Understanding Skin Tone as a Driver of Pre-pregnancy Cardiometabolic Health and Birth Outcomes," Principal Investigator, Co-Investigator

Visit: experts.umn.edu for more information.

RECENTLY PUBLISHED STUDIES

The following is a list of SPH-led studies published from Jan.-Sep. 2022 related to antiracism and health equity. Bold indicates SPH researcher or affiliate.

Experiences with public health recommendations for COVID-19: a qualitative study of diverse mothers with young children in the United States. **Arlinghaus, K. R., Hersch, D. E., Neumark-Sztainer, D. & Loth, K.**, 2022, In: Journal of Communication in Healthcare. 15, 1, p. 64-73 10 p.

Rural health disparities in health care utilization for dementia in Minnesota. Rhew, S. H., **Jacklin, K.**, Bright, P., **McCarty, C., Henning-Smith, C. & Warry, W.**, 2022, (Accepted/In press) In: Journal of Rural Health.

Improving The Measurement Of Structural Racism To Achieve Antiracist Health Policy. **Hardeman, R. R.**, Homan, P. A., **Chantarat, T.**, Davis, B. A. & Brown, T. H., Feb 2022, In: Health Affairs. 41, 2, p. 179-186 8 p.

Neighborhoods, Racism, Stress, and Preterm Birth Among African American Women: A Review. Giurgescu, C., Misra, D. P., **Slaughter-Acey, J. C.**, Gillespie, S. L., Nowak, A. L., Dove-Medows, E., Engeland, C. G., Zenk, S. N., Lydic, T. A., Sealy-Jefferson, S., Ford, J., Drury, S. & Stemmer, P., Jan 2022, In: Western journal of nursing research. 44, 1, p. 101-110 10 p.

Inequities in Availability of Evidence-Based Birth Supports to Improve Perinatal Health for Socially Vulnerable Rural Residents. Basile Ibrahim, B., Interrante, J. D., Fritz, A. H., Tuttle, M. K. & **Kozhimannil, K. B.**, Jul 2022, In: Children. 9, 7, 1077.

Health Insurance Ad Messages Targeted to English- and Spanish-Speaking Populations in a Period of Limited Federal Investment in Marketplace Outreach. Pando, C., Tait, M. E., McGuire, C. M., Perez-Sanz, S., Baum, L., Fowler, E. F. & **Gollust, S. E.**, 2022, (Accepted/In press) In: Medical Care Research and Review.

Classes of lifetime adversities among emerging adult women by race/ethnicity and their associations with weight status in the United States. Pando, C., Santaularia, N. J., **Erickson, D.**, Lust, K. & **Mason, S. M.**, Jan 2022, In: Preventive medicine. 154, 106880.

Participant characteristics and dietary correlates of SNAP and other assistance programs among families with children from racially and ethnically diverse households. **de Brito, J. N., Loth, K. A., Fertig, A.**, Trofholz, A. C., Tate, A. & **Berge, J. M.**, Jul 1 2022, In: Appetite. 174, 106015.

Racial differences in the association of accelerated aging with future cardiovascular events and all-cause mortality: the coronary artery risk development in young adults study, 2007–2018. Forrester, S. N., Zmora, R. A., **Schreiner, P. J., Jacobs, D. R.**, Roger, V. L., Thorpe, R. J. & Kiefe, C. I., 2022, In: Ethnicity and Health. 27, 5, p. 997-1009 13 p.

Race/Ethnicity, Spirometry Reference Equations, and Prediction of Incident Clinical Events :The Multi-Ethnic Study of Atherosclerosis (MESA) Lung Study. Elmaleh-Sachs, A., Balte, P., Oelsner, E. C., Allen, N. B., Baugh, A., Bertoni, A. G., Hankinson, J. L., **Pankow, J.**, Post, W. S., Schwartz, J. E., Smith, B. M., Watson, K. & Barr, R. G., Mar 15 2022, In: American journal of respiratory and critical care medicine. 205, 6, p. 700-710 11 p.

The Immigrant Memory Collaborative: A Community–University Partnership to Assess African Immigrant Families' Experiences with Dementia. **Nkimbeng, M.**, Rosebush, C. E., Akosah, K. O., Yam,

H., Russell, W. N., Bustamante, G., Albers, E. A., **Shippee, T. P.**, Sasikumar, A. P. & **Gaugler, J. E.**, Apr 1 2022, In: International journal of environmental research and public health. 19, 7, 4075.

Gaseous air pollutants and DNA methylation in a methylome-wide association study of an ethnically and environmentally diverse population of U.S. adults. Holliday, K. M., Gondalia, R., Baldassari, A., Justice, A. E., Stewart, J. D., Liao, D., Yanosky, J. D., Jordahl, K. M., Bhatti, P., Assimes, T. L., **Pankow, J. S., Guan, W.**, Fornage, M., Bressler, J., North, K. E., Conneely, K. N., Li, Y., Hou, L., Vokonas, P. S., Ward-Caviness, C. K., & 11 others, Sep 2022, In: Environmental Research. 212, Pt C, 113360.

Variation in Population Attributable Fraction of Dementia Associated with Potentially Modifiable Risk Factors by Race and Ethnicity in the US. Lee, M., Whitsel, E., Avery, C., Hughes, T. M., Griswold, M. E., **Sedaghat, S.**, Gottesman, R. F., Mosley, T. H., Heiss, G. & **Lutsey, P. L.**, Jul 6 2022, In: JAMA Network Open. 5, 7, p. E2219672

Household food insecurity and obesity risk in preschool-aged children: A three-year prospective study. **Zhong, D., Gunnar, M. R., Kelly, A. S., French, S. A., Sherwood, N. E., Berge, J. M. & Kunin-Batson, A.**, Aug 2022, In: Social Science and Medicine. 307, 115176.

Variability in eating disorder risk and diagnosis in transgender and gender diverse college students. **Simone, M., Hazzard, V. M.**, Askew, A. J., Tebbe, E. A., Lipson, S. K. & Pisetsky, E. M., Jun 2022, In: Annals of epidemiology. 70, p. 53-60 8 p.

Tribal Tobacco Use Project II: Planning, Implementation, and Dissemination Using Culturally Relevant Data Collection among American Indian Communities. Roland, K. M., Anderson, M. D., **Carroll, D. M.**, Webber, A. G., Rhodes, K. L., Poupert, J., Forster, J., Peterson-Hickey, M. & Pickner, W. J., Jul 1 2022, In: International journal of environmental research and public health. 19, 13, 7708.

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