Petition to include "Advancing a Precision Population Health Approach to ACEs to Reduce Health Disparities" into California's State Budget

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BACKGROUND:

UC San Diego, in partnership with SDSU, San Diego Promotores Coalition, Family Health Centers of San Diego, American Association of Pediatrics, the San Diego County Childhood Obesity Initiative, Streetwyze, and resident leaders with Poder Popular and Olivewood Garden submitted a proposal



(summary below) to the California Initiative for the Advancement of Precision Medicine (CIAPM see here: https://opr.ca.gov/ciapm/). While the project received **glowing reviews from the expert review panel**, there was insufficient funds to support the proposal. With that, members of the CIAPM will be advocating for the \$3 million project to be added to the California budget for the next fiscal year, based on its alignment with advancing, among other things, racial equity and to offer a possible future model on how communities can work to drive and in partnership with their local research universities to advance racial and health equity among the Latino community of San Diego. With the one-time approval of funds, this research effort can make a lasting impact, creating healthier more equitable communities for Latino children and families within San Diego and for the state of California.

THE ASK:

Please add your individual and, if possible, organizational endorsement to this petition – CLICK HERE TO ADD YOUR INDIVIDUAL/ORGANIZATION SIGNATURE.

KEY REASONS TO SUPPORT THIS PROGRAM:

- 1) THE SAN DIEGO LATINO COMMUNITY NEEDS THIS. Nearly 50% of children in San Diego County have experienced at least 1 ACE, 16% have experienced 4 or more and 30% of San Diego middle schoolers are considered obese, yet we lack a systematic pediatric program embedded in community health settings to address ACEs and obesity.
- 2) THE PROJECT IS DESIGNED BY THE COMMUNITY FOR THE COMMUNITY.

 Community-based solutions are central to any effort to achieve health equity. This project will be co-designed and led by a broad team of stakeholders elevating community voice and local expertise in all aspects of the research. The team includes resident leaders and Promotores from the Latino community in San Diego County, stakeholders from Family Health Centers of San Diego (the 5th largest FQHC nationally), advocates from the San Diego County Childhood Obesity Initiative, and investigators from UC San Diego.
- 4) THE PROGRAM LEVERAGES EXISTING RESOURCES. This project leverages existing relationships and expertise within the UC San Diego Altman and Clinical Translational Research Institute (ACTRI) to make an immediate impact offering innovative interventions and data collaboration networks that will integrate community voice with medical informatics. Resources will be immediately leveraged through the \$55 million NIH funded ACTRI along with existing partnerships, allowing funds requested for this project to be used for and with the community, ensuring an equitable and just infrastructure.

5) A REAL POTENTIAL FOR CREATING A SUSTAINABLE MODEL FOR CALIFORNIA. Despite the epidemic of ACEs and childhood obesity nationally, we do not currently have an evidence-based model of treatment, especially one that is rooted in community and appropriate

evidence-based model of treatment, especially one that is rooted in community and appropriate for families of color. The project aims to maximize individual and public health impact by establishing and testing a model of care that can ultimately be tested throughout California's community health system and be reimbursable by insurance.



SUMMARY OF PROJECT:

UCSD researchers are collaborating with the Latino community to create a family-based approach to improve individual and community resilience to stress and obesity. We will test if our approach works better than what is normally done. We will start with things that have worked in the past for helping Latino families. After that, community members and promotores will guide ways to adapt these strategies to local needs. In addition, the team will work together to create an intervention that is delivered differently to different families, based on each family's unique needs. We will test if our approach increases resiliency to toxic stress and reduces obesity among children. This is new in many ways. First, the intervention will be created with community members, promotores, and scientists creating a stronger approach together. Second, our approach includes ways to continually learn and improve the intervention. With this, we will be able to learn new ways to better account for different family needs, so that each family gets the right support at the right time for them.

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