

April 2021

# National Minority\* Health Month and Minority Cancer Awareness Week Social Media Toolkit



\*As part of the growing effort to advance health equity, there is also a greater emphasis on using language that addresses all people inclusively and with respect. It is important to recognize that there are many types of subpopulations and to be specific. Other than when referring to the official title of the annual observance, we will not use the term "minority," which can be perceived as disparaging.

# National Minority Health Month and Minority Cancer Awareness Week Social Media Toolkit - April 2021

## CONTENTS

About This Toolkit .....	2
Who Should Use This Toolkit?.....	2
Social Media 101 .....	2
What is National Minority Health Month and Minority Cancer Awareness Week?.....	2
Best Practices for Communication and Health Disparities.....	3
Sample Tweets and Facebook Posts.....	5
Sample Tweets and Facebook Posts for COVID-19.....	8
Sample LinkedIn Posts.....	10
Additional Tools and Resources .....	11
References.....	12

**Tip:** Viewing this PDF in Google Chrome? Use “Ctrl+Click” on links to open them in a new tab.

This work was supported by Cooperative Agreement #NU58DP006461-03 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of CDC.

## ABOUT THIS TOOLKIT

This toolkit is designed to help stakeholders implement evidence-based practices when communicating about the importance of addressing health disparities in order to advance health equity. It can also help you plan, implement and evaluate your social media strategy and make the case for why it's important.

Don't have the time or capacity to implement this toolkit? Don't fret! You can still engage your audience by retweeting messages from [@GWCancer](https://twitter.com/GWCancer)

## WHO SHOULD USE THIS TOOLKIT?

Public health professionals, cancer control professionals, cancer centers, coalitions, community-based organizations and other stakeholders can use this toolkit and adapt its messaging for their unique audiences and areas of expertise.

## SOCIAL MEDIA 101

This toolkit offers recommended posts for [Facebook](https://www.facebook.com), [Twitter](https://www.twitter.com), and [LinkedIn](https://www.linkedin.com). For information about social media platforms, key terms, and strategies to promote health observances using social media, please review the social media guide available at <http://bit.ly/GWCCSMTKs>.



## WHAT IS NATIONAL MINORITY HEALTH MONTH AND MINORITY CANCER AWARENESS WEEK?

National Minority Health Month was originally established by Booker T. Washington in 1915 as “National Negro Health Week” and represents an annual opportunity to raise awareness about health disparities that continue to affect racial and ethnic populations who have been socially and/or economically marginalized and more broadly recognize the social, economic, and geographic disadvantages that cut across population characteristics, such as disability status, sexual orientation or gender identity, in addition to race/ethnicity, that have historically been linked to discrimination or exclusion (Alcaraz, et al., 2020).

National Minority Cancer Awareness Week provides a more specific opportunity to raise awareness about cancer-related health disparities due to inequities affecting populations and communities historically linked to discrimination or exclusion. Despite improvements in life expectancy and overall health, many Americans are not benefitting equally from these advances (Centers for Disease Control and Prevention [CDC], 2019). A few examples of these health-related disparities are summarized below:

- African American men have the highest incidence and death rates from cancer (CDC, 2019).

- African American and Hispanic individuals in the U.S. are the most likely to be uninsured, making it more difficult to access care (Sohn, 2017).
- People of color often experience bias and lack of cultural sensitivity when seeking treatment in the health care system (Hall, et al., 2015; Williams & Cooper, 2019).
- People with disabilities have worse outcomes across several health indicators and have less access to healthcare compared to adults without disabilities (CDC, 2020).
- People with mental illness are at greater risk for poor cancer outcomes due to less frequent screenings and more late-stage diagnoses (National Council for Behavioral Health, N.D.)
- Transgender and gender-nonconforming adults have reported reduced access to health care because of discrimination and lack of culturally sensitive care (Tabaac et al., 2018).

## BEST PRACTICES FOR COMMUNICATING ABOUT HEALTH DISPARITIES

While communication is not a cure-all, it can serve as one important tool in an overall strategy to address health inequities. Social epidemiology is one field of study that seeks to understand how institutions, relationships and social structures such as social class, income, and race influence health (von dem Knesebeck, 2015). While research on message effects has largely focused on individual reactions to health messages, it is important to remember that audiences also process information through the shared filter of their social group or community (Viswanath & Emmons, 2006).

“...disparities in health may occur concomitantly with disparities in access to information and knowledge, that is, communication inequality.”

(Viswanath & Emmons, 2006, p. S242)

There are several evidence-based practices you can incorporate when developing messages intended to reduce health disparities. Understand that cultural background significantly impacts the lens through which we view health information. Recognize the structural determinants made up of the policies and systems that create varied opportunities for different groups based on their socioeconomic position, which thereby determines their living and working conditions, access to health care services, and psychosocial and behavior factors that result in health inequities (World Health Organization, 2008). Assess the reading level and complexity of your messages and use culturally appropriate narratives as an effective communication tool. Lastly, use messages to point people toward “on-the-ground” resources for care and don’t underestimate the importance of community-based partnerships in reducing disparities.

## MESSAGES SHOULD...

### 1. Recognize cultural differences and values. Understand that cultural background significantly impacts the lens through which we view health information

- **Conduct thorough background research on your intended audience** to develop culturally appropriate messaging and utilize the most appropriate channel of communication (Joint Center for Political and Economic Studies, 2012).
- **Integrate cultural knowledge into the style of your messages.** This requires a careful understanding of your audience and their preferred communication style (Henderson et al., 2018).

- **Incorporate cultural norms, values, and religious beliefs into health messages**, as this may be more effective than those that incorporate only surface-level cultural features, such as risk statistics (Huang & Shen, 2016).
- **Recognize that social networks can affect messaging by framing and interpreting health messages in the environment differently than the target audience.** This means your primary audience's health choices could be influenced by others who could be a secondary audience for your messages, such as a spouse or peer (Viswanath & Emmons, 2006).
- **Emphasize the importance of cross-cultural communication skills for providers**, as they play an important role in developing trust with patients and their families throughout the cancer care continuum (Derrington, Paquette, & Johnson, 2018).

## 2. Use health literacy best practices. Assess the complexity of your messages and use culturally appropriate narratives as an effective communication tool

- **Reduce health literacy barriers.** Low health literacy is associated with poorer health outcomes and lack of participation in cancer screening programs (Simmons et al., 2017).
- **Keep messages concise and use plain language** (Marquez & Ladd, 2019). Make sure the information is accurate when written in plain language (Marquez & Ladd, 2019). Online health information is often inaccessible to those with low health literacy levels (Jiang & Beaudoin, 2016).
- **Provide health information in languages appropriate for the target audience** (CDC, 2020).
- **Modify messages to make them accessible to people with disabilities whenever possible** to reduce disparities in health care access (CDC, 2020).
- **Use narrative stories.** Personal narratives can improve learner understanding of diverse lived experiences.
- **Use culturally resonant health promotion messages in narratives as they may be more effective at eliciting behavior change** (Flynn et al., 2020). Narratives can also be used to overcome health literacy challenges since they can increase comprehension while communicating scientific findings (Dahlstrom, 2014).

## 3. Point people toward on-the-ground community resources for care. Don't underestimate the importance of community-based partnerships in reducing disparities

- **Focus on promoting community-based resources for supporting cancer patients and their families.** Communication alone cannot solve health disparities. It can, however, serve as a tool to point people toward on-the-ground resources in their community. As Kagawa-Singer et al. note, "Development of community engagement in health disparities through outreach, education and research is crucial" (2010, p.33).
- **Promote clinical partnerships to deliver interventions**, like increasing health care providers' counseling of patients about smoking cessation. Interventions that improve the health care system can stimulate preventive health care behaviors, but system improvements should also ideally be accompanied by increased healthcare access. (Viswanath & Emmons, 2006).

- **Form partnership across other sectors**, such as business, labor, civic/social, urban planners, education, transportation, housing, and public safety, to address the underlying social determinant of health inequities.
- **Leverage partnerships with local media** to increase attention around health issues. This can allow improved knowledge and access to information across a wide variety of communities (Viswanath & Emmons, 2006).

## SAMPLE TWEETS AND FACEBOOK POSTS

**Tip:** These correspond to the strategies above.



Tweets	Facebook Posts	Message Category
How are you promoting #NMHM21? Last year's theme was "Active & Healthy" so lace up your sneakers and learn about the benefits of physical activity: <a href="http://bit.ly/2FYLRiF">http://bit.ly/2FYLRiF</a>	Today marks the beginning of National Minority Health Month. Last year's theme was "Active & Healthy," what's your favorite tip for integrating exercise into your busy lifestyle?: <a href="http://bit.ly/2FYLRiF">http://bit.ly/2FYLRiF</a>	3
Fighting for #healthequity starts by making partnerships in your community. Here are some tips to get started: <a href="http://bit.ly/2Gohada">http://bit.ly/2Gohada</a>	Promoting equity starts at the community level. This resource from the Centers for Disease Control and Prevention can help you take the first steps to address social determinants of health: <a href="http://bit.ly/2Gohada">http://bit.ly/2Gohada</a>	3
#HealthEquity means everyone has the opportunity to be as healthy as possible. Here are some ways to make a difference in your community: <a href="http://bit.ly/2WLkZbv">http://bit.ly/2WLkZbv</a> #NMH21	A lot of people talk about "health equity," but what does it mean for your community? This resource has programmatic ideas for reducing health disparities and achieving health equity: <a href="http://bit.ly/2WLkZbv">http://bit.ly/2WLkZbv</a>	1,3
Your #healthcare needs and preferences matter. Here's a tool to share them with your care team: <a href="http://bit.ly/TEAMPatientCards">http://bit.ly/TEAMPatientCards</a>	Every patient is unique, but how do you share your health care preferences with your doctor? These cards can help you start the conversation: <a href="http://bit.ly/TEAMPatientCards">http://bit.ly/TEAMPatientCards</a>	2
James started smoking as a kid to be like his father. In this Tips from Former Smokers video he talks about his wakeup call and why he quit for good: <a href="http://bit.ly/2lc4pOb">http://bit.ly/2lc4pOb</a> #NMHM21	Smoking can keep you from being active and healthy in many areas of your life. Take the first steps toward quitting today, it could reduce your risk for cancer and other serious health problems: <a href="http://bit.ly/2lc4pOb">http://bit.ly/2lc4pOb</a>	3
It's National Minority Cancer Awareness Week. Start by learning about cancer health disparities research and why it matters #NMH21: <a href="http://bit.ly/2kNnabF">http://bit.ly/2kNnabF</a>	Kick off National Minority Cancer Awareness Week by learning about health disparities research and why it matters: <a href="http://bit.ly/2kNnabF">http://bit.ly/2kNnabF</a>	1,2
"Support from family, friends and community members can help direct Native Americans with cancer to medical systems." Read more about cancer disparities in AI/AN communities: <a href="http://bit.ly/2uMAJ2g">http://bit.ly/2uMAJ2g</a> #MinorityHealth	Did you know that cancer is a leading cause of premature death among American Indian persons? CDC scientist Dr. Sherri Stewart discusses her personal connection to cancer and what CDC is doing to find solutions to cancer disparities in AI/AN communities: <a href="http://bit.ly/2uMAJ2g">http://bit.ly/2uMAJ2g</a>	1,2
Rural communities experience higher rates of incidence and death from some #cancers. This brief examines the issue and policies that can help: <a href="http://bit.ly/2uLT5Ag">http://bit.ly/2uLT5Ag</a>	Despite progress against cancer, some rural communities still experience higher cancer rates and cancer death rates. This policy brief covers the issue and what's being done to reduce disparities: <a href="http://bit.ly/2uLT5Ag">http://bit.ly/2uLT5Ag</a>	1

## SAMPLE TWEETS AND FACEBOOK POSTS (CONTINUED)

Tweets	Facebook Posts	Message Category
<p>What can be done to reduce health disparities among African Americans? This report from @CDCgov covers progress and where there are still gaps: <a href="http://bit.ly/2UeXAm6">http://bit.ly/2UeXAm6</a> #NMH21</p>	<p>Even with improvements over the past 20 years, African American persons still experience higher rates of cancer and other diseases. This report from CDC covers advances and opportunities to address health barriers: <a href="http://bit.ly/2UeXAm6">http://bit.ly/2UeXAm6</a></p>	1,2
<p>This interview with @theNCI funded cancer disparities researcher Dr. Electra Paskett covers why it's so important for community members to be partners in research: <a href="http://bit.ly/2TWpyhx">http://bit.ly/2TWpyhx</a></p>	<p>How can a partnership approach to research reduce cancer disparities? This interview with a National Cancer Institute-funded researcher explains why community involvement matters: <a href="http://bit.ly/2TWpyhx">http://bit.ly/2TWpyhx</a></p>	3
<p>In the U.S., Hispanic women are more likely to get #cervicalcancer than some other groups. Spread the word with this helpful fact sheet in Spanish: <a href="http://bit.ly/2UwrfGK">http://bit.ly/2UwrfGK</a> #NMHM21</p>	<p>In the United States, Hispanic women are most likely to get cervical cancer. This fact sheet in Spanish has info about prevention, screening, and diagnosis: <a href="http://bit.ly/2UwrfGK">http://bit.ly/2UwrfGK</a></p>	1,2
<p>Tobacco use is the #1 preventable cause of cancer death among Asian Americans. Thinking of quitting? Start here: <a href="http://bit.ly/2DoPLG1">http://bit.ly/2DoPLG1</a> #NMHM21</p>	<p>Smoking rates in some Asian American groups are higher than the general population, and tobacco use is the #1 cause of preventable cancer death among Asian Americans. Thinking about quitting? These resources can help: <a href="http://bit.ly/2DoPLG1">http://bit.ly/2DoPLG1</a></p>	2,3
<p>Most people of varying abilities can stay healthy by learning about and living a healthy lifestyle. Here are some tips from @CDCgov for leading a healthy life: <a href="http://bit.ly/2wD7cvY">http://bit.ly/2wD7cvY</a></p>	<p>Being healthy means the same thing for people of all abilities – getting and staying well to lead full active lives. Here are some tips from @CDCgov for leading a long and healthy life: <a href="http://bit.ly/2wD7cvY">http://bit.ly/2wD7cvY</a></p>	2,3
<p>LGBTQ young adults are nearly twice as likely to use tobacco as other adults: <a href="http://bit.ly/2D7P4ed">http://bit.ly/2D7P4ed</a> #TobaccoFreeLife #NMH21</p>	<p>LGBTQ young adults are nearly twice as likely to use tobacco as other adults. "This Free Life" is designed to show LGBTQ young adults they can be the person they want to be and live tobacco free: <a href="http://bit.ly/2D7P4ed">http://bit.ly/2D7P4ed</a></p>	2,3
<p>Diversity in research is important. Learn how understanding the health info of people from all backgrounds is central to @AllofUsResearch: <a href="http://bit.ly/2UMVTvG">http://bit.ly/2UMVTvG</a></p>	<p>Info on where you live and your family health history helps researchers better understand why people get sick or stay healthy. Here's why a diverse health research database matters for all of us: <a href="http://bit.ly/2UMVTvG">http://bit.ly/2UMVTvG</a></p>	1
<p>Pregunte sobre los antecedentes de cáncer en su familia durante las reuniones familiares. Vea esta página web para aprender más: <a href="http://bit.ly/2VYRW7s">http://bit.ly/2VYRW7s</a></p>	<p>Es importante saber los antecedentes médicos de su familia y compartirlos con su médico. Esta página web sobre el cáncer explica porque: <a href="http://bit.ly/2VYRW7s">http://bit.ly/2VYRW7s</a></p>	2

## SAMPLE TWEETS AND FACEBOOK POSTS (CONTINUED)

Tweets	Facebook Posts	Message Category
<p>استخدام التبغ هو السبب لواحدة من كل 5 حالات وفاة في الولايات المتحدة في كل سنة. التدخين يزيد من خطر الاصابة بالكثير من السرطانات: <a href="http://bit.ly/2v46EyX">http://bit.ly/2v46EyX</a></p>	<p>استخدام التبغ هو السبب لواحدة من كل 5 حالات وفاة في الولايات المتحدة في كل سنة. التدخين ليس مسبباً للوفاة فحسب فهو يؤثر على صحة الشخص بطرق عديدة منها زيادة خطر الاصابة بالكثير من السرطانات: <a href="http://bit.ly/2v46EyX">http://bit.ly/2v46EyX</a></p>	2
<p>Rural communities often face unique challenges when it comes to health care. This toolkit can help build partnerships to address these barriers: <a href="http://bit.ly/2KnLaUl">http://bit.ly/2KnLaUl</a></p>	<p>Did you know that rural communities often face challenges when it comes to accessing health care? This toolkit can help communities forge partnerships and develop sustainable programs: <a href="http://bit.ly/2KnLaUl">http://bit.ly/2KnLaUl</a></p>	3
<p>#LGBTQ cancer survivors can teach us how to improve care for all. This report highlights community voices and the measures that matter to patients: <a href="http://bit.ly/2laHMdB">http://bit.ly/2laHMdB</a></p>	<p>For many LGBTQ persons, a cancer diagnosis brings up questions about treatment and recovery, and also social stigma and access to care. This report highlights the measures that matter to patients: <a href="http://bit.ly/2laHMdB">http://bit.ly/2laHMdB</a></p>	2,3
<p>These resources from @CDCgov can help organizations address health literacy and improve communication: <a href="http://bit.ly/2G8jjm1">http://bit.ly/2G8jjm1</a> #NMH21</p>	<p>Organizations can increase communication effectiveness when they recognize and bridge cultural differences that may contribute to miscommunication: <a href="http://bit.ly/2G8jjm1">http://bit.ly/2G8jjm1</a></p>	1,2
<p>Many refugees face barriers to health care access. Refugee Health Profiles from @CDCgov can help stakeholders determine appropriate interventions and services for certain #refugee groups. <a href="http://bit.ly/38AMk5Q">http://bit.ly/38AMk5Q</a></p>	<p>Acculturation and a complex health care system can create health care access barriers for refugees. Refugee Health Profiles from @CDCgov can help clinicians and public health providers determine appropriate interventions and services for certain refugee groups. <a href="http://bit.ly/38AMk5Q">http://bit.ly/38AMk5Q</a></p>	1,2
<p>Remind patients of all backgrounds that they are welcome in your organization with these posters: <a href="http://bit.ly/YouAreWelcomePosters">http://bit.ly/YouAreWelcomePosters</a> #NMH21</p>	<p>#CancerCare Providers: This poster serves as a helpful reminder that patients of all backgrounds, identities, and national origins are welcome in your office: <a href="http://bit.ly/YouAreWelcomePosters">http://bit.ly/YouAreWelcomePosters</a></p>	2
<p>Looking for promising programs to promote cervical cancer screening among Hispanic women? Learn more about the AMIGAS program: <a href="http://bit.ly/2Gal1Su">http://bit.ly/2Gal1Su</a></p>	<p>Check out AMIGAS, a promising intervention designed to address health equity and increase cervical cancer screening among Hispanic women: <a href="http://bit.ly/2Gal1Su">http://bit.ly/2Gal1Su</a></p>	1,2
<p>Looking for additional resources to promote #HealthEquity beyond #NMHM21? This toolbox from @GWCancer can help: <a href="http://bit.ly/GWHealthEquityToolbox2018">http://bit.ly/GWHealthEquityToolbox2018</a></p>	<p>Promoting health equity doesn't end with National Minority Health Month. Keep the momentum going with this Health Equity Toolbox from the GW Cancer Center: <a href="http://bit.ly/GWHealthEquityToolbox2018">http://bit.ly/GWHealthEquityToolbox2018</a></p>	1

## SAMPLE TWEETS AND FACEBOOK POSTS FOR COVID-19

Tweets	Facebook Posts	Message Category
Racial and ethnic minority groups are being disproportionately affected by #COVID19. Learn what you can do to help eliminate this disparity: <a href="http://bit.ly/3tyDYas">http://bit.ly/3tyDYas</a>	There is increasing evidence that some racial and ethnic minority groups are disproportionately impacted by COVID-19. Learn what we can all do to eliminate this disparity: <a href="http://bit.ly/3tyDYas">http://bit.ly/3tyDYas</a>	1
#COVID19 heavily impacts racial and ethnic minority groups. #Clinicians can partner with communities to reduce this burden: <a href="http://bit.ly/2Z54xpZ">http://bit.ly/2Z54xpZ</a>	COVID-19 heavily impacts African American, Native American, and Hispanic communities. Clinicians can partner with communities to reduce this burden: <a href="http://bit.ly/2Z54xpZ">http://bit.ly/2Z54xpZ</a>	3
To combat #COVID19, #healthcare professionals should provide easy to access information in multiple languages: <a href="http://bit.ly/3pAiRI5">http://bit.ly/3pAiRI5</a>	Healthcare professionals should provide information in multiple languages and at a low literacy level to combat COVID-19: <a href="http://bit.ly/3pAiRI5">http://bit.ly/3pAiRI5</a>	2
During #COVID19, it is integral that populations who have been marginalized continue to safely receive #cancer screenings: <a href="http://bit.ly/3tOVBTS">http://bit.ly/3tOVBTS</a>	During the COVID-19 pandemic, it's important that individuals who have been marginalized, such as racially diverse people, receive cancer screenings to avoid a missed or delayed diagnosis: <a href="http://bit.ly/3tOVBTS">http://bit.ly/3tOVBTS</a>	1
#Healthcare providers- Cross-cultural communication is crucial in discussing #COVID19 information prevention: <a href="http://bit.ly/3pdmC9B">http://bit.ly/3pdmC9B</a>	Cross-cultural communication is crucial in discussing COVID-19 information and prevention. Healthcare providers must practice cultural awareness with patients and communities: <a href="http://bit.ly/3pdmC9B">http://bit.ly/3pdmC9B</a>	1
#Healthcare professionals- Ensure that information on #COVID19 is easy to understand and accessible: <a href="http://bit.ly/3tNRjMq">http://bit.ly/3tNRjMq</a>	It is important for healthcare professionals to communicate information on COVID-19 in a simple and accessible format: <a href="http://bit.ly/3tNRjMq">http://bit.ly/3tNRjMq</a>	2
Communities can take action to slow the spread of #COVID19: <a href="http://bit.ly/2NfsKHw">http://bit.ly/2NfsKHw</a>	Communities can take action to slow the spread of COVID-19 through action to reduce infection: <a href="http://bit.ly/2NfsKHw">http://bit.ly/2NfsKHw</a>	3
#Cancer patients and survivors, including those who have been marginalized, may be at higher risk if they get #COVID19. Lower your risk of infection by following @CDCgov guidance: <a href="http://bit.ly/2JPXH3p">http://bit.ly/2JPXH3p</a>	Cancer patients and survivors, including those in populations that have been marginalized, may be at higher risk if they get COVID-19. Lower your risk of infection by following this CDC guidance: <a href="http://bit.ly/2JPXH3p">http://bit.ly/2JPXH3p</a>	1

## SAMPLE LINKEDIN POSTS

LinkedIn Message	Message Category
Healthcare Providers: What does it mean to practice patient-centered care? This poster provides practical ways to make sure patients feel welcome in your exam room: <a href="http://bit.ly/TEAMProviderPosters">http://bit.ly/TEAMProviderPosters</a>	1
The GW Cancer Center offers a no-cost online course on addressing the need for LGBTQ-affirming cancer care with a focus on prostate cancer survivors: <a href="http://bit.ly/3hBHfQl">http://bit.ly/3hBHfQl</a>	1
Promoting health equity should go beyond Minority Health Month in April. This Health Equity Toolbox from the GW Cancer Center can help: <a href="http://bit.ly/GWHealthEquityToolbox2018">http://bit.ly/GWHealthEquityToolbox2018</a>	1,2,3
Learn how COVID-19 impacts diversity and inclusion in your organization, and how to be an inclusive leader through this pandemic: <a href="https://bit.ly/373wWkH">https://bit.ly/373wWkH</a>	1
Healthcare Providers: During COVID-19, prioritize those most at-risk for delayed cancer diagnosis or complications, including racial and ethnic minority groups: <a href="http://bit.ly/3a7yyeZ">http://bit.ly/3a7yyeZ</a>	1
Healthcare Providers: Cancer screening can save lives, but only if individuals get tested. During the COVID-19 pandemic, utilize telehealth services to reach minority populations at risk for both COVID-19 and cancer: <a href="http://bit.ly/36DWDrK">http://bit.ly/36DWDrK</a>	1,3



Remember that other suggestions on social media strategies, links to images and graphics, analytic tools, and a glossary of social media terms can be found in the GW Cancer Center's Social Media Guide at <http://bit.ly/GWCCSMTKs>

## ADDITIONAL TOOLS AND RESOURCES

Tool	Description
<a href="#">Affordable Care Act Enrollment Assistance for LGBT Communities</a>	This resource guides health professionals in helping LGBT people understand health insurance options, particularly mental health and substance abuse benefits and services under the Affordable Care Act.
<a href="#">Advancing Sexual and Gender Minority Measures in the Behavioral Risk Factor Surveillance System</a>	This article highlights the critical role of surveillance systems in informing health care recommendations and ensuring LGBT health disparities are measured and analyzed.
<a href="#">Alaska Native Tribal Health Consortium Cancer Program</a>	This source links to the Alaska Native Tribal Health Consortium Cancer Program website.
<a href="#">American Journal of Public Health American Indian and Alaska Natives Special Supplement</a>	This supplemental issue of the American Journal of Public Health is devoted to American Indian and Alaska Native Mortality, and contains articles on health promotion and AI/AN mortality caused by various cancers.
<a href="#">Cancer Incidence Among American Indian and Alaska Native Populations</a>	This US Cancer Statistics data brief includes cancer incidence data among American Indian and Alaskan Natives residing in Urban Indian Health Organization Service Areas, 2008-2017.
<a href="#">CDC Vital Signs: Hispanic Health</a>	This national study from the CDC focuses on health topics affecting Latinos in the US, including causes of death, disease prevalence, risk factors, and access to health services.
<a href="#">Community Health Status Indicators (CHSI)</a>	This dataset provides key health indicators for local communities and encourages dialogue about actions that can be taken to improve community health.
<a href="#">Culture and Health Literacy Tools</a>	Organizations can increase communication effectiveness when they recognize and bridge cultural differences that may contribute to miscommunication.
<a href="#">Cultural &amp; Linguistic Competence Resource Library for Eliminating Behavioral Health Disparities</a>	A collection of toolkits, webinars, and resources to improve cultural and linguistic competency for providers. Topics include communication tools, tools for equity and inclusion, and organizational plans and budgeting tools.
<a href="#">Determinants of Health Fact Sheet</a>	SelfMade Health Network created the Determinants of Health Fact Sheet to further the discussion and help address the known environmental, sociological, and financial impairments to health.
<a href="#">Effective Communication for Healthcare Teams</a>	This interactive training course aims to raise the quality of interactions between health care professionals and patients by providing a guide to understanding health literacy, cultural competency, and limited English proficiency.
<a href="#">Equitable Enforcement to Achieve Health Equity</a>	Read the full guide to learn more about equitable options for administrative, civil, and criminal enforcement in a wide variety of public health policy areas.
<a href="#">National Healthcare Quality and Disparities Report: 2018</a>	This report, mandated by Congress, provides a comprehensive overview of the quality of healthcare received by the general U.S. population and disparities in care experienced by different racial and socioeconomic groups.

## REFERENCES

- Alcaraz, K.I., Wiedt, T.L., Daniels, E.C., Yabroff, K.R., Guerra, C.E., & Wender, R.C. (2020). Understanding and addressing social determinants to advance cancer health equity in the United States: A blueprint for practice, research, and policy. *CA: A Cancer Journal for Clinicians*, 70(1), 31-46. <https://doi.org/10.3322/caac.21586>
- Centers for Disease Control and Prevention. (2019). Cancer facts for demographic groups: Racial or ethnic variations [webpage]. Retrieved from <https://www.cdc.gov/cancer/dcpc/data/>
- Centers for Disease Control and Prevention. (2020). Culture & Health Literacy. Retrieved from <https://www.cdc.gov/healthliteracy/culture.html>
- Centers for Disease Control and Prevention. (2020). Disability and Health Inclusion Strategies. Retrieved from <https://www.cdc.gov/ncbddd/disabilityandhealth/disability-strategies.html>
- Centers for Disease Control and Prevention. (2020). Disability and Health Related Conditions. Retrieved from <https://www.cdc.gov/ncbddd/disabilityandhealth/relatedconditions.html>
- Dahlstrom, M. F. (2014). Using narratives and storytelling to communicate science with nonexpert audiences. *Proceedings of the National Academy of Sciences of the United States of America*, 111(Supp 4), 13614-13620. <http://dx.doi.org/10.1073/pnas.1320645111>
- Derrington, S.F., Pauquette, E., & Johnson, K.A. (2018). Cross-cultural interactions and shared decision-making. *Official Journal of the American Academy of Pediatrics*; 142 (Supplement 3) S187-S192. <https://doi.org/10.1542/peds.2018-0516J>
- Flynn, P.M., Betancourt, H., Emerson, N.D., Nunez, E.I., Nance, C.M. (2020). Health professional cultural competence reduces the psychological and behavioral impact of negative healthcare encounters. *Cultural Diversity and Ethnic Minority Psychology*. Vol. 26, No.3, 271-279. <http://dx.doi.org/10.1037/cdp0000295>
- Hall, W. J., Chapman, M. V., Lee, K. M., Merino, Y. M., Thomas, T. W., Payne, B. K., ... & Coyne-Beasley, T. (2015). Implicit racial/ethnic bias among health care professionals and its influence on health care outcomes: a systematic review. *American journal of public health*, 105(12), e60-e76. <http://dx.doi.org/10.2105/AJPH.2015.302903>
- Henderson, S., Horne, M., Hills, R., & Kendall E. (2018). Cultural competence in healthcare in the community: A concept analysis. *Health and Social Care in the community*. <https://doi.org/10.1111/hsc.12556>
- Huang, Y., Shen, E. (2016). Effects of cultural tailoring on persuasion in cancer communication: A meta-analysis. *Journal of Communication*, 66(4), 694-715. <https://doi.org/10.1111/jcom.12243>
- Jiang, S. & Beaudoin, C.E. (2016). Health literacy and the internet: An exploratory study on the 2013 HINTS survey. *Computers in Human Behavior* 58, 240-248. <http://dx.doi.org/10.1016/j.chb.2016.01.007>
- Joint Center for Political and Economic Studies. (2012). Minorities, mobile broadband, and the management of chronic diseases. Retrieved from

<https://jointcenter.org/research/minoritiesmobile-broadband-and-management-chronic-diseases>

- Kagawa-Singer, M., Valdez Dadia, A., Yu, M. C., & Surbone, A. (2010). Cancer, culture and health disparities: Time to chart a new course? *CA: A Cancer Journal for Clinicians*, 60(1), 12-39. <http://dx.doi.org/10.3322/caac.20051>
- Marquez, L.L. & Ladd, D.L. (2019). Promoting health literacy: finding consumer health resources and writing health materials for patients. *Journal of Hospital Librarianship*, p. 156-164. <https://doi.org/10.1080/15323269.2019.1585777>
- National Council for Behavioral Health. (n.d.). National behavioral health network for tobacco and cancer control. Retrieved from <https://www.thenationalcouncil.org/topics/national-behavioral-health-network-for-tobacco-cancer-control/>
- Simmons, R.A., Cosgrove, S.C., Romney, M.C., Plumb, J.S., Brawer, R.O., Gonzalez, E.T., Fleisher L.G. & Moore, B.S. (2017). Health literacy: Cancer prevention strategies for early adults. *American Journal of Preventative Medicine*. Volume 53, Issue 3, Supplement 1, Pages S73-S77. <https://doi.org/10.1016/j.amepre.2017.03.016>
- Sohn, Heeju. (2017). Racial and Ethnic Disparities in Health Insurance Coverage: Dynamics of Gaining and Losing Coverage over the Life-Course. *Population Research and Policy Review*; 36(2): 181-201. <http://dx.doi.org/10.1007/s11113-016-9416-y>
- Tabaac, A. R., Sutter, M. E., Wall, C. S. J., & Baker, K. E. (2018). Gender identity disparities in cancer screening behaviors. *American Journal of Preventive Medicine*, 54(3), 385-393. <http://dx.doi.org/10.1016/j.amepre.2017.11.009>
- Viswanath, K. & Emmons, K. M. (2006). Message effects and social determinants of health: Its application to cancer disparities. *Journal of Communication*, 56, S238-S264. <http://dx.doi.org/10.1111/j.1460-2466.2006.00292.x>
- von dem Knesebeck, Olaf. (2015). Concepts of social epidemiology in health services research. *BMC Health Services Research*; 15:357. <http://dx.doi.org/10.1186/s12913-015-1020-z>
- Williams, D.R. & Cooper, L.A. (2019). Reducing Racial Inequities in Health: Using What We Already Know to Take Action. *International Journal of Environmental Research and Public Health*; 16(4): 606. <http://dx.doi.org/10.3390/ijerph16040606>
- World Health Organization. (2008). Closing the gap in a generation: Health equity through action on the social determinants of health. Final Report of the Commission on Social Determinants of Health. Retrieved from [https://apps.who.int/iris/bitstream/handle/10665/43943/9789241563703\\_eng.pdf;jsessionid=D3FA55519F6C5F11FCC1D7266E93AFB8?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/43943/9789241563703_eng.pdf;jsessionid=D3FA55519F6C5F11FCC1D7266E93AFB8?sequence=1)