When we embarked on Finding Answers a decade ago, research already showed that racial and ethnic minorities in America often receive lower-quality medical care than white patients. The challenge was that very little was known about how to identify and reduce those disparities.

To help fill this knowledge gap, the Robert Wood Johnson Foundation (RWJF) funded Finding Answers to seek and evaluate what works—and doesn’t—to eliminate disparities. We created an evidence-based framework to improve health equity and speed its implementation, and identified best practices for disparities reduction. We then created a roadmap that health care organizations, technical assistance providers, and policy makers can follow, and helped identify the most pressing issues the field now needs to address.

This work hasn’t been easy but it has moved the field beyond documenting disparities to building the knowledge base to take appropriate action. We played a part in creating a culture that prioritizes reducing disparities as an integral part of quality improvement, not something done on the side.

**In the ensuing years, Finding Answers and our grantees discovered some important truths.**

The following compilation outlines and highlights some of the learnings.

While the initial Finding Answers grant is ending, our work is not. Starting in the fall of 2015 the team at the University of Chicago will transition to a new RWJF program focused on reducing disparities through payment and delivery system reforms. We must align incentives to reduce disparities and address social factors, because a business case to achieve equity motivates and sustains improvement.

Our name will stay the same, as will our ultimate goal: for all Americans—regardless of the color of their skin, ethnic background, native tongue or other demographic differences—to receive the highest-quality care possible.

**Marshall H. Chin, MD, MPH, FACP**  
*Director*
Achieving health equity is central to RWJF’s vision for a Culture of Health. To improve the quality of health care overall, we will have to maintain a specific focus on the quality of health care for people from different racial and ethnic backgrounds.

– Anne Weiss
Robert Wood Johnson Foundation

Every situation is unique. The same disparities can arise in different settings for different reasons.

Every organization and region has its own staff, access to resources, payers, community demographics, and characteristics. This limits the effectiveness of ‘one-size-fits-all’ interventions designed to work everywhere and for everyone. To address this, Finding Answers created The Roadmap, a one-of-its-kind framework that guides clinics and hospitals through the process of designing and implementing programs to reduce disparities.
The quality of most organizations’ data on patient race, ethnicity, language (REL), and other demographic criteria is low, but don’t let that slow you down. Those seeking change should continue to move forward on multiple fronts simultaneously while working on improving data collection.

Whether it is because of inadequate electronic health records or patient registration processes, most organizations’ REL data are poor quality. This makes it difficult to stratify, analyze, and understand clinical performance data to address disparities. To discover and address disparities in patient care and health outcomes, Finding Answers created a Using Data guide. The guide recommends strategies to effectively organize and interpret REL data.
Achieving equity must be an integral part of quality improvement initiatives, not a separate activity. The “simpler” it is to address disparities, the more likely you are to do it.

Most organizations are overwhelmed with all of the changes in the health care system and have multiple, competing priorities. They can minimize the additional work of addressing disparities by incorporating efforts into existing high-priority quality improvement activities, such as obtaining PCMH certification. At the end of the day, equity and quality are connected. Equity is a cross-cutting component of quality. As such, it needs to be a cross-cutting component of quality improvement.

Equity cannot be siloed. It must be part of existing quality improvement strategies, because quality is only achieved when everyone works together.

– Jeroan Allison
University of Massachusetts

TRUTH:
Equity and quality improvement are one and the same. Incorporate goals to reduce disparities into existing activities.
Understanding your patients’ culture is difficult, but effort yields rich rewards.

Cultural competency training is critical, but organizations need to go beyond it to make real progress.

Patients’ cultural backgrounds influence how they experience illness, interact with the care delivery system, and respond to care. Cultural competency training is critical, but is not enough to improve clinical outcomes. Rather, health care organizations must systematically identify and use cultural practices, perspectives, and environments to change processes and the systems in which patients and providers interact in order to reduce disparities caused by cultural differences or misunderstandings. Finding Answers created a Responding to Culture strategy overview that describes a systematic approach that health care organizations can follow to become more knowledgeable and responsive to cultural issues—beyond cultural competence training.
Every community is unique. Involving diverse patients who understand community needs is critical to implementation.

– Rachel Gonzales-Hanson
Community Health Development, Inc.

Patients must be at the table to solve disparities. Include patients from start to finish.

It takes more than just engaging patients in their care. Disparities are reduced when patients actively design and implement interventions.

The success of many projects relies on patients’ active role in efforts to reduce disparities and improve quality. No one understands the patient perspective better than patients themselves.
Reducing disparities requires a culture change. Addressing disparities helps build a Culture of Health.

Success requires organizational change and concrete activities to ensure sustainability. Otherwise, efforts to reduce disparities will ultimately become siloed, with limited effectiveness.

Even the most well-intentioned effort to reduce disparities is less likely to succeed if it’s not part of a broader culture of equity. An organization has a strong culture of equity when staff members recognize that disparities exist within the organization, and view inequality as an injustice that must be addressed.

TRUTH: Reducing disparities requires a culture change. Addressing disparities helps build a Culture of Health.

You have to start by changing the dialogue about addressing disparities. To do that you need to take a systematic look at disparities throughout the organization.

– Romana Hasnain-Wynia, PhD
   Patient Centered Outcomes Research Institute
Finding Answers can guide efforts to reduce disparities.

FEATURED TOOLS AND RESOURCES

**Roadmap to Reduce Disparities.** The Roadmap provides a standardized, six-step framework for incorporating disparities-reduction into the quality improvement efforts of health care organizations.

**Promote Equity.** This section of the website provides best practices, examples, and other equity-related evidence. It provides resources demonstrating the concept that incorporating equity into quality improvement activities and institutional policies is strategic and beneficial.

**Implement change.** This section of the website contains products and tools for organizations that both provide direct clinical care and seek to identify and reduce disparities in the health and health care of their patients.

**Teach Others.** This area of the website provides tools and resources designed to teach others how to reduce disparities in health and health care by incorporating equity into quality improvement activities.

**Continuing Medical Education (CME) module.** This area educates medical professionals on disparities and offers effective strategies to increase equity.
While the existence of racial and ethnic health care disparities has been firmly established, health care systems need tools, strategies and interventions to reduce these differences. In 2005, the Robert Wood Johnson Foundation (RWJF) launched Finding Answers: Disparities Research for Change to identify practical steps to reduce racial and ethnic disparities.