Prioritizing Health Equity in Mississippi Communities

Mississippi Roadmap to Health Equity relies on local residents to identify community health priorities and forges partnerships with the health department, educators, and other sectors to reduce health disparities in the state.

1 Mississippi has some of the nation’s poorest health indicators by almost every ranking—of obesity, high school graduation rates, incidence of diabetes, infant mortality, access to dental care, preventable hospitalizations, occupational fatalities, and the number of children living in poverty—and when the numbers are broken down by race, even greater disparities emerge.

2 The Mississippi Roadmap to Health Equity grew out of a visit by public health researchers from Jackson State University and the University of North Carolina at Chapel Hill, who came to the capital city of Jackson to explore health disparities in the region. A community steering committee formed soon after to bring local voices into the process of improving health outcomes for all.

3 As the Roadmap project was being developed, the Mississippi State Department of Health was reaching out to other stakeholders in government, health systems, and education to think about new ways to build health in Mississippi. They identified four core priorities: building a Culture of Health, reducing chronic disease, promoting educational attainment, and lowering rates of infant mortality.

4 Recognizing overlapping priorities, the health department asked Roadmap to take the lead on a joint proposal aimed at reducing infant mortality by encouraging breastfeeding. The health department then brought in the University of Mississippi Medical Center as a partner, leading to the launch of Transforming Breastfeeding Culture in Mississippi in 2017.

5 Now, the health department and Roadmap staff meet monthly, not only to talk about expanding the breastfeeding effort but also to consider other collaborative opportunities to improve health and well-being for all in Mississippi.

“What we had been doing was just not working. We really had to start looking at the social determinants of health and learn how to work with communities to change the climate.”

Kathy Burk, Mississippi State Department of Health