



Accelerating Health Equity for Kids— A National Minority Health Month Twitter Chat Script

Every child, no matter their background, deserves a chance to lead a healthy and happy life. This National Minority Health Month, let's find ways to accelerate health equity for children. Join the [Office of Minority Health](#), [The Children's Partnership](#), the [California Pan-Ethnic Health Network](#), and [First Focus](#) for a Twitter Chat to discuss ways we can end health disparities for our nation's kids.

DATE: Thursday, April 21, 2016

TIME: 11 am PT / 2 pm ET

HOSTS: [@MinorityHealth](#), [@CPEHN](#), [@First Focus](#), [@KidsPartnership](#)

DIRECTIONS: When the Twitter Chat begins, follow **#NMHM16**. When you see a question (Q1, Q2, etc.), respond with your answer (A1, A2, etc.) and include **#NMHM16**. We have some sample answers in this script, but feel free to create your own.

TCP: Welcome to the Kids + **#NMHM16** Twitter Chat! Here with hosts @MinorityHealth, @CPEHN, & @First_Focus. **#InvestInKids**

TCP: Every child, no matter their background, deserves to lead a healthy and happy life. **#NMHM16**

TCP: The fight to end health disparities is a fight to give every child an equal chance. **#NMHM16 #InvestInKids**

TCP: This **#NMHM16**, let's talk about how we can better **#InvestInKids**.

TCP: Who else is with us today? **#NMHM16 #InvestInKids**

TCP: We all have a role 2 play 2 promote health equity 4 all kids. Let's get started! Don't forget #NMHM16 w/ your answers+resources

TCP: Q1: The #NMHM16 theme is Accelerating Health Equity for the Nation. Where are we in advancing health equity for kids of color?

Partner Response:

A1: More kids of color have coverage than ever. The national kids uninsured rate fell to 6%: <http://bit.ly/1PSpAkW> #NMHM16

A1: In CA, the child uninsured rate has been reduced to 4.5%. That includes huge gains in coverage for kids of color. #NMHM16

A1: Thanks to #ACA Medicaid expansion, more kids of color got covered when their newly eligible parents enrolled. #NMHM16

TCP: Q2: Yet we know inequities exists. Where do we have more work to do improve the health of kids of color?

Partner Response:

A2: Currently, 19 states have chosen not to take up #ACA Medicaid expansion, meaning fewer kids of color enrolled. #NMHM16

A2: To improve the overall health communities of color, #oralhealth must be central: [@CPEHN](http://buff.ly/25sCJbE) #NMHM16

A2: Uninsured parents in communities of color often unaware that kids could be covered through Medicaid/CHIP: <http://bit.ly/1Mb2zus> #NMHM16

TCP: Q3: Why is now an especially important time to advance health equity nationwide? #NMHM16

Partner Response:

A3: It's official. There are now more children of color under age 5 than white children. #HealthEquity <http://bit.ly/1JS4vmx> #NMHM16

A3: In California, Latinos are the largest demographic group. #HealthEquity ensures a prosperous CA. <http://lat.ms/1NS7Zqz> #NMHM16

A3: @thinkprogress says kids of the future are super-diverse. We must act now to give all a healthy start. <http://bit.ly/1VmyjQc> #NMHM16

A3: "The health of our children of color is critical to the future health of CA & the nation" @mayraealvarez <http://bit.ly/22axpoS> #NMHM16

TCP: Q4: What are some of the biggest drivers of disparities in health outcomes for kids of color? #NMHM16

Partner Response:

A4: Unhealthy environments make 4 unhealthy kids: <http://bit.ly/1Tp11P8> #NMHM16 #InvestinKids

A4: Child poverty and related toxic stress can lead to lifelong health consequences: <http://buff.ly/1SxNVtV> @ChildDefender. #NMHM16

A4: Children who experience toxic stress and #ACEs are at higher risk for health problems: <http://buff.ly/1USHvfF>. @CYWSanFrancisco #NMHM16

A4: Insurance can be esp. confusing for newly insured & those who speak another language. @CMS Coverage2Care can help! #NMHM16

TCP: Q5: #ACA has led to huge health coverage gains for kids. What's next to ensure all kids can access coverage? #NMHM16

Partner Response:

A5: Undocumented immigrants are still locked out of the quality, affordable coverage provided under #ACA. <http://buff.ly/1Tz4qLk> #NMHM16

A5: Some states impose 5-year waiting period on legally residing immigrant kids before they can enroll in Medicaid/CHIP #NMHM16

A5: We need to reach families where they are by partnering w/ schools, businesses & community orgs to help them enroll. #NMHM16

TCP: Q6: How have communities of color, and particularly kids, benefitted from #ACA coverage expansions & protections? #NMHM16

Partner Response:

A6: Millions more kids of color now have access to free preventive care thanks to #ACA. #NMHM16

A6: Uninsured rate for African Americans fell by 6.8% after 1st 2 #ACA open enrollment periods: <http://1.usa.gov/21FrKHg> #NMHM16

A6: 4.2 M Latinos gained coverage, lowering the Latino uninsured rate by 7.7%: <http://1.usa.gov/1MI48Qy> #NMHM16

A6: 4.3 M Asian Americans now have access to expanded preventive services w/ no cost sharing: <http://1.usa.gov/236UafI> #NMHM16

TCP: Q7: What barriers can be removed to ensure that all families can #GetCovered? #NMHM16 #InvestInKids

Partner Response:

A7: Expand access to coverage to undocumented immigrants. Healthy communities make a stronger future. #NMHM16 #InvestInKids

A7: In CA #Health4AllKids provides Medi-Cal for 170,000+ undoc kids. Time for #Health4All & coverage expansion 2 adults.#NMHM16

A7: Investing in culturally/linguistically competent enrollment efforts can help more families #GetCovered. #NMHM16

A7: Partner w/ schools to connect kids & families in underserved communities to trusted info about enrollment. #NMHM16

TCP: Q8: What are some of the barriers that prevent kids in communities of color from accessing health care? #NMHM16 #InvestInKids

Partner Response:

A8: Many communities of color don't have enough providers that specialize in kid-specific care. #NMHM16

A8: Kids & parents may lack transportation, preventing them from getting to the doctor when they need to. #NMHM16 #InvestInKids

A8: High out-of-pocket costs and cost sharing can prevent families from using their health coverage. #NMHM16 #InvestInKids

A8: Kids need providers who speak their language and understand their community. Many don't have that. #NMHM16 #InvestInKids

TCP: Q9: Why is health equity particularly important for kids? #NMHM16
#InvestInKids

Partner Response:

A9: Every child deserves a healthy start. #HealthEquity is the foundation.
#NMHM16

A9: Children are our future. We need to #InvestInKids and ensure #HealthEquity for the strength of our country. #NMHM16

A9: Communities of color are a growing part of our population. To not #InvestInKids & #HealthEquity would be a mistake. #NMHM16

A9: Besides our moral obligation, 1 study showed kids w/ #Medicaid paid more in taxes later: <http://nyti.ms/1qbhmM5> #NMHM16

A9: In CA, 3/4 of kids are from communities of color. Our state's future will be in their hands. #NMHM16

TCP: Q10: How can we promote health equity for children in communities of color?
#NMHM16 #InvestInKids

Partner Response:

A10: Our policymakers need to #InvestInKids and make sure they have the tools they need to reach their potential. #NMHM16

A10: By addressing bias & stereotypes in the health care system, we can ensure #HealthEquity for our kids. #NMHM16 #InvestInKids

A10: Continuing to support #CHIP, #Medicaid & #ACA are key to giving children of color a healthy start. #NMHM16 #InvestInKids

A10: Reaching diverse families will require ongoing investment in targeted, culturally competent, innovative outreach. #NMHM16

A10: Schools, faith orgs, clinics & small businesses are imp. partners to help diverse families get health care. #NMHM16