

THE NIH COMMON FUND

Bold Science, Catalyzing Discoveries



Community Partnerships to Advance Science for Society (ComPASS)

To advance the science of health disparities and health equity research, the National Institutes of Health (NIH) Common Fund launched the ComPASS Program.

The goals of ComPASS are to:

1. Study ways to reduce health disparities by addressing underlying structural factors within communities.
2. Develop a new research model for NIH where the projects are led by community organizations in collaboration with research partners.

ComPASS has three initiatives:



Community-Led, Health Equity Structural Interventions

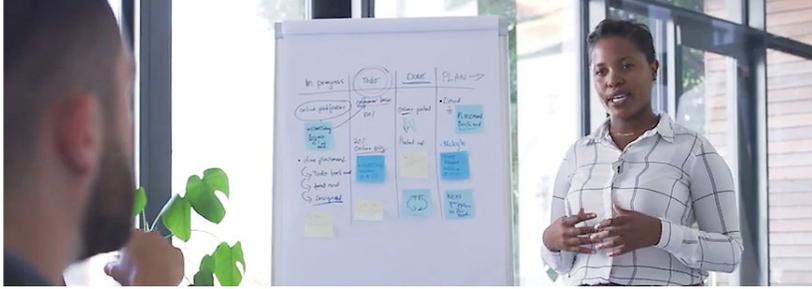
The ComPASS program funds 25 Community-Led, Health Equity Structural Intervention (CHESI) projects that engage communities in research across the United States. NIH directly funded research projects led by community organizations, which will work in collaboration with research partners to study ways to address the underlying structural factors within communities that affect health. These factors may include access to quality health care and healthy food, employment opportunities, safe spaces, and transportation. The social, physical, and economic conditions where people are born, grow, live, work, age, and play are also called social determinants of health and can contribute to health inequities.

ComPASS Coordinating Center

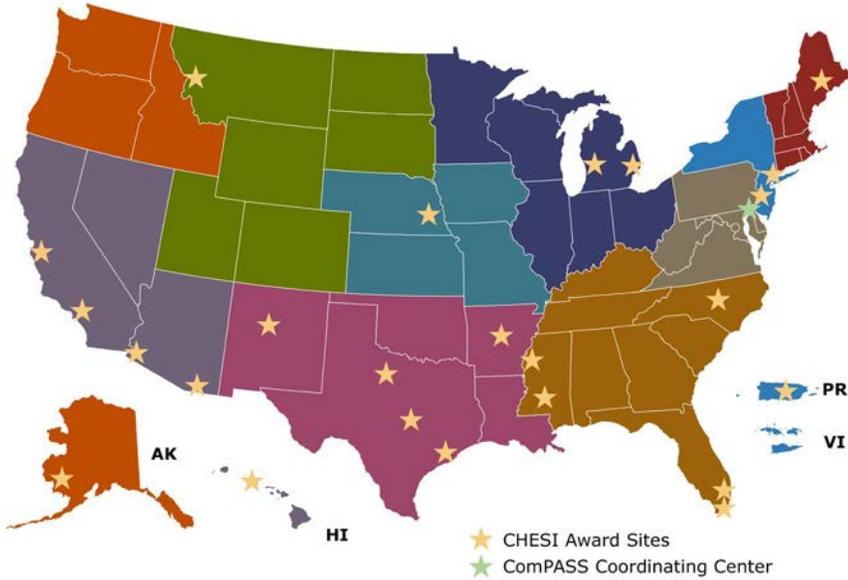
The ComPASS Coordinating Center (CCC) is responsible for providing oversight for the planning, implementation, and evaluation of the ComPASS program. It will direct multiple components of the program and provide the administrative assistance, data, and training needed for ComPASS community-led research projects to achieve their unique goals.

Health Equity Research Hubs

ComPASS Health Equity Research Hubs (Hubs) will provide localized technical assistance and scientific support for the CHESI projects, as well as partnership support, research capacity-building, and training designed in collaboration with the CCC. Hubs will be awarded and begin work in 2024.



ComPASS Awardee Locations and States/Territories Represented in the CHESI Projects by HHS Region

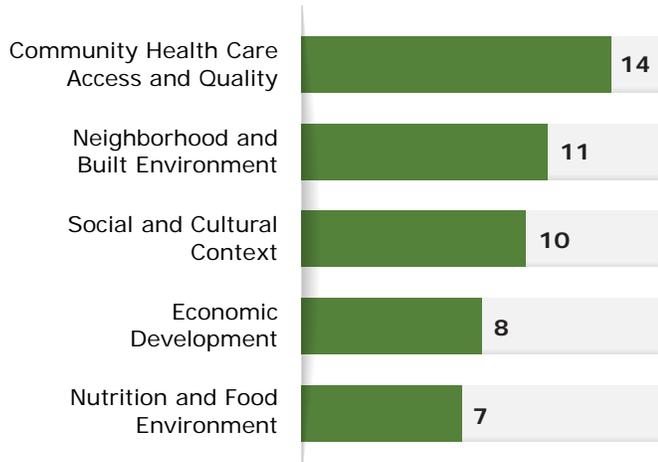


HHS Region	# of Projects	States/Territories Represented in Interventions*
1	1	ME
2	4	NJ, NY (2), PR
3	3	PA, MD (2), (and DC)
4	5	NC, MS (2), FL (2)
5	3	MI (3)
6	6	AR, TX (4), NM
7	1	MO
8	1	MT
9	5	CA (2), HI, AZ (2)
10	1	AK

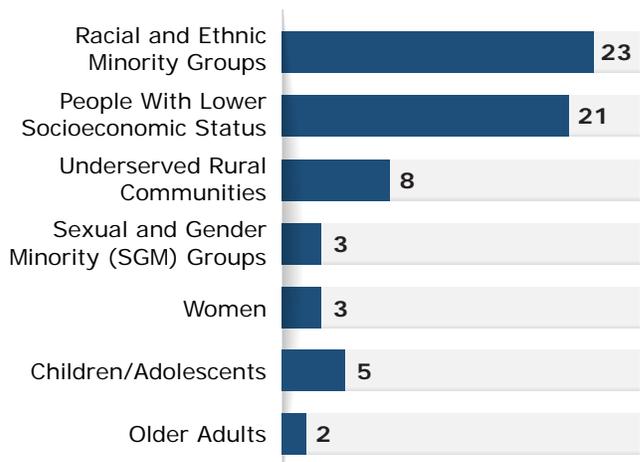
*Note that some interventions are taking place in multiple states.

The 25 CHESI Structural Factors and Participant Populations

Social Determinants of Health and Structural Factors of the Projects



Populations That Experience Health Disparities and Other Participant Populations*



* Note that CHESI projects that focus on more than one social determinants of health and/or population experiencing health disparities are counted more than once.

Connect With Us!



For more information, visit the NIH Common Fund ComPASS website at commonfund.nih.gov/compass.



Learn more by viewing the [ComPASS Video Overview](#).



To receive ComPASS program announcements and information about funding opportunities, join the [ComPASS listserv](#).





ComPASS Coordination Center

Project Leaders: Amy Carroll-Scott, Jan Marie Eberth

Institution: [Drexel University](#)

Partners: [The University of New Mexico](#) and [Mathematica](#)

Description: The ComPASS Coordination Center will provide oversight for the planning, implementation, and evaluation of the ComPASS Program. It will direct multiple components of the program and provide the administrative assistance, data, and training needed to help ComPASS community-led research projects achieve their unique goals.

ComPASS Community-Led, Health Equity Structural Intervention (CHESI) Research Projects

Improving Health Outcomes Through Systems and Policy Changes in Maine



Project Leader: Ralph Cammack

Organization: Wabanaki Public Health & Wellness

Structural Factors: Food security, housing quality

Research Partner: Patrik Johansson, Washington State University

Intervention Location: Bangor, Maine

Description: The project will explore approaches to improve the accessibility of fresh, traditional, and culturally appropriate foods for Wabanaki families. The researchers will study how these changes reduce food insecurity and improve health outcomes—including diabetes, cardiovascular disease, and obesity—in Wabanaki communities.

Addressing Systemic Barriers Impacting Health in Community Health Clinic Communities



Project Leader: Andrea Caracostis

Organization: Asian American Health Coalition of the Greater Houston Area (HOPE Clinic)

Structural Factors: Food security, health literacy

Research Partner: Karen Basen-Engquist, The University of Texas MD Anderson Cancer Center

Intervention Location: Houston, Texas

Description: This project will test ways to develop a food source pathway for those who are food insecure and currently do not have access to the Supplemental Nutrition Assistance Program (SNAP); Texas Simplified Application Project (TSAP); or Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). Staff will tailor participants' grocery recommendations based on their household, health, and cultural needs, prescribing food boxes to eligible individuals and families. The boxes will be developed by a local Health Equity Research Assembly, which will work with the HOPE Clinic to ensure that health information associated with the food boxes is easy to understand.



Nutrition and Food Environment



Social and Cultural Context



Community Health Care Access and Quality



Economic Development



Neighborhood and Built Environment

Addressing Food Insecurity in Underserved Communities



Project Leader: Katherine Chung-Bridges

Organization: Health Choice Network

Structural Factors: Food security

Research Partner: Olveen Carrasquillo, University of Miami School of Medicine

Intervention Location: Miami, Florida

Description: This project will work with Federally Qualified Health Centers to incorporate screening for food insecurity into patients' electronic health records. After screening, community health workers will help participants apply for SNAP and find other nutritious options for food in their area. After the intervention, several health outcomes will be measured, including blood pressure, lipid levels, depression, and anxiety.

Strengthening Community-Driven Safety-Net Interventions to Improve Health and Economic Equity



Project Leader: Samantha Cornell

Organization: Access Health

Structural Factors: Economic stability

Research Partner: Clare Leah Tanner, Michigan Public Health Institute

Intervention Location: Muskegon, Michigan

Description: This project will research ways to address economic instability for low-income workers who are asset limited, income constrained, and employed but still struggle to afford necessities. Through a countywide safety-net program, this study will connect participants to community resources and build community financial stability.

Redefining and Investing in Community: Improving Telehealth Care and Educational Programs Among People Incarcerated in Rural State Prisons



Project Leader: Jacob Eikenberry

Organization: From Prison Cells To PhD

Structural Factors: Health care access and quality, education access and quality, economic stability

Research Partners: Rebecca L. Fix and Elizabeth Letourneau, Johns Hopkins University

Intervention Locations: Rural areas in Maryland and Missouri

Description: This project will study the effect on health of providing high-speed internet access to facilities in Maryland and Missouri to connect incarcerated populations and institution staff to physical and mental telehealth care and college preparatory programming. These trainings and education programs are intended to improve health by expanding participants' opportunities for stable employment and housing.

Proyecto Juntos



Project Leader: Gail Emrick

Organization: Southeast Arizona Area Health Education Center

Structural Factors: Health care access and quality, health literacy, mental health

Research Partner: Scott Carvajal, The University of Arizona

Intervention Locations: Nogales & Douglas, Arizona

Description: This project will test ways to increase access to mental and behavioral health care in rural Latino communities by addressing a lack of access to mental health care and resources. Proyecto Juntos will provide organizational- and provider-level training and collaborate with the transportation sector to expand in-person care options for participants. Workforce training in Proyecto Juntos will help participants find culturally and linguistically appropriate mental and behavioral resources.



Nutrition and Food Environment



Social and Cultural Context



Community Health Care Access and Quality



Economic Development



Neighborhood and Built Environment

Agricultural Workers Digital Equity Initiative



Project Leader: Elizabeth Freeman Lambar

Organization: NC Department of Health & Human Services

Structural Factors: Telehealth service access, digital literacy, broadband internet access

Research Partners: Catherine Elizabeth LePrevost and Emily Griffith, North Carolina State University; Joseph Lee, East Carolina University

Intervention Location: North Carolina

Description: This project tests the health effects of increasing agricultural workers' internet access to improve telehealth models. The intervention will allow for better use of virtual health care delivery systems. Enhanced telehealth access will improve participants' digital literacy by learning to navigate online health care.

Humanitarian Health Care Network: Bringing the Most Vulnerable to Care



Project Leaders: Deliana Garcia (contact), Anibal Yariel Lopez-Correa, Laszlo Madaras

Organization: Migrant Clinicians Network, Inc.

Structural Factors: Health care access and quality of care

Research Partner: Laszlo Madaras, Migrant Clinicians Network

Intervention Location: Southern Texas

Description: This project will test ways to provide care for children and late-term pregnancy mothers with complex medical needs along the southern border of Texas by connecting them to a system of medical case management composed of a team of case managers, physicians, culturally-proficient patient navigators, and other specialists.

Community-Led Structural Intervention to Address Health Consequences of Community–Police Interactions



Project Leader: Linda Fulmer

Organization: Healthy Tarrant County Collaboration

Structural Factors: Police-related health inequities

Research Partners: Nolan Kline, University of Central Florida; Marcela Nava, The University of Texas at Arlington

Intervention Location: Tarrant County, Texas

Description: This project will research ways to strengthen community resilience and address collective trauma associated with certain law enforcement actions. Objectives of this program will be to improve trust, knowledge, and engagement with police departments; improve social cohesion of the affected communities; and mitigate and lessen the harms and consequences of adversarial community–police interactions. Behavioral outcomes, cardiovascular outcomes, and mental health outcomes will be measured.

Achieving Optimal Sexual and Reproductive Health Project



Project Leader: June Gipson

Organization: My Brother's Keeper, Inc.

Structural Factors: Health care access, broadband infrastructure, patient–clinician relationship and medical decision-making

Research Partners: Jennifer Lemacks, The University of Southern Mississippi; Fazlay Faruque, University of Mississippi Medical Center

Intervention Location: Mississippi

Description: This project will test ways to provide individualized treatment and clinical care guidelines for Black adults of reproductive age (ages 18–45). This intervention also aims to enhance broadband infrastructure to promote telehealth as an additional avenue of care. Cardiovascular and reproductive health determinants will be measured.



Nutrition and Food Environment



Social and Cultural Context



Community Health Care Access and Quality



Economic Development



Neighborhood and Built Environment

Somos Esenciales: Community Revitalization and Health Through Latino Arts and Entrepreneurship



Project Leader: Roberto Hernandez

Organization: Cultura y Arte Nativa de las Americas

Structural Factors: Housing, employment, quality mental health care

Research Partners: Lisa R. Fortuna, University of California, Riverside; Michelle V. Porche, University of California, San Francisco and San Francisco General Hospital

Intervention Location: San Francisco, California

Description: This project will test how investments in city infrastructure, such as housing and urban gardens, may promote economic development, social cohesion, and access to healthy foods. Stress-based illnesses and health behaviors will be assessed.

Leveraging a Community-Driven Approach to Address the Impact of Social Determinants of Health on Structural Inequities Among Miami–Dade County’s Intergenerational LGBTQ+ Community



Project Leader: Andrea Iglesias

Organization: Urban Health Partnerships

Structural Factors: Access to physical and mental health care for sexual and gender minority populations

Research Partners: Karina Gattamorta, University of Miami School of Nursing and Health Studies; Roberto Abreu, University of Florida

Intervention Location: Miami, Florida (Miami–Dade County)

Description: This project will research ways to develop culturally competent physical and mental health care for older sexual and gender minority adults. The intended outcomes of this project are health system–level changes and improved health outcomes in this population.

Reducing Health Disparities Through Enhanced Mobility Support and Access



Project Leader: Valerie Lefler

Organization: Feonix – Mobility Rising

Structural Factors: Transportation and access to health care

Research Partners: Ipek Nese Sener, Texas A&M Transportation Institute; Janille Smith-Colin, Southern Methodist University; Lu Wang, University of Michigan; Zeenat Kotval-Karamchandani, Michigan State University

Intervention Locations: Dallas, Texas; Detroit, Michigan

Description: This project will test approaches to fulfill transportation needs for those of low socioeconomic status as a way to improve health. Individualized education on travel options and mobility resources will be provided to improve participants’ quality of life.

Partnership to Optimize Women’s Equity in Maternal and Infant Health



Project Leader: Karen Matthews

Organization: The Delta Health Alliance

Structural Factors: Access to quality health care, economic stability

Research Partners: Wesley James and Jonathan Bennett, The University of Memphis

Intervention Location: Mississippi

Description: This project will research ways to address Mississippi’s birth and maternal health disparities by providing information and care for participants from preconception to postpartum in rural and low-income areas. Training will also be provided to clinicians to help them better tailor their recommendations to fit the needs of these patients. Additionally, this project seeks to address economic stability by implementing a maternal leave stipend.



Nutrition and Food Environment



Social and Cultural Context



Community Health Care Access and Quality



Economic Development



Neighborhood and Built Environment

Puerto Rico Collaborative Advancement of Research, Innovations, Best Practices, and Equity for Children, Youth, and Families



Project Leaders: Marizaida Sánchez Cesáreo (contact), Cristina Adames, Eric Rivera Colón

Organization: Grupo Nexos, Inc.

Structural Factors: Justice system, health care system and access to primary care, mental health access, early childhood development and education, economic and community development.

Research Partner: Edna Acosta-Pérez, University of Puerto Rico

Intervention Location: Southwest Puerto Rico

Description: This project will research approaches to reduce health disparities by fighting childhood poverty in Puerto Rico. This multilevel initiative seeks to address socioeconomic factors by enhancing mental health access and educational development at the organizational, community, and government and institutional levels to reduce health disparities associated with mental health and other quality-of-life measures.

Neqkiuryaraq—The Art of Preparing Food



Project Leaders: Brian Lefferts (contact) and James W. Keck

Organization: Yukon-Kuskokwim Health Corporation

Structural Factors: Food security, Alaska Native food sovereignty

Research Partner: Andrea Bersamin, University of Alaska Fairbanks

Intervention Location: Yukon-Kuskokwim Delta, Alaska

Description: This project will study approaches to achieve Alaska Native food sovereignty by procuring healthy foods, promoting local agriculture, and engaging with regional policymakers to promote policies that encourage the harvesting and distribution of traditional foods.

Cancer in Your Community: Strategies to Reduce Cancer and Chronic Disease in the Arkansas Delta



Project Leaders: Trena Mitchell (contact) and Miriam Karanja

Organization: Arkansas Cancer Coalition

Structural Factors: Transportation and access to health care

Research Partner: Pebbles Fagan, University of Arkansas for Medical Sciences

Intervention Location: St. Francis County, Arkansas

Description: This project will study ways to facilitate transportation equity for patients traveling to their cancer screening appointments. This intervention aims to ensure that patients have reliable and timely modes of transportation to their cancer screening treatments. Additionally, there will be collaboration with health systems to increase the number of providers and improve reminder systems for eligible participants.

Fostering Community Connections Through Native Hawaiian Cultural Values to Strengthen Youth Resilience, Health, and Well-Being



Project Leader: May Okihiro

Organization: Waianae Coast Comprehensive Health Center

Structural Factors: Health quality (physical, mental), health literacy, academic and employment outreach

Research Partner: Ken Nakamura, University of Hawai'i at Mānoa

Intervention Locations: Oahu and Hawaii islands, Hawaii

Description: This project will research approaches to develop a culturally centered system of care in Hawaii. This intervention seeks to change policies and practices involved in supporting healthy behaviors among youth to improve mental and cardiovascular health.



Nutrition and Food Environment



Social and Cultural Context



Community Health Care Access and Quality



Economic Development



Neighborhood and Built Environment

Healthy and Livable Bronx Partnership



Project Leaders: Eileen Torres (contact) and Bijan Kimiagar

Organization: BronxWorks, Inc.

Structural Factors: Family economic stability, inadequate and unreliable childcare, employment and economic stability

Research Partners: Earle Chambers and Paul Meissner, Albert Einstein College of Medicine and Montefiore Medical Center

Intervention Location: Bronx, New York

Description: This project will collaborate with Bronx residents living in New York City Housing Authority buildings to test the development of childcare access in the area, which is currently a childcare desert. This project will also support young children’s and families’ well-being through early care education and programming.

Achieving Equity in Farmworker Health Through Community-Led Research



Project Leader: Emma Torres

Organization: Campesinos Sin Fronteras

Structural Factors: Housing quality, labor practices, health care access

Research Partner: Maia Ingram, The University of Arizona

Intervention Location: Yuma County, Arizona

Description: This project will test ways to improve seasonal farmworkers’ health by implementing health safeguards within labor practices, promoting employer-based insurance, and increasing the availability of safe and stable farmworker housing.

Watts Rising: A Vision for a Healthier Watts



Project Leader: Katrina Kubicek

Organization: Housing Authority of the City of Los Angeles

Structural Factors: Access to healthy food and green spaces

Research Partners: Arleen Brown and Mona AuYoung, University of California, Los Angeles

Intervention Location: The Watts community in Los Angeles, California

Description: This project will research approaches to improve access to healthy foods by developing a network of community gardens, increasing access to fresh produce, creating entrepreneurial opportunities, and providing social support within the community.

Counteracting Structural Barriers to Increase Access to Medications for Opioid Use Disorder Among Unhoused Montanans



Project Leader: Rebecca Ramos

Organization: Open Aid Alliance

Structural Factors: Access to health care

Research Partner: Lindsay Lancaster Benes, Montana State University

Intervention Location: Montana

Description: This project will test the use of a population-focused statewide substance use care framework to provide evidence-based treatments for unhoused individuals with opioid use disorder. This framework includes health care providers and virtual peer navigators.



Nutrition and Food Environment



Social and Cultural Context



Community Health Care Access and Quality



Economic Development



Neighborhood and Built Environment

Creating Statewide Community Partnerships: Spanning Boundaries Between Public Health, Emergency Housing, and Criminal Justice



Project Leader: Raymond Waller
Organization: Families Against Narcotics
Structural Factors: Public health system, lack of access to recovery housing, access to behavioral health services, criminal justice system
Research Partner: Bradley Watts, Western Michigan University
Intervention Location: Michigan
Description: This project will research ways to provide same-day access to crisis services to individuals in need of crisis care. Some examples of this include recovery-oriented care, emergency housing, and other behavioral and medical service referrals and care. This project seeks to close the gap in system service delivery for individuals and families experiencing multiple needs or crises.

Asian CHESI



Project Leader: Dunli Wu
Organization: Asian Community Health Coalition
Structural Factors: Transportation barriers, access to healthy food, access to preventive health care, access to resources
Research Partners: Grace Ma, Center for Asian Health, Temple University; Min Qi Wang, University of Maryland College Park; Ming-Chin Yeh, Hunter College, The City University of New York
Intervention Locations: Philadelphia, Pennsylvania; Washington, D.C.; New York, New York; New Jersey
Description: This project will test how to increase Asian American participation in screening and preventive care related to diabetes, hypertension, heart disease, and cancer. The project will connect to participants through telehealth services, vouchers for transportation and food, and multilingual patient navigators.

Indigenous Healthy Homes and Healthy Communities: A Community-Led Initiative to Improve Health and Support Indigenous Resilience in the U.S. Southwest



Project Leader: Sheldwin A. Yazzie
Organization: Albuquerque Area Indian Health Board
Structural Factors: Housing quality
Research Partners: Joseph Hoover and Tara Carr, The University of Arizona
Intervention Location: Albuquerque, New Mexico
Description: This project will research ways to enhance community-level capacity to address household- and individual-level structural factors that affect respiratory health and contribute to unintentional injuries in Native American Tribal Communities. Homes will be assessed for home safety. Culturally competent respiratory health training for health care workers will be provided.



Nutrition and Food Environment



Social and Cultural Context



Community Health Care Access and Quality



Economic Development



Neighborhood and Built Environment

Connect With Us!



For more information, visit the NIH Common Fund ComPASS website at commonfund.nih.gov/compass.



You can also learn more by viewing the [ComPASS Video Overview](#).



To receive ComPASS program announcements and information about funding opportunities, join the [ComPASS listserv](#).



National Institutes of Health
Office of Strategic Coordination – The Common Fund