

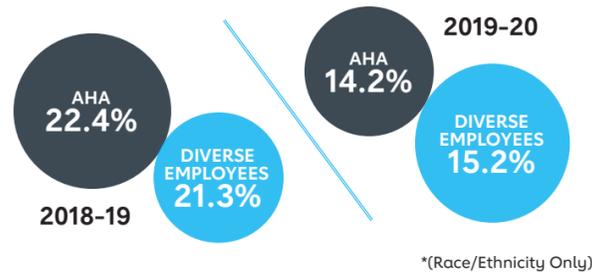
Engaging diverse staff, volunteers and communities to be a relentless force for a world of longer, healthier lives



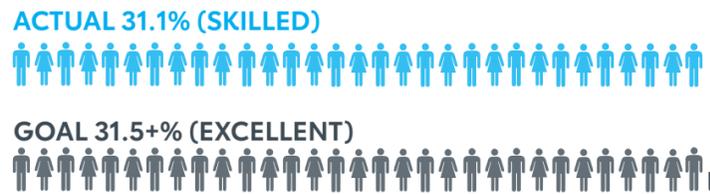
WORKFORCE

Our organization's human capital – a collection of talented volunteers and staff, diverse in background and experience.

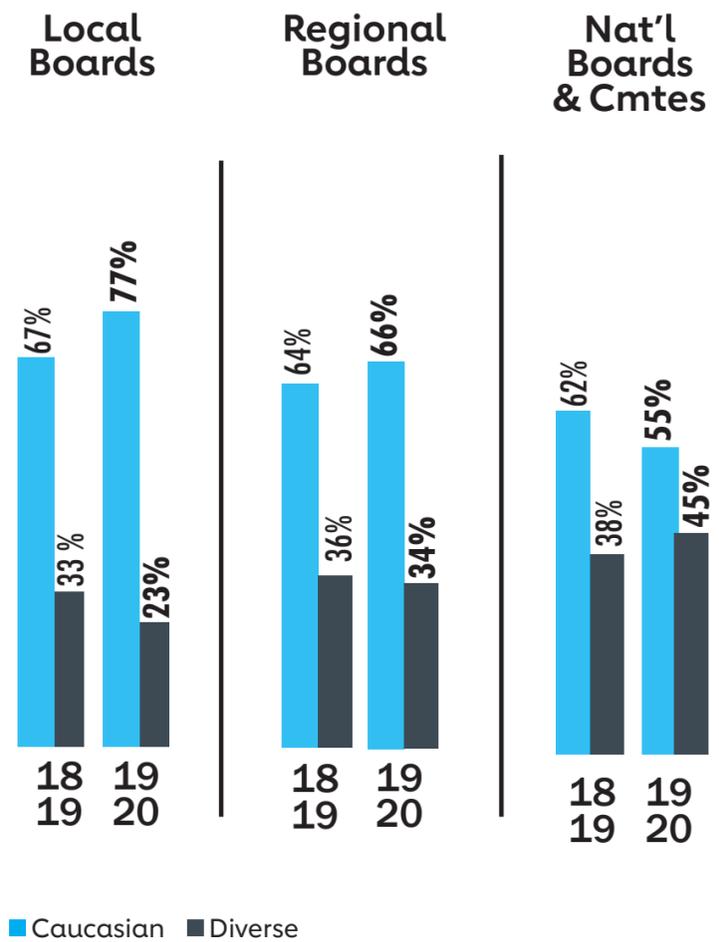
Staff Turnover



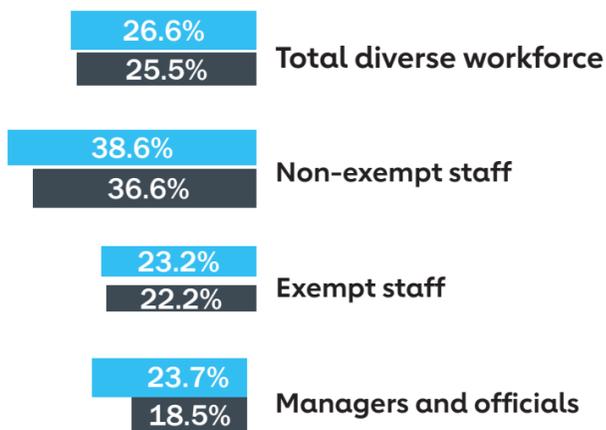
Overall Diversity Goal



Volunteer Diversity – Boards and Committees



Staff Diversity | Race/Ethnicity



Protected Veteran Status

The percentage of our workforce who qualify in a protected veteran status is **1.4%**, the benchmark is **5.7%**.



Disability Status

The percentage of our workforce who qualify as an individual with a disability is **4.6%**, the benchmark is **7%**.

■ Q3 2019-2020
■ Q3 2018-2019

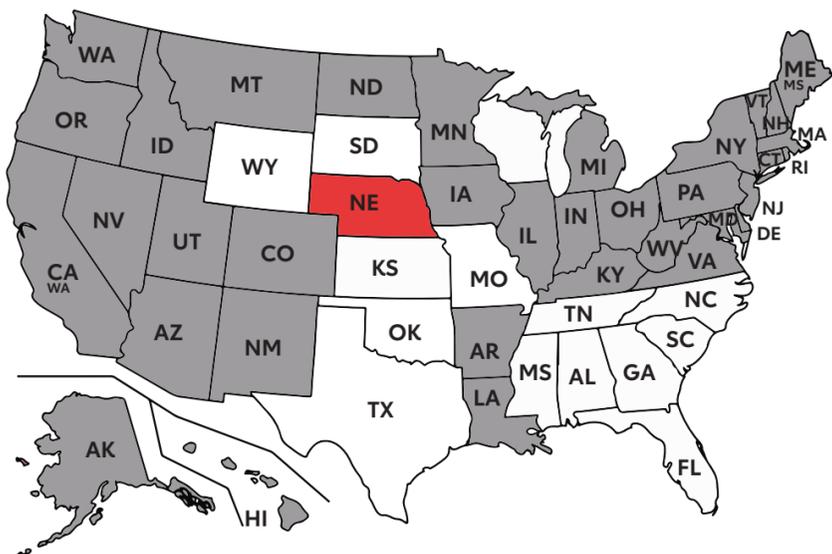


MARKETPLACE

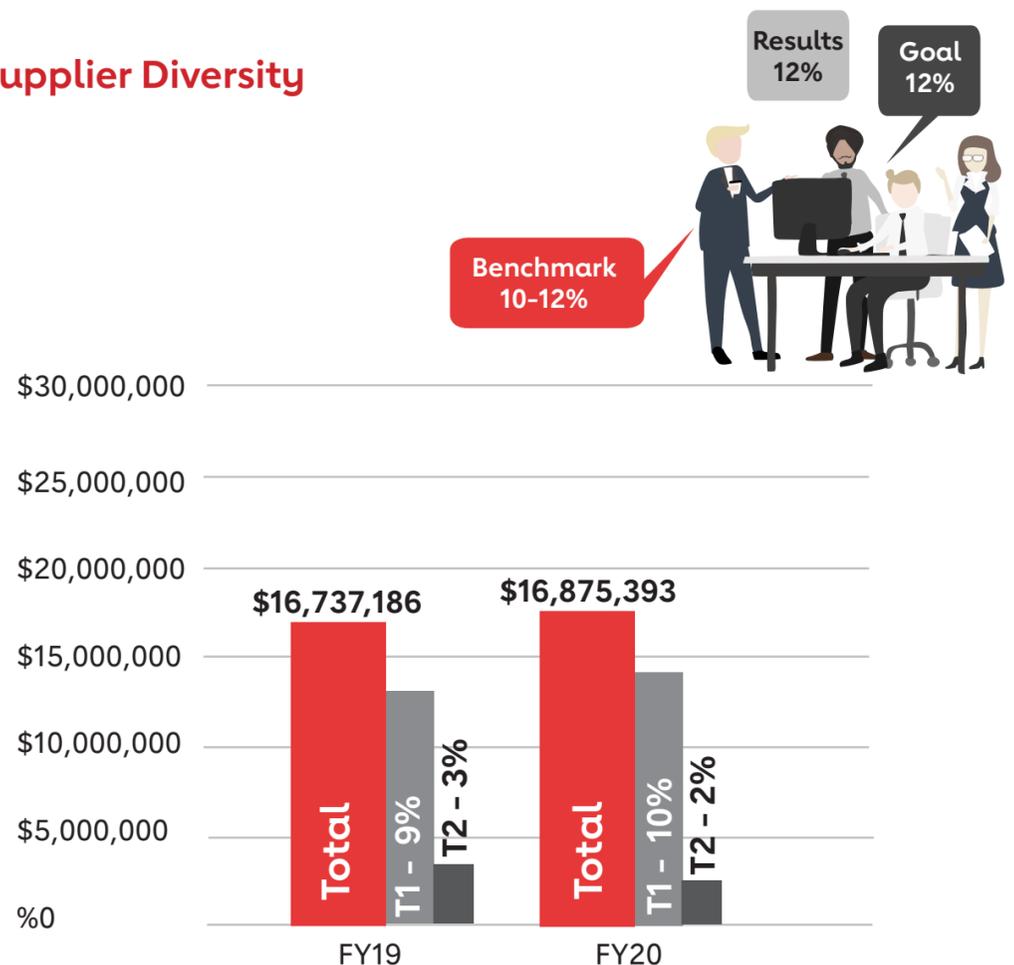
Where the impact of our mission is felt by working with staff, volunteers, partners and communities around the world.

Medicaid Expansion

- Expansion continues in remaining **14** states; prioritizing **6**
- OK and MO pursuing expansion through ballots
- Coronavirus** has disrupted many legislative sessions; no imminent impact to expansion efforts this year



Supplier Diversity





MARKETPLACE



Field Health Impact

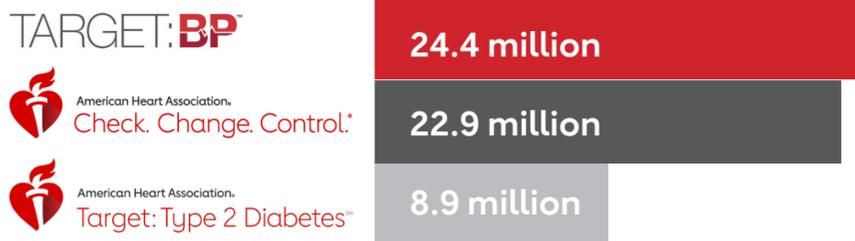
Improving patient care for underserved communities

To date we have achieved clinical systems changes impacting care for **1.9 million** of diverse or underserved individuals.

Local policy, systems and environmental changes

Improving nutrition security: **32**
Other Social Determinants of Health: **21**
Potential population impact: **9 million**

Underserved patients covered by ambulatory care initiatives (as of 4/20):



Policy, Systems and Environmental (PSE)

Changing systems and environments for our underserved populations for **3.9 million** individuals through local policy, systems, and environmental changes focused on equitably meeting the needs of our communities.

Funding our impact across communities

Secured **\$1,367,000** to fund our impact strategies across the country.



COVID-19 Community Conversations

- 45 community conversations
- Reaching thousands of people from different sectors including medical, corporate, and faith based.
- **Topics included:** African Americans, Latino, Asians, Women, Seniors, and rural Americans
- Conducted conversations in English, Spanish and Mandarin
- Beneficial Business Exchange
- \$2.5M COVID-19 research initiative

Engagement



Communications



Traditional Media

1.1B+ (1,105,255,439) media impressions

- Increase of 80% YOY (615,438,868 Q3 FY18-19)



Highlights:

- EmPOWERED to Serve Business Accelerator (ETSBA) Puerto Rico
- The impact of racial biases and poverty on cardiovascular events
- CPR training among Hispanics

EmPOWERED to Serve



Awarded **\$100,000** in Scholarships as a part of the EmPOWERED Scholars program.



\$15,500 awarded to social entrepreneurs in Puerto Rico.

EmPOWERED and Well Healthier Church Challenge



Strengthened **68** faith organizations



Engaged **4963** participants



Awarding **\$7300** to faith organizations to fund health ministries.

Social Impact Fund



19 INVESTMENTS

Currently in Boston, Flint and Chicago. Expanding to the DC, NY and the Bay Area markets in 2020.



Coronavirus Rapid Response:

Additional **\$1M** of new investments into existing portfolio companies and/or new investees across our target markets to spur an expanded response and continued life sustaining services in the hardest hit communities across the country.

Quality Improvement

In FY19-20 we continue our focus on hospitals in counties with the highest CVD mortality. This year we expanded our reach from 228 up to 255 counties. The counties' population is comprised of 47.8% of diverse individuals.



1,877 hospitals with approx. **total of 9.06 million discharges** of diverse individuals.



Our progress currently:

1,180 hospitals (up from 1,169 since last quarter) implementing 2,127 of our quality programs (down from 2,153 at the end of last quarter) impacting over **7.55 million** (up from 7.5 million at the end of last quarter) **total** diverse patients discharged.



WORKPLACE

Where the collective genius of our diverse, talented employees and volunteers come together to accomplish the organizational goals.

Recognition

Since 2016, the AHA has received many accolades including Best Place To Work, Best Nonprofits To Work For and DiversityInc's Top Companies which we've received for four consecutive years (2016-2020).



Employee Resource Groups

In response to the issues of social distancing and isolation facing single staff members and the changing home work environment for staff members with children created by the Coronavirus pandemic, we launched two new ERGs: Parents @ Home and #WithMe. With a total of 10 groups now, our ERGs are made up of over 275 members of staff, a 44% increase from 189 in April 2020.



Hearts with Pride, the LGBTQ+ and Allies Employee Resource Group – hosted its first-ever Virtual Pride. Featuring three nationally recognized celebrities of the LGBTQ+ and members of the community, the group brought together about 400 staff and community partners in a celebration of human rights peppered with education, humor, music and physical activity while (in another first) raising approximately \$5000 benefiting the mission of the AHA.



Staff Diversity

- The percentage of our workforce who qualify in a protected veteran status is 1.2%, the hiring benchmark is 5.7%
- The percentage of our workforce who qualify as an individual with a disability is 4.9%, our affirmative action goal is 7%
- Our total minority (ethnicity only) population association-wide represents 26.6% of our workforce vs. 25.5% for the same period last year. AHA's diverse population is higher than the census demographic availability percent of 24.6%.
- The minority exempt workforce is slightly higher than the same period last year; 23.2% CY vs. 22.2% LY; is slightly higher with the census demographics of 23.1%
- The non-exempt minority workforce increased from the same period last year 38.6% CY vs. 36.6% LY; and is higher than the census demographics of 29.9%.
- The percentage of our workforce who qualify in a protected veteran status is 1.2%, the hiring benchmark is 5.9%
- The percentage of our workforce who qualify as an individual with a disability is 4.9%, our affirmative action goal is 7%

Overall Representation of Diverse Staff

- For 2019-2020, increase the racial and ethnic diversity of our staff, and increase representation of veterans and persons with disabilities to 31% (skilled performance) or 31.5% or above (excellent performance) of all staff; current representation is 31.1%.

Officials & Managers Diversity Association Wide

- Our official & managers minority population association-wide represents 23.7% of our official & manager workforce which is higher than 18/19 FY, 18.5%. Our official & managers veteran population association-wide represents 1.1% of our management staff; our individuals with a disability population association wide represents 4.2% of our management staff.

Staff Turnover

- FY19-20 is lower this year than the same period a year ago, 14.2% CY vs 17.3% LY.

Medicaid Expansion

- Although expansion in the remaining 14 states continue to be a focus, we are prioritizing efforts in 6 of these states.
- Oklahoma and Missouri are pursuing expansion through ballots.
- While the COVID-19 pandemic has disrupted many legislative sessions, it's possible other states will continue to advance expansion efforts this year.
- There are currently no work requirements implemented in the states.

Social Impact Fund:

- We are seeing early impact results from our initial investments. In particular, we have help prevent over 1,200 evictions within public housing units, supported groups that have led to a 92% job placement for returning citizens and low-income residents and led to a 4% receives rate, compared to the 45% national average. In addition, our investments have catalyzed an additional \$13M of new funding for our investees. Our portfolio also reflects our inclusive approach, with 100% of investees headquartered or operating within under-resourced communities and 90% of our investees are led by women or minorities.

Field Health Impact

- In response to the many questions from communities across the country around COVID-19 and its implications, Community Impact staff have conducted over 45 community conversations reaching thousands of people from different sectors including medical, corporate, and faith based. The conversations have focused on diverse populations including African Americans, Latinx, Asians, women, seniors, and rural Americans have been conducted in languages including English, Spanish, and Mandarin. Many more conversations are being planned for the months ahead.
- Clinical systems changes are those changes taking place exclusively in the clinical setting serving patients. For example, a clinic integrating AHA blood pressure algorithm in their protocol or setting up a blood pressure cuff loaner program.
- Policy, System, and environments changes (PSEs) or Community PSEs are changes taking place outside of the clinical setting. For example, a new food distribution outlet in a underserved area or passing of a flavored tobacco ban.

Social Determinants of Health: Source of input (community) health progress in the marketplace

- To date, American Heart Association Community Teams have achieved 32 local policy, systems and environmental changes improving nutrition security and an additional 21 local policy, system, and environmental changes impacting other social determinant of health.
- In total, these 43 achievements have the potential to reach over nine million people. As Covid-19 has worsened conditions for many communities, the AHA teams are focused on both addressing current concerns and continuing to seek sustainable solutions for the future. Examples include Adopted policy in Milwaukee public schools to require all schools to serve Breakfast after the Bell to maximize access to all students, Initiated United States Department of Agriculture funded supper programs in high need Niagara Falls schools and piloting family meal nights to ensure access to both nutrition and enrichment to entire families and Achieved Zero Fare Transit in Kansas City, MO to increase access to needs such as healthcare and nutrition.

Traditional Media:

- More than 1.1 billion (1,105,255,439) media impressions were garnered in top-tier outlets, including Associated Press, CNN, Drugs.com, Healio, HealthDay, Medpage, The Journal of the American Medical Association, and U.S. News & World Report, among others.
 - Topics covered in conjunction with "American Heart Association" include the launch of the EmPOWERED to Serve Business Accelerator in Puerto Rico; people of color in clinical trials; CVD risks between black ethnic groups; AHA's involvement to further the COVID-19 relief package; the impact of racial biases and poverty on cardiovascular events; the connection of obesity and socioeconomic status; a legacy of discrimination reflected in health equity; and CPR training among Hispanics.
- YOY: From Q3 FY18-19 (615,438,868) to Q3 FY 19-20 (1,105,255,439), we saw an 80% increase.

EmPOWERED to Serve

- Through the EmPOWERED and Well Healthier Church Challenge, EmPOWERED and Well Online Church Challenge, and the EmPOWERED and Well Virtual Faith Challenge, the EmPOWERED to Serve team has engaged.
- The EmPOWERED and Well Healthier Church Challenge is a 12-week program aiming to strengthen select churches in Atlanta, Washington, D.C., New York City, Dallas, Los Angeles, and Charlotte.
- The ETS team awarded 10 college students who showed a vested interest in health equity with \$10,000 scholarships.
- Over 200 students applied for the scholarship.
- Puerto Rico held the first bilingual, virtual EmPOWERED to Serve Business Accelerator.
- Over 27 applicants, participants competed for the Accelerator award.