Health Equity & Health Disparities: Bridging the Gap through ________?

Larrell L. Wilkinson, PhD, MSPH, CHES
USC Institute for Partnerships to Eliminate Health Disparities
Health Action Institute
Healthy Carolina Initiative
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Disclaimer

This presentation may address terminology, context, or behaviors that may detail and/or challenge political correctness and cultural competency. However, this presentation is in no way meant to offend anyone. The presentation is for educational purposes and is meant to detail facts, concepts, and ideas about addressing the issues of health disparities and achieving health equity.
Agenda

Introduction
Bridging the Gap through Understanding
    Health Disparities
    Health Equity
    Examples of Disparities / Inequities
    Social Determinants of Health
Bridging the Gap through Effort
    Partnerships
    Community Assessment
    Building Capacity
    Moving to Action
    Assessing Progress
    Maintaining Momentum
    Sustaining Your Partnership
Bridging the gap through understanding

Achieving Health Equity
Health disparities, what about Equity?

Before we discuss equity, we need to understand health disparities:

Differences in the incidence and prevalence of health conditions and health status between groups are commonly

Most health disparities affect groups marginalized because of socioeconomic status, race/ethnicity, sexual orientation, gender, disability status, geographic location, or some combination of these.

Worse health and worse determinants (conditions)

Brennan-Ramirez, Baker, Metzler, 2008
What is Health Equity

Health disparities are referred to as health inequities when they are the result of the systematic and unjust distribution of these critical conditions.

Health equity is when everyone has the opportunity to “attain their full health potential”

No one is “disadvantaged from achieving this potential because of their social position or other social determined circumstance”

Brennan-Ramirez, Baker, Metzler, 2008
Descriptive Examples of Health Disparities

In 2004, the mortality rate for infants of mothers with less than 12 years of education was 1.5 times higher than for infants of mothers with 13 or more years of education.

In 2004, the overall cancer death rate was 1.2 times higher among African Americans than among Whites.

Between 2001 and 2004, more than twice as many children (2–5 years) from poor families experienced a greater number of untreated dental caries than children from non-poor families.

Brennan-Ramirez, Baker, Metzler, 2008
Descriptive Examples of Health Disparities

In 2006, adults with less than a high school degree were 50% less likely to have visited a doctor in the past 12 months compared to those with at least a bachelor’s degree.

In 2007, Hispanics were 3 times more likely to be uninsured than non-Hispanic Whites (31% versus 10%, respectively)

In 2007, people in families with income below the poverty level were 3 times more likely to be uninsured compared to people with family income more than twice the poverty level

Brennan-Ramirez, Baker, Metzler, 2008
Descriptive Examples of Health Disparities

Lower income and minority communities are less likely to have access to grocery stores with a wide variety of fruits and vegetables. 38.9% of Hispanic/Latinos, 55.2% of African Americans, and 29.6% of Asian Americans live in households with one vehicle or less compared to 24.5% of Whites.

The real median earnings of both men and women who worked full time decreased between 2005 and 2006 (1.1% and 1.2% change, respectively), with women earning only 77% as much as men.

Brennan-Ramirez, Baker, Metzler, 2008
SC Primary Care Health Professional Shortage Assessment by Type

HPSA Type
- Geographic
- Low Income
- Not Designated

SC DHEC, 2009
Socio-environmental Map for Poverty

Percent of Population Living in Poverty, 2004
Health Insurance Coverage, 2000

CDC, 2012
Social Determinants of Health: A Picture

Source: Dahlgren and Whitehead, 1991
A Framework for Understanding the Relationship between Race and Health

NINDS Advisory Panel on Health Disparities, 2011
Bridging the gap through effort

Developing a Social Determinants of Health Inequities Initiative in Your Community
Create Partnerships to Address SDOH

Establishing a broad-based collaborative partnership is fundamental to addressing the social determinants of health inequities.

Social relationships are complex and have varying effects on different members of a community.

A partnership is a purposive relationship between two or more parties (individuals, groups, or organizations) committed to pursuing an agenda or goal of mutual benefit.

Access | Resources | Viewpoint Exchange | Respond to changing needs of the community

Brennan-Ramirez, Baker, Metzler, 2008
Partnerships are necessary to...

- Pool information.
- Increase understanding of a community’s needs and assets.
- Improve public policies and health systems.
- Engage new issues without having sole responsibility for managing or developing them.
- Develop widespread public support for issues or actions.
- Share or develop the necessary resources for action and problem solving.
- Minimize duplication of effort and services.
- Recruit participants from diverse backgrounds and with diverse experiences.
- Promote community-wide change through the use of multiple approaches proposed by representatives from different sectors of the community.
- Improve your chances of making meaningful changes in community conditions by gaining community members’ trust in a broad-based coalition of partners.

Brennan-Ramirez, Baker, Metzler, 2008
Assemble to Create a Successful Partnership

Assemble a group of interested community members and organizations to discuss ideas and concerns for the community

Groups may already be gathering
  - May want to join with the groups already meeting and working
  - May need to add other groups and individuals

Listen to the voices of people and organizations experiencing the inequities

Identify relevant sectors of your community by making a list to ensure comprehensiveness
  - Consider how your community is defined

Brennan-Ramirez, Baker, Metzler, 2008
Partnership Principles

We are committed to equity, collective decisions, and collective action

We are committed to high-quality, ethical initiatives

We are committed to addressing social inequities that affect health
  Including those that restrict the meaningful participation of individuals/communities in the decision-making process

We will maximize opportunities for learning within the local community and associated organizations

Brennan-Ramirez, Baker, Metzler, 2008
Focusing Your Partnership on SDOH

The first step in assessing social determinants of health is to conduct a community assessment.

- Assessments provide insight into the community context
  - Ensures interventions are designed, planned, implemented to maximize benefits to the community
- Informs decisions on where to focus resources and interventions
- Ensures that all members of a partnership understand the relationship b/w the SDOH & health behaviors or health outcomes
- Can encourage others in the community to provide support or resources for the intervention efforts
- Can be used to understand where your partnership is starting and what kinds of things you want to track along the way in order to determine how your efforts are contributing to change

Brennan-Ramirez, Baker, Metzler, 2008
Steps to Conduct Your Community Assessment

1. Consider what you and your partners want to assess

2. Talk to other community partners and members who represent the population or communities of interest

3. Think about the types of information that will be useful for understanding your community
   1. Morbidity/mortality, behavioral factors, social indicators

4. Determine what information you need to collect to better understand your community
   1. Review existing data sources | survey data | brainstorming | interviews | focus groups | Photovoice | observation & audits | concept mapping | appreciative inquiry

Brennan-Ramirez, Baker, Metzler, 2008
More Steps to Conduct Your Community Assessment

Develop a work plan that identifies tasks to accomplish, partner roles and responsibilities, and a time frame for completion.

Collect and organize information so it can be shared with all partners, community organizations, and community members.

With information gathered and summarized, partners can prioritize issues to address.

Brennan-Ramirez, Baker, Metzler, 2008
Building Capacity to Address SDOH

Community capacity are the (assets) resources, infrastructures, relationships, and operations that enable a community to create change

- Encourage broad community participation in planning, organizing and implementing projects
- Identify existing social relationships and use them to solicit participation from other people and organizations, share information, build unity and solidarity among community members, and open doors for individuals and groups
- Identify useful assets of people and organizations in the community
- Conduct regular conversations to share information with community members and engage them in making decisions through consensus-based, collaborative processes

Brennan-Ramirez, Baker, Metzler, 2008
Selecting Your Approach to Create Change

We must develop interventions to address SDOH programs or policy initiatives intended to move your community closer to your vision.

May use a wide variety of approaches.

Best approach depends on what your partnership wants to accomplish and your comfort level with the strategies used in each approach.

In some cases, the decision to incorporate certain approaches may be partially determined by funding and guideline restrictions based on work already occurring in your community or organization.

Let’s discuss the following descriptions of these approaches will help you select those that best meet the needs of your partnership.

Brennan-Ramirez, Baker, Metzler, 2008
Approaches to Create Change

A. Consciousness raising is a process through which people come together to discuss the relationship between individual or group experiences or concerns and the social or structural factors that influence them

B. Community development is a set of processes or efforts to create community change at the local level through strengthening social ties, increasing awareness of issues affecting the community, and enhancing community member participation in addressing these issues

C. Social action is an approach that focuses on altering social relationships or resources

Brennan-Ramirez, Baker, Metzler, 2008
Approaches to Create Change

Health promotion refers to activities designed to help people improve their health or prevent illness through changes in environments, lifestyle, and behavior.

Media advocacy is the strategic use of media coverage to encourage social, economic, or environmental change.

Policy and environmental change, creates new or changes existing policies is to change the social determinants that influence health equity.

Brennan-Ramirez, Baker, Metzler, 2008
Elements to Consider in Selecting Approach

- The experience and expertise of your partners.
- The nature of the social determinants you plan to address.
- The availability of financial and other resources.
- Funding restrictions or guidelines for the initiative.
- The existence of policies that are not being enforced.
- Whether you are working to create community change or organizational change.
- The political and social buy-in of the community.
- The relative success or failure of similar approaches in the past.

Brennan-Ramirez, Baker, Metzler, 2008
Moving to Action

An action plan describes the specific steps necessary to meet clearly defined goals and objectives

- Develop an action plan as soon as your partnership’s vision, goals, objectives, and approaches have been determined
- You may need to modify your action plan from time to time
- Demonstrates that you are making tangible progress to community members and other stakeholders toward improving social, economic, and environmental conditions

Brennan-Ramirez, Baker, Metzler, 2008
Elements of an Action Plan

Your partnership’s goals and objectives.
Who is responsible for the completion of activities?
The time frame for completion of activities?
How you will assess progress?
How you will assess impacts and outcomes?

Brennan-Ramirez, Baker, Metzler, 2008
Action Plans Should...

Describe each action step clearly and specifically
Assign responsibilities for each action step
Provide a timeline for completion of the action steps
Outline what resources will be necessary to successfully implement each action step, including finances, staff, space, and equipment
Include a list of other community members who may be potential collaborators and involves them in your project as necessary
Anticipate challenges

Brennan-Ramirez, Baker, Metzler, 2008
Assessing Your Progress

It is important to document the progress your partnership has made toward meeting these goals and objectives.

Although each initiative is unique, the information your partners collect can help the partnership determine whether the action plan has been successful or a new plan will need to be developed.

Information your partners collect on this initiative can provide information for others engaged in similar work, and your partners can share this information with people and organizations in the community who are interested in your progress.

Brennan-Ramirez, Baker, Metzler, 2008
Steps in the Evaluations Process

One of the first things to consider is how to evaluate the processes used to develop and carry out your initiative.

Involves examining the processes used within the partnership itself.

Your partners should discuss what to document, with whom the information should be shared, and how it is to be used.

It might also be useful to document the extent to which partners feel they have been involved in decision making and their comfort with conflict management strategies.

The learning-from-doing approach can strengthen and maintain your partnership by reinforcing accomplishments and revising or eliminating what isn’t working so that all partners feel they are making a meaningful contribution to the project.

Brennan Ramirez, Baker, Metzler, 2008
Be Sure to Link Evaluation to Your Community Assessment/Action Plan

What about your partnership works well (e.g., decision making, conflict management, leadership, ability to move forward, location, time of meetings, length of meetings, balance of tasks, time for social interaction)? What about your partnership has not worked well? How can you make the partnership work better?

Are your partners making progress toward their goals and objectives? What was your intention? What did partners hope to accomplish? What did the partnership do to accomplish these goals and objectives?

Has your partnership successfully reached out to the community? How?

What has been challenging about assessing community strengths? What resources have been helpful? What resources are still needed? Are these resources available within the community? Are there costs associated with securing them?

What were some of the intended consequences of your actions?

What were some of the unintended consequences of your actions?

If the partnership were starting the initiative over, what would your partners do the same or differently?

Brennan-Ramirez, Baker, Metzler, 2008
Maintaining Momentum

Eliminating inequities in the social determinants of health will likely require long-term commitment and the use of several approaches.

To maintain momentum, your partnership will need to be responsive to changes in social, economic, and environmental conditions and in the needs of community members.

Responsiveness may involve changes in the configuration and focus of the partnership.

The capacity of your partnership to be flexible and respond effectively to transitions can help minimize the fatigue of partners and community members.

Brennan-Ramirez, Baker, Metzler, 2008
Sustaining Your Partnership

Develop a formal organizational structure when you are ready
  Government-sanctioned organization
  A community network or coalition
Create local awareness of and support for the partnership
Bring in new partners.
Ensure that all members are participating in partnership activities
Encourage shared leadership and decision making
Develop a strong sense of group identity

Brennan, Ramirez, Baker, Metzler, 2008
Bridging the gap through Understanding & Effort

Achieving Health Equity
Closing Thoughts...

Must have ongoing observation and evaluation

Must not be afraid to think outside the box and then work outside the box

Communities must want to improve their own conditions, you can’t do it for them

Mobilize the community

Need for multicomponent initiatives to change multifactorial health challenges

Brennan-Ramirez, Baker, Metzler, 2008
Closing Thoughts

These complex initiatives require time and substantial effort to build sustainable partnerships, share resources, develop systems of communication, and minimize the competitive environment many organizations have been exposed to in order to acquire funding.

By sharing challenges and successes in the efforts to change social determinants that communities can learn from each other how to work to achieve health equity.

Brennan-Ramirez, Baker, Metzler, 2008
References


CDC. Social Determinants of Health Maps. Available at http://www.cdc.gov/dhdsp/maps/social_determinants_maps.htm

