Equality, Equity, Intersectionality and Health Equity

Presented by:

The Reverend Tommie Watkins, Jr., Ph.D., M.Div., L.M.S.W.

Graduate Professor,
University of Alabama Birmingham School of Social Work
revtlw@uab.edu

Health Education Consultant
Psychotherapist
The Watkins Group, LLC
revtlw@yahoo.com
(305) 785-5111

What is health?

"Health is a state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity."
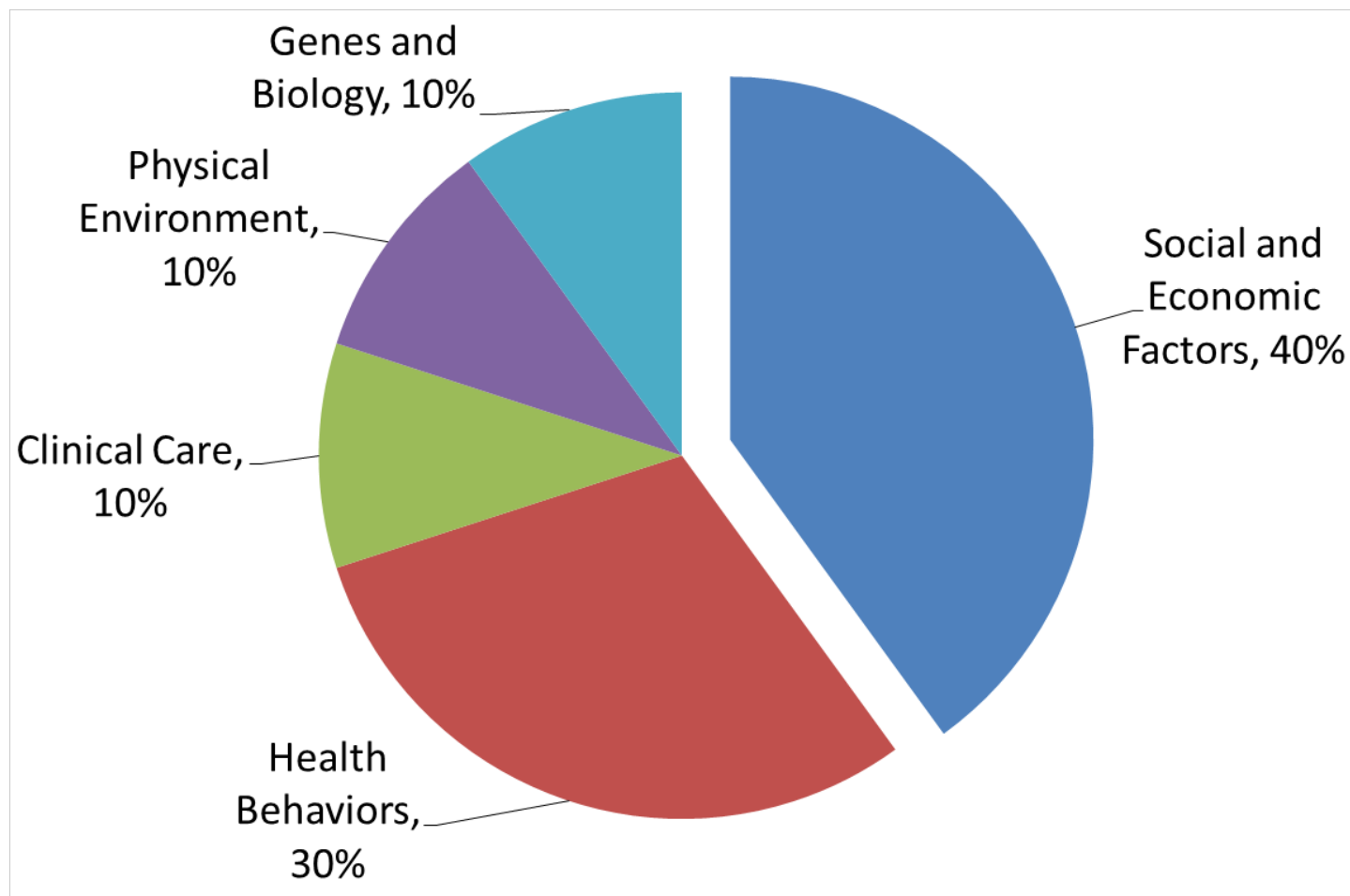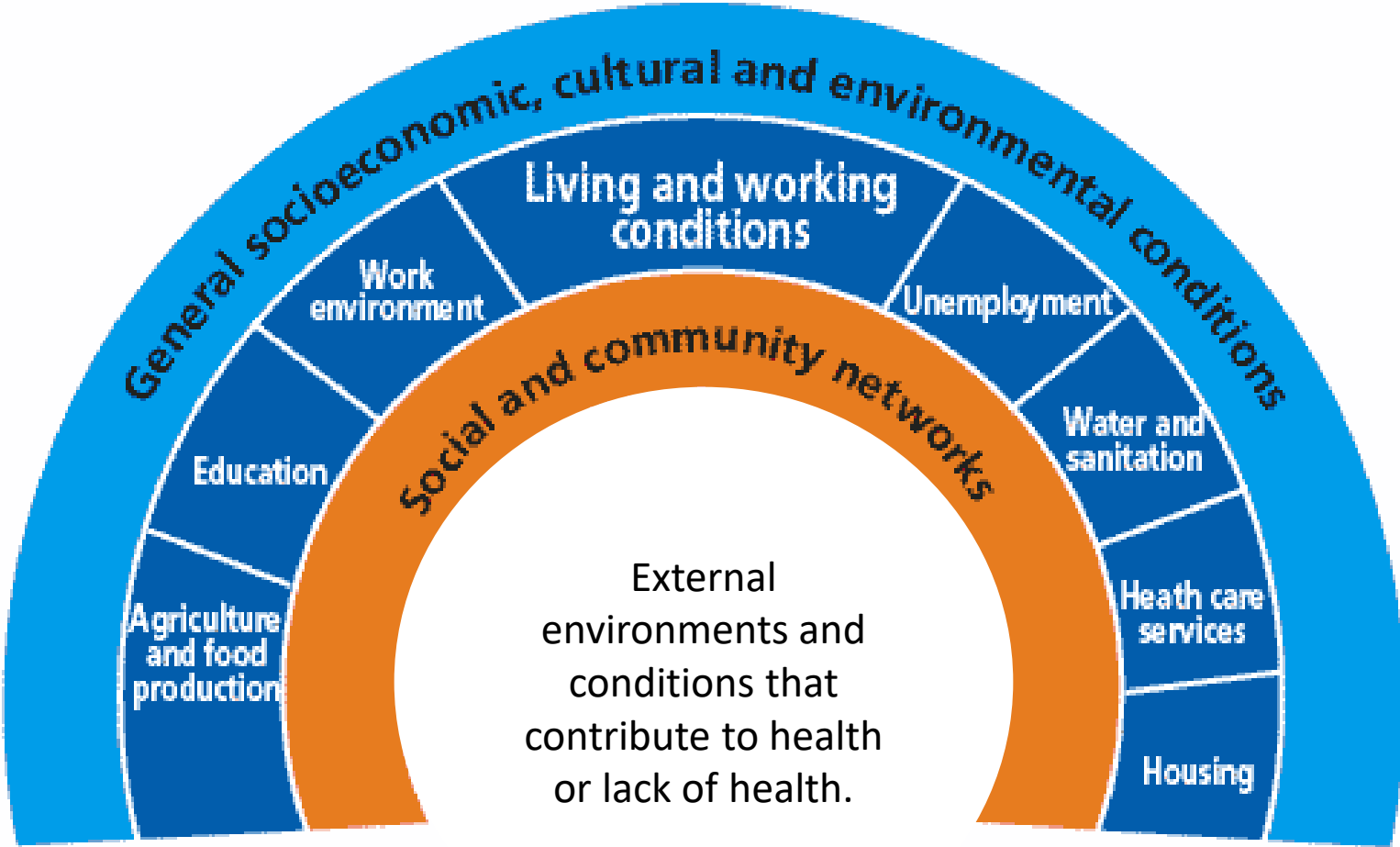
World Health Organization 1948

Public Health

"Public health is what we, as a society, do collectively to assure the conditions in which (all) people can be healthy."

Institute of Medicine (1988), Future of Public Health

Factors that determine health

Tarlov AR. Public policy frameworks for improving population health.
Ann N Y Acad Sci 1999; 896: 281-93.

Social Determinants of Health

General socioeconomic, cultural and environmental conditions

Living and working conditions

Social and community networks

Work environment

Unemployment

Education

Water and sanitation

Agriculture and food production

Heath care services

Housing

External environments and conditions that contribute to health or lack of health.

Health Equity

Attainment of the highest level of health possible for all people. Achieving health equity requires valuing everyone with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health disparities and health care disparities

Health Inequity

Health Inequity—Differences in health status between more and less socially and economically advantaged groups, caused by *systematic* differences in social conditions and processes that effectively determine health. Health inequities are *avoidable*, *unjust*, and therefore *actionable*.

Disparities, Inequality, and Inequity

- *DISPARITY = INEQUALITY* and implies <u>differences</u> between individuals or population groups (UN-equal)

- *INEQUITY* refers to differences which are unnecessary and avoidable but, in addition, are also considered unfair and unjust

- https://www.youtube.com/watch?v=vX_Vzl-r8NY&feature=youtu.be (4:09)

Health disparity

A *population-specific* difference in the presence of disease, health outcomes, or access to health care – could be people over 70 die more often than people under 10 years old.

Health INEQUITY - differences which are UNFAIR, UNJUST and AVOIDABLE

An example:
Hispanic teenage girls are six times more likely to have a baby as white teenage girls.

Health equity

Assurance of the condition for optimal health for all people.
Dr. Camara Jones

Working together to advance health equity will eliminate health inequities that are unfair, unjust and avoidable!
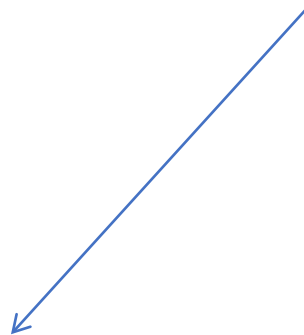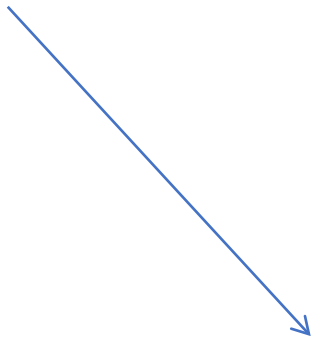
*So, what **extra** resources and supports do our Hispanic teenage girls need to avoid having a baby?*

EQUALITY

EQUITY

Working with Our HEART

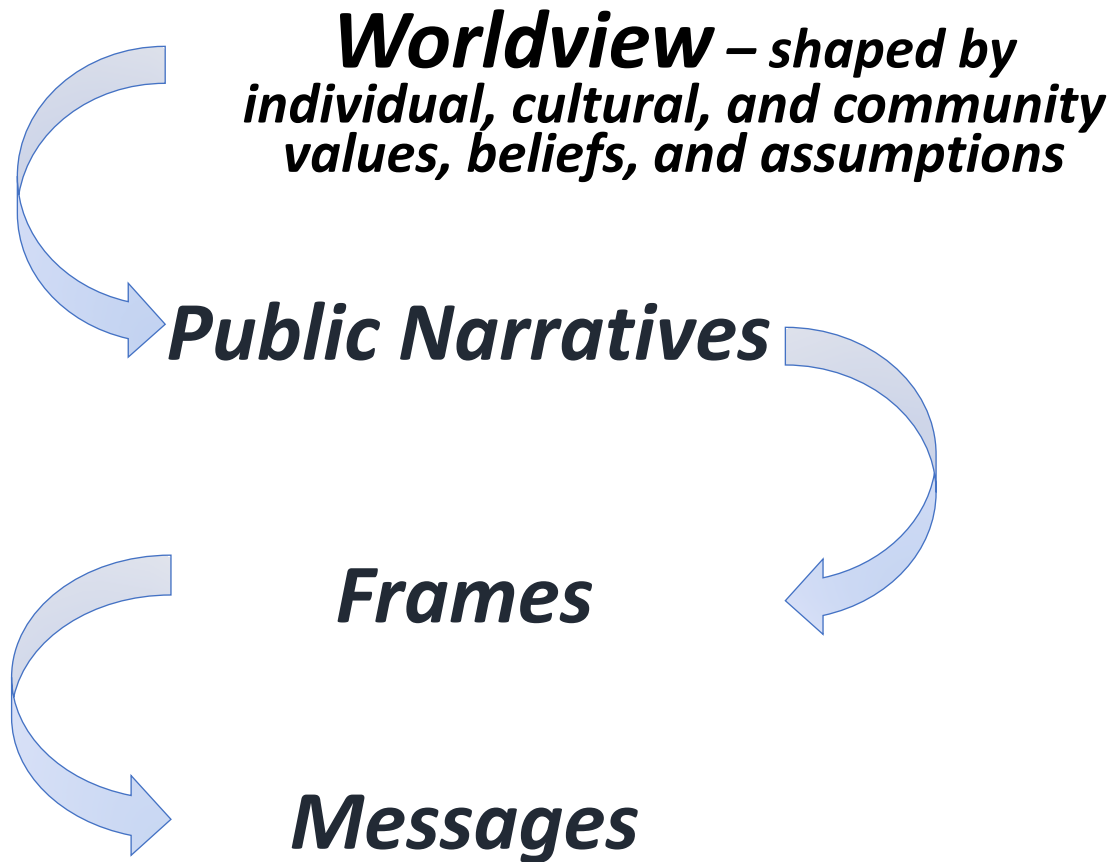CULTIVATING **SYMPATHY**   CULTIVATING **ADMIRATION**

CONNECTING TO ONE ANOTHER – EXPANDING OUR INNER CIRCLES
CROSSING TOWN AND COUNTY LINES – PUTTING OURSELVES IN PLACES THAT
WE DON'T NORMALLY GO – BEING OPEN TO FRIENDSHIP – RECOGNIZING
SAMENESS

Advancing Health Equity:
Achieving Optimal Health for All

- Expand the understanding about what creates health
- Strengthen community capacity to create their own healthy future
- Promote a Health in All Policies approach with health equity as the goal

Expand the understanding about what creates health

Worldview – shaped by individual, cultural, and community values, beliefs, and assumptions

Public Narratives

Frames

Messages

Structural inequities

- Structures or systems of society — such as finance, housing, transportation, education, social opportunities, etc. — that are structured in such a way that they benefit one population unfairly (whether intended or not).

Health equity and structural racism:

- Structural racism is the normalization of an array of dynamics — historical, cultural, institutional and interpersonal — that routinely advantage white people while producing cumulative and chronic adverse outcomes for people of color and American Indians.

- https://eji.org/report/reconstruction-in-america/

- https://youtu.be/r4e_djVSag4 (5:50) *Slavery to Mass Incarceration*

- https://youtu.be/HRj35PtXnLs (6:19) *History of Reconstruction*

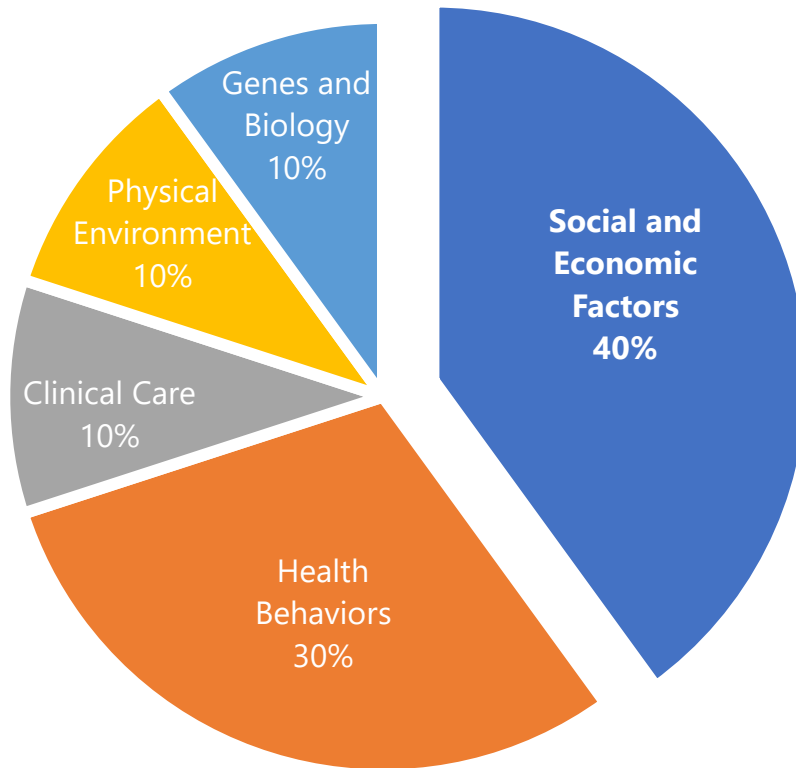# Start with a broad definition of health

- *"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity."* WHO 1948

- *"Health is a resource for everyday life, not the objective of living."*

Ottawa Charter for Health 1986

Consider What Creates Health
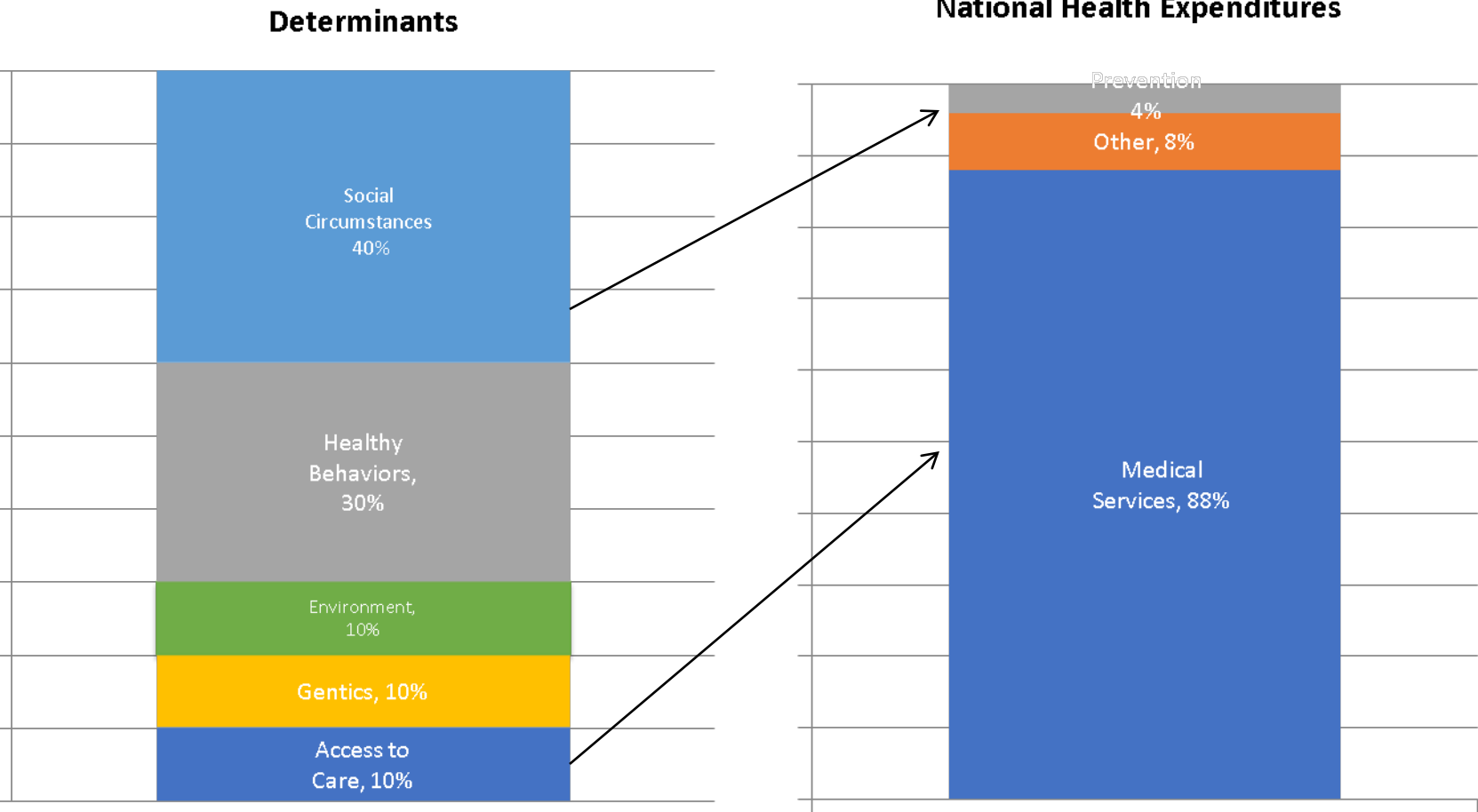
Determinants of Health

Pie chart:
- Social and Economic Factors 40%
- Health Behaviors 30%
- Clinical Care 10%
- Physical Environment 10%
- Genes and Biology 10%

• Necessary conditions for health (WHO)

- ❋ Peace
- ❋ Shelter
- ❋ Education
- ❋ Food
- ❋ Income
- ❋ Stable eco-system
- ❋ Sustainable resources
- ❋ Mobility
- ❋ Social justice and equity

Determinants of Health Model based on frameworks developed by: Tarlov AR. *Ann N Y Acad Sci* 1999; 896: 281-93; and Kindig D, Asada Y, Booske B. *JAMA* 2008; 299(17): 2081-2083.

World Health Organization. Ottawa charter for health promotion. International Conference on Health Promotion: The Move Towards a New Public Health, November 17-21, 1986 Ottawa, Ontario, Canada, 1986. Accessed July 12, 2002 at <http://www.who.int/hpr/archive/docs/ottawa.html>.

Spending Mismatch: Health Care and Other Key Determinants of Health

Determinants

- Social Circumstances 40%
- Healthy Behaviors, 30%
- Environment, 10%
- Gentics, 10%
- Access to Care, 10%

National Health Expenditures

- Prevention 4%
- Other, 8%
- Medical Services, 88%

Source: NEHI, 2012

The Real Narrative About
What Creates Health Inequities

- Disparities are not just because of lack of access to health care or to poor individual choices.

- Disparities are mostly the result of policy decisions that systematically disadvantage some populations over others.
  - Especially, populations of color and American Indians, GLBT, and low income
  - Structural Racism

Strengthen community capacity to create their own healthy future
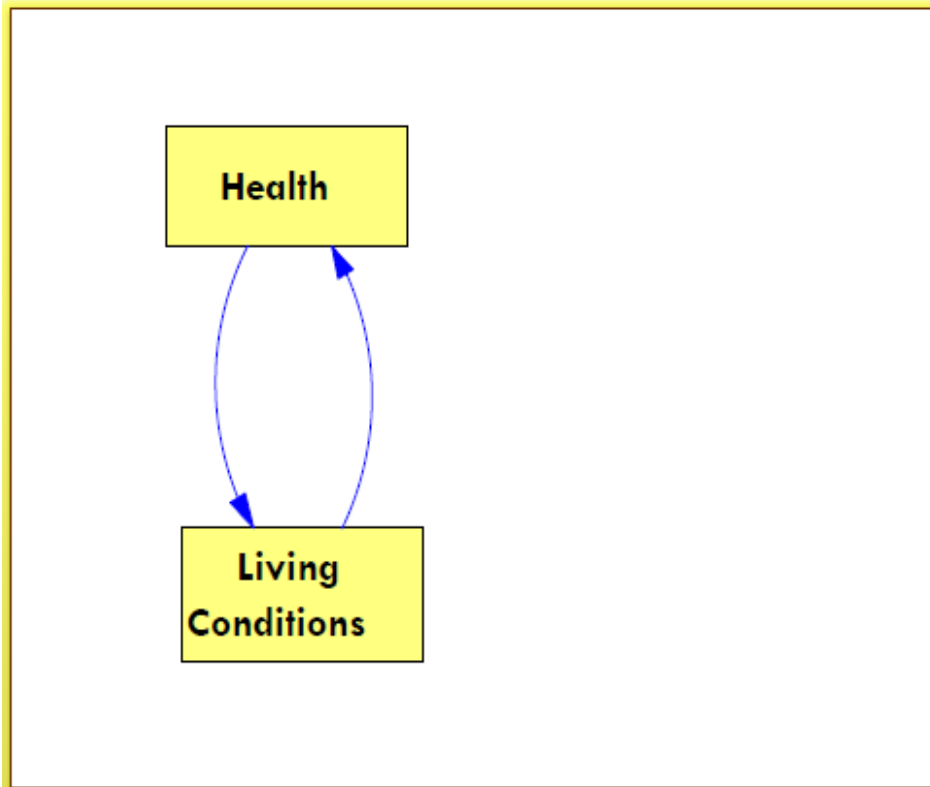
Health is not determined solely by medical care and personal choices but mostly by living conditions.

Improving Living Conditions and Health: Organize the Capacity to Act
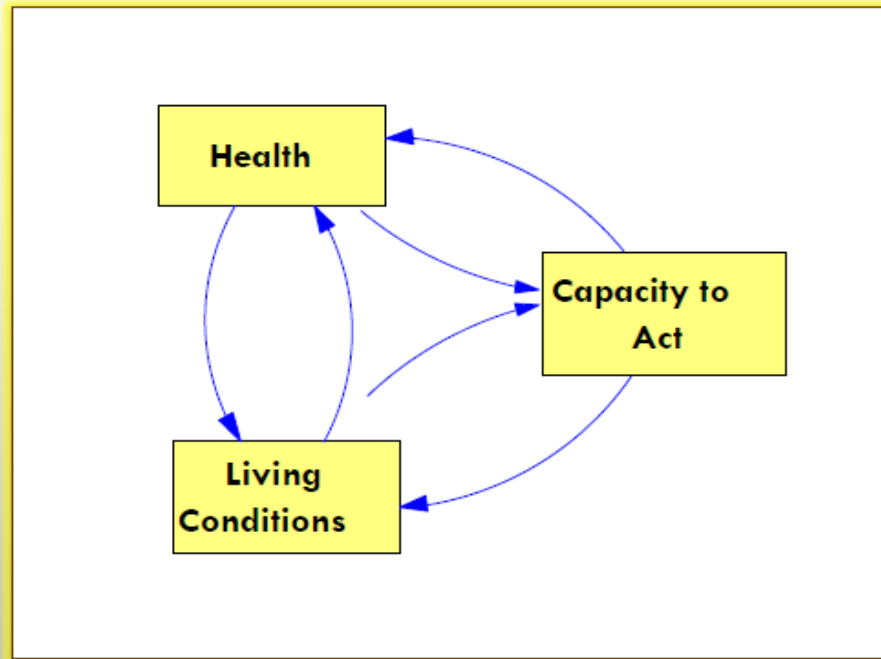
- Narrative:
  - Align the narrative to build public understanding and public will.

- People:
  - Directly impact decision makers, develop relationships, align interests.

- Resources:
  - Identify/shift the resources-infrastructure-the way systems and processes are structured.
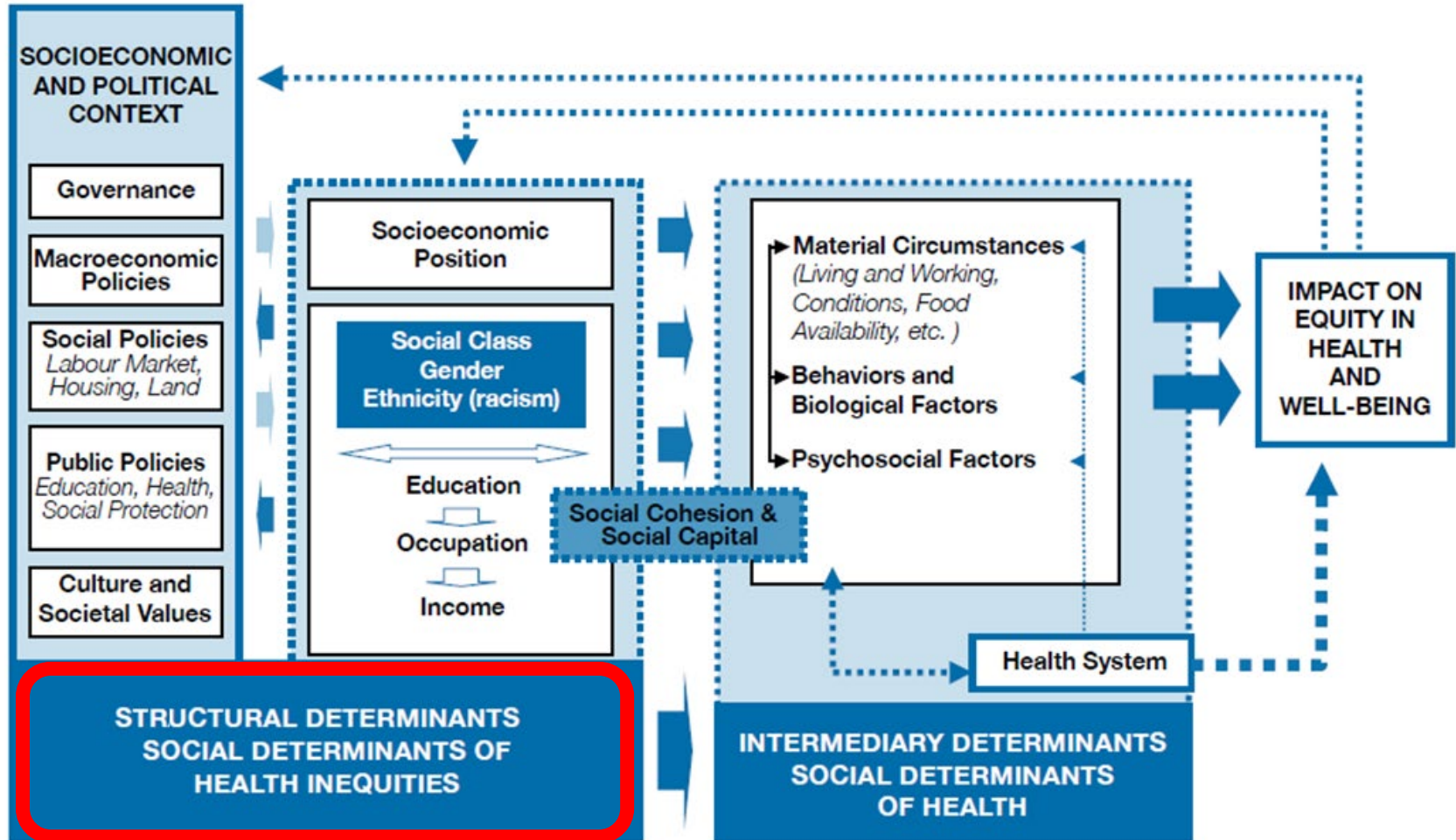
Understanding Sexual Identity Expression

- https://www.youtube.com/watch?v=mtYuUL3OdUY
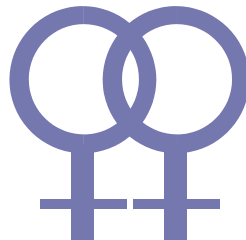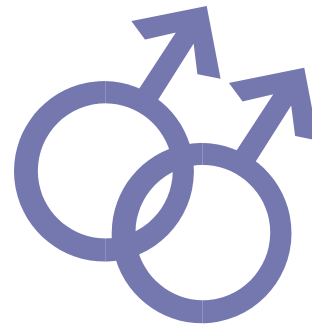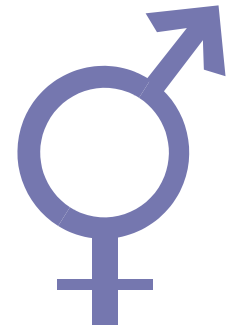
Understanding Sexual Identity Expression

https://commons.wikimedia.org/wiki/Sexual_identity_symbols

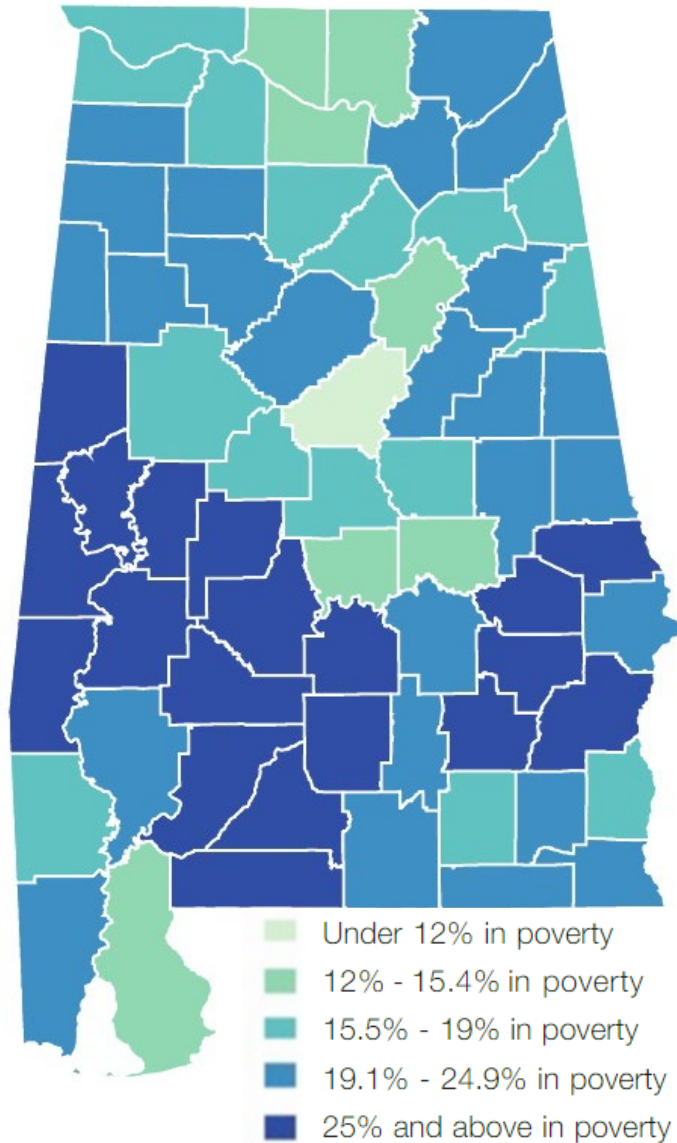# Promote a Health in All Policies approach with health equity as the goal

Commission on Social Determinants of Health. (2010). *A conceptual framework for action on the social determinants of health*. Geneva: World Health Organization.

Plantation Culture 1860

Total Population in 1860

Over 24,400

18,000 to 24,400

11,500 to 18,000

Under 11,500

fraction, slave population

fraction, white population
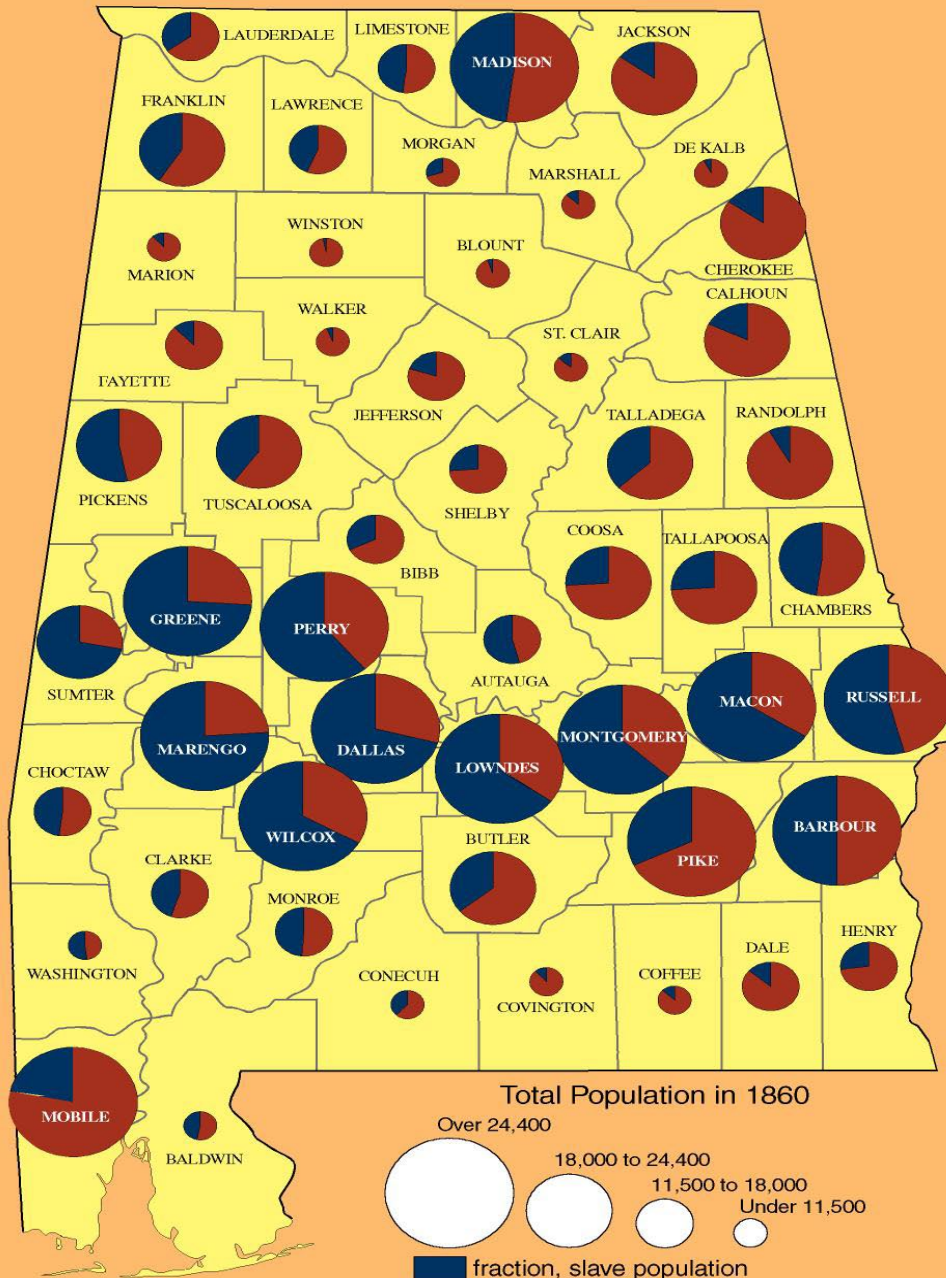
Produced by the Cartographic Reseach Lab at the University of Alabama for Robert J. Norrell's *The Alabama Journey*. It is used here with his permission.
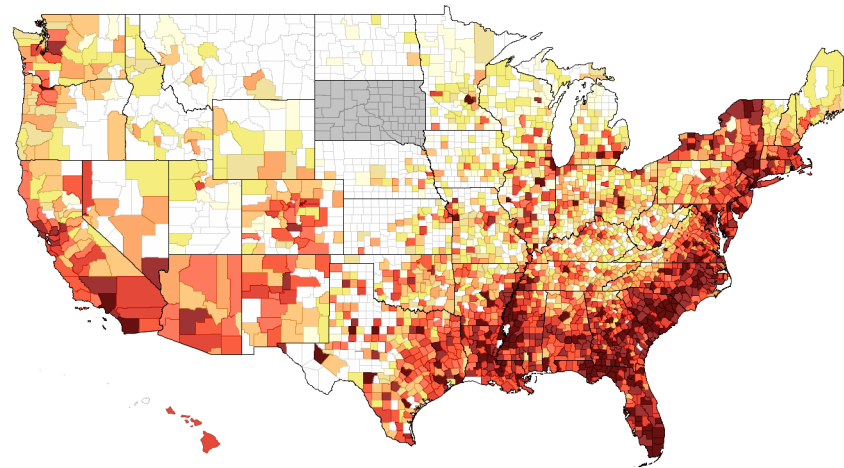
25

Poverty in Alabama 2016

Under 12% in poverty
12% - 15.4% in poverty
15.5% - 19% in poverty
19.1% - 24.9% in poverty
25% and above in poverty

Source: AlabamaPossible.org

HIV Burden in the South

"The **stigma** surrounding AIDS is a key reason that the South is the **epicenter** of new HIV infections in the United States. **Half** of all new infections in the United States are in the **South**…"
-The Washington Post
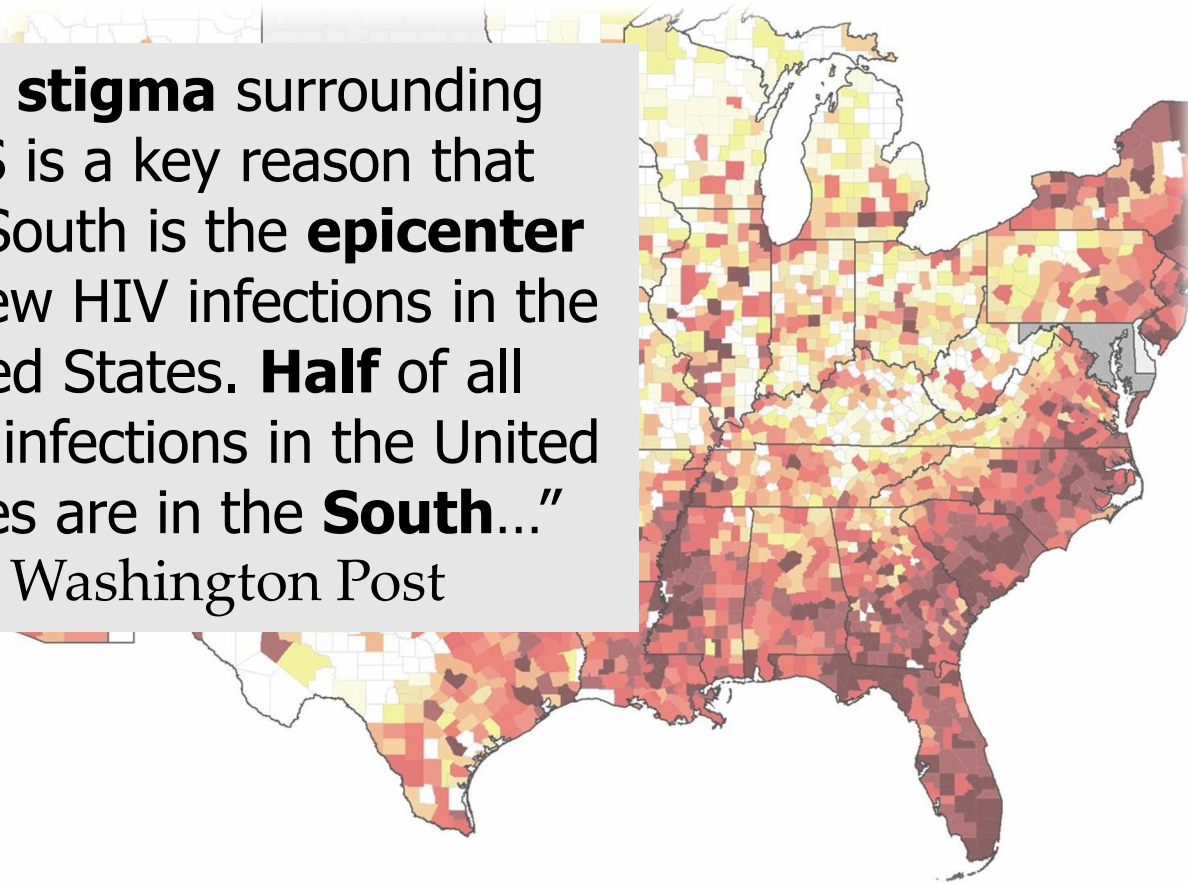
Rates of Persons Living with Diagnosed HIV, by County, 2013

Rates of Persons Living with Diagnosed HIV, by County, 2013

AIDSVu

| 0 - 40 | 41 - 60 | 61 - 70 | 71 - 90 | 91 - 110 | 111 - 140 | 141 - 190 | 191 - 260 | 261 - 410 | 411+ |

Data not shown *
Data not released to AIDSVu**

Rates displayed are the number of cases per 100,000 people.
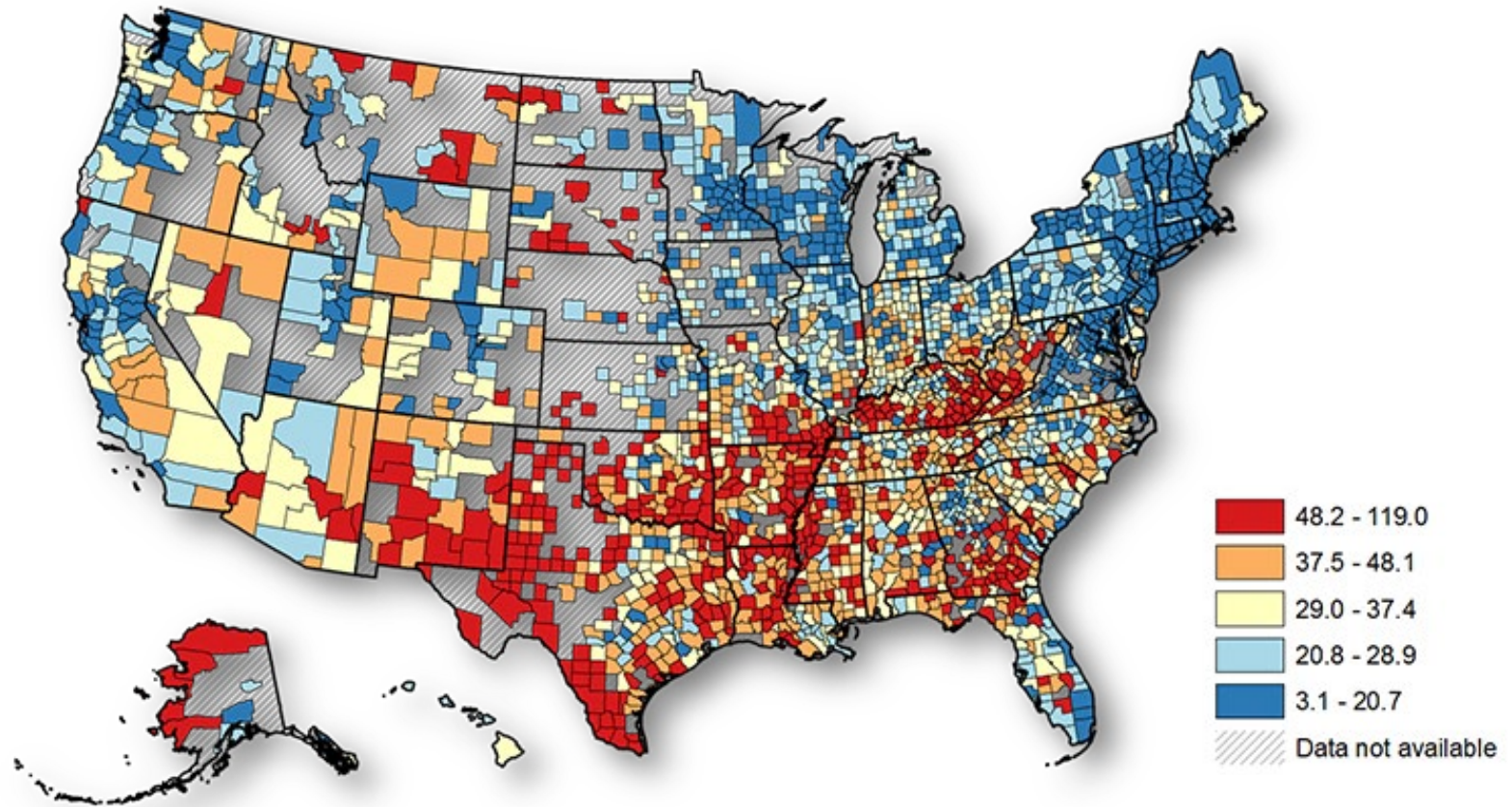*Data not shown to protect privacy because of a small number of cases and/or a small population.
**State health department, per its HIV data re-release agreement with CDC, requested not to release data to AIDSVu.
NOTE: There are no county-level maps for Alaska, District of Columbia, and Puerto Rico because there are no counties in these states.

The Deep South Has the Highest Teen Birth Rates in the Nation

■ (red)	48.2 - 119.0
■ (orange)	37.5 - 48.1
■ (pale yellow)	29.0 - 37.4
■ (light blue)	20.8 - 28.9
■ (dark blue)	3.1 - 20.7
▨	Data not available

Source: www.cdc.gov/teenpregnancy

The Deep South Has the Highest Teen Birth Rates in the Nation

Alabama is among the top 10

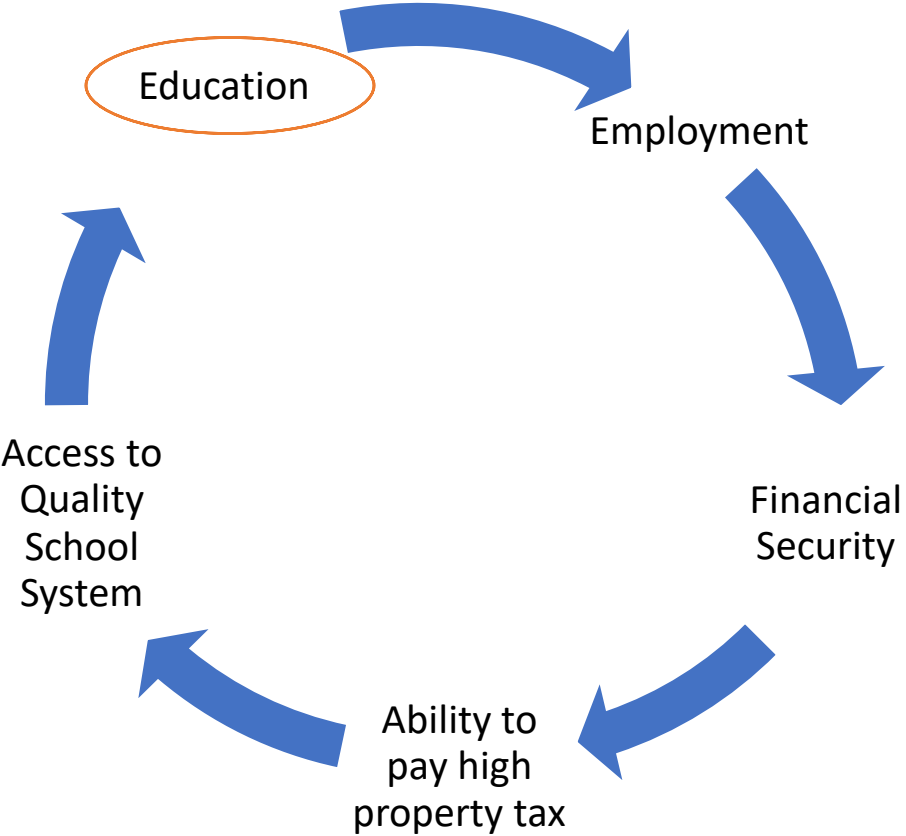| Rank	State
1	Mississippi
2	New Mexico
3	Arkansas
4	Texas
5	Oklahoma
6	Louisiana
7	Kentucky
8	West Virginia
9	Alabama
10	Tennessee
11	South Carolina
12	Arizona

Source: www.guttmacher.org, 2014
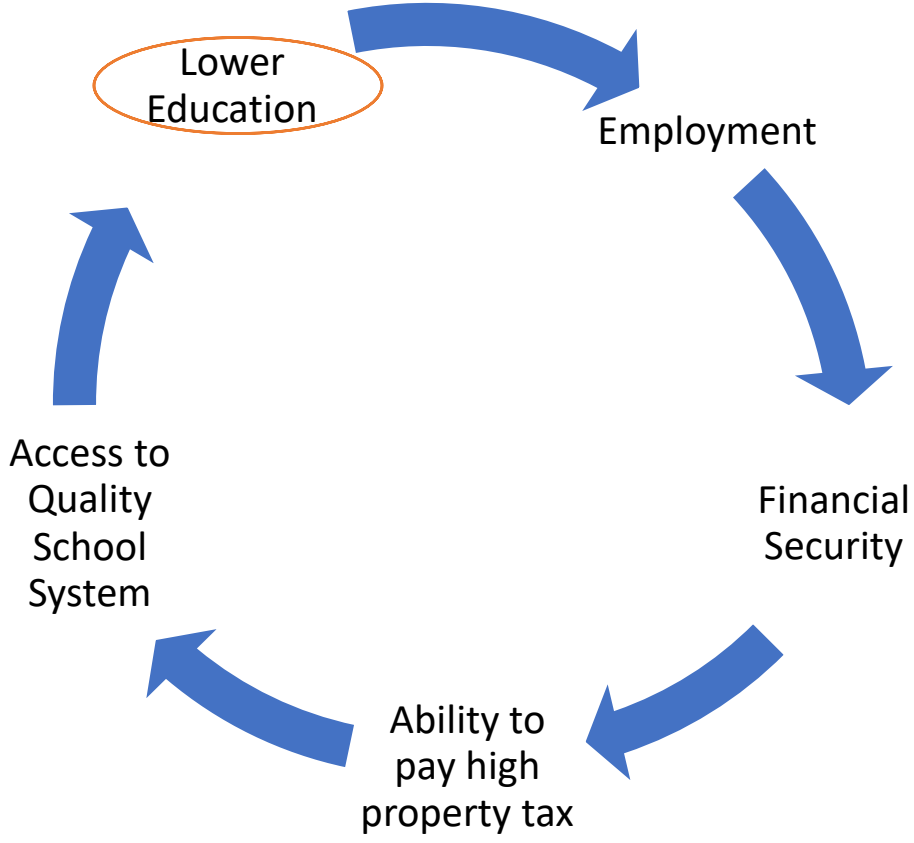
What is Structural Inequity?

- Systematic or Structural elements of society that benefit one population unfairly.
  - Finance
  - Housing
  - Transportation
  - Education
  - Social Opportunities
  - ETC…

From Minnesota Department of Health Office of Health Statistics, Advancing Health Equity in Minnesota, 2014

Structural Inequity

Education → Employment → Financial Security → Ability to pay high property tax → Access to Quality School System → Education
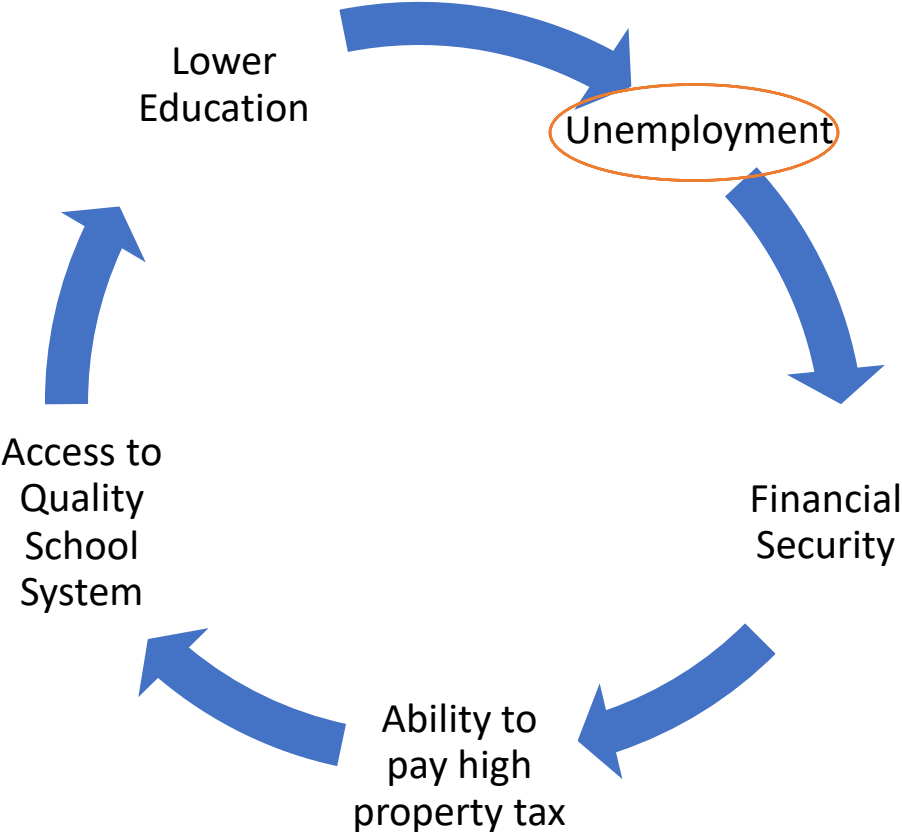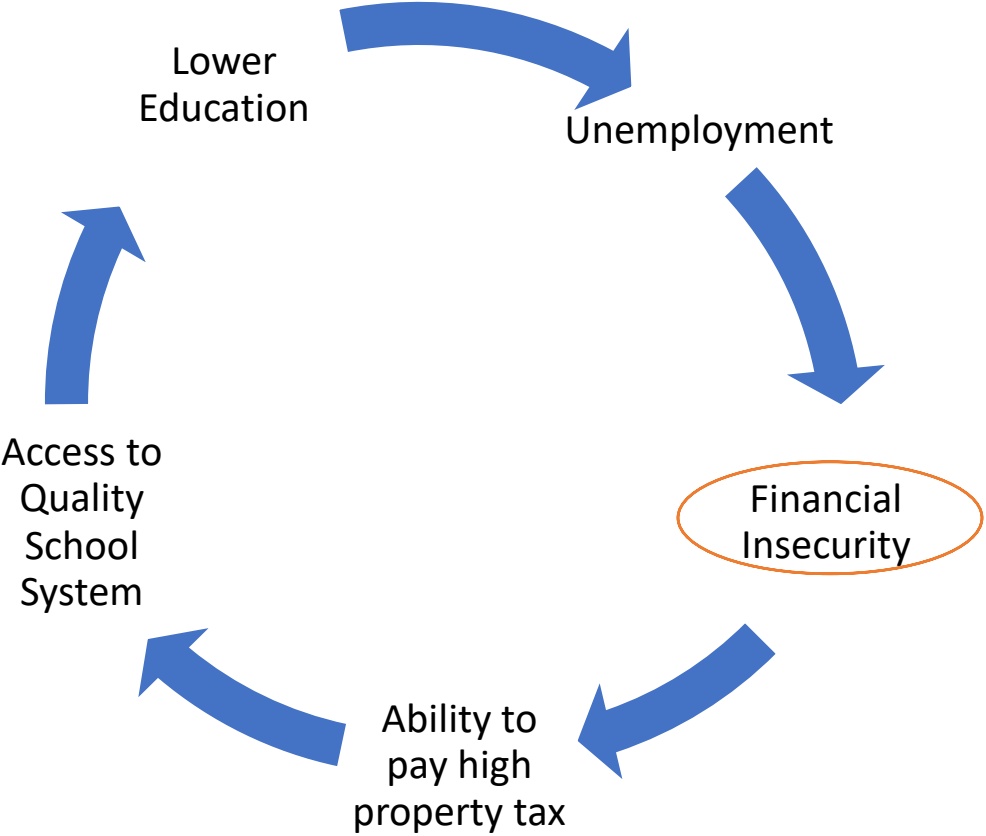
Structural Inequity
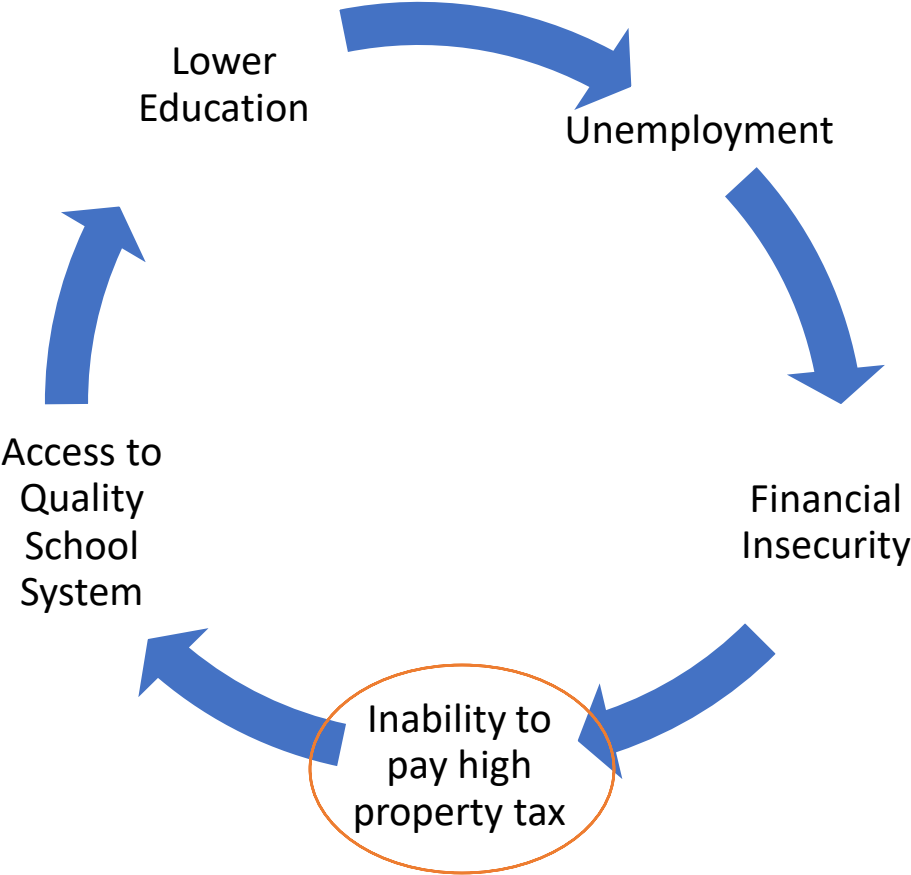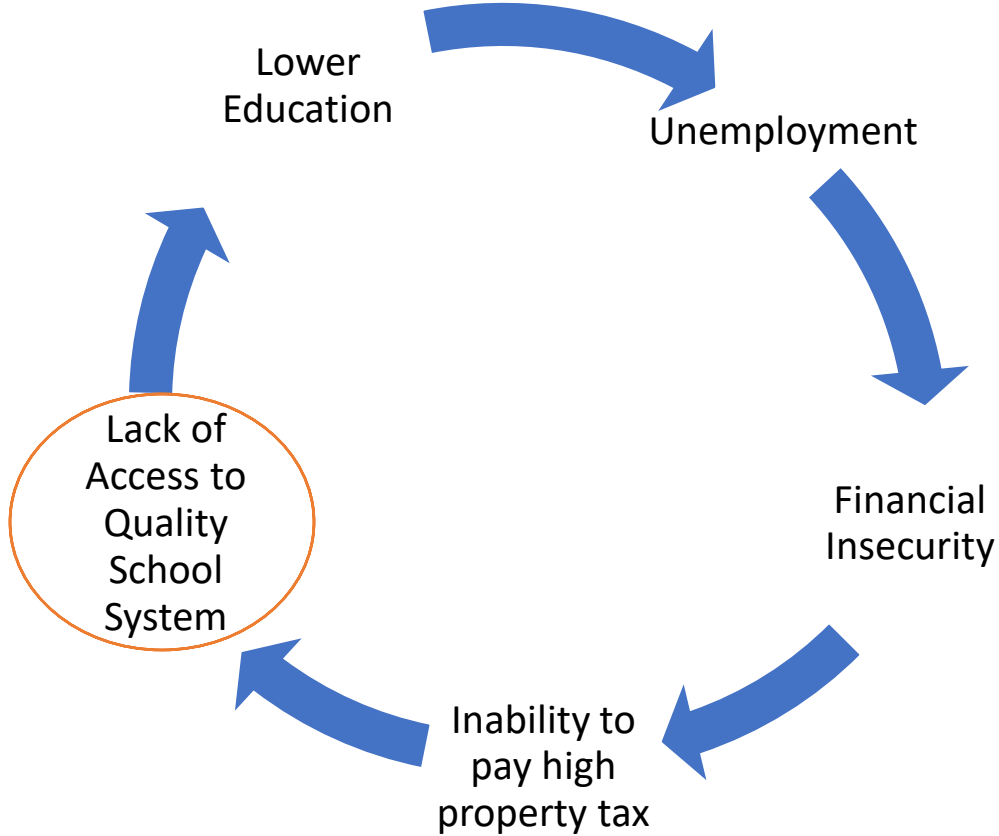
Structural Inequity

Structural Inequity

Structural Inequity

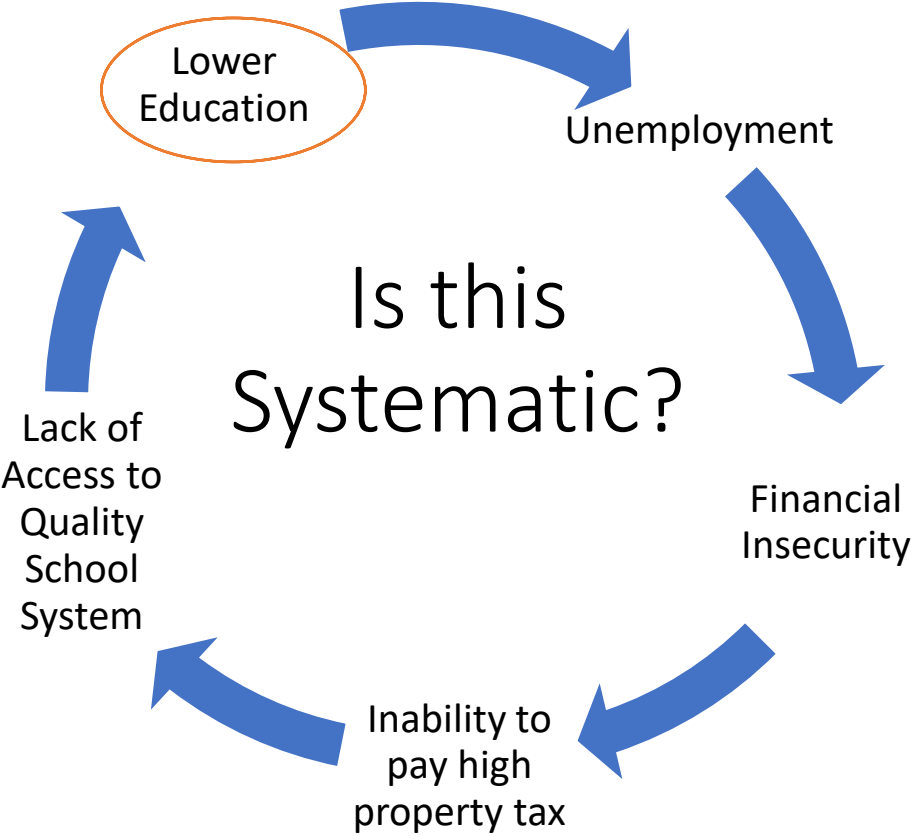# Structural Inequity

Structural Inequity

Lower Education → Unemployment → Financial Insecurity → Inability to pay high property tax → Lack of Access to Quality School System → (back to Lower Education)

Is this Systematic?

Everyone needs:

- Access to economic and educational opportunities *(high school graduation, access to jobs, transportation, etc.)...*

- The capacity to make decisions and effect change for ourselves, our families and our communities *(empowerment of women, community self-governance, opportunities for civic participation, etc.)...*

Everyone needs (cont'd)...

- Social and environmental safety in the places we live, learn, work, worship and play *(housing conditions, crime rates, school climate, social norms and attitudes, etc.)* and

- Culturally-competent and appropriate services when the need arises *(access to health care, mental health care, financial assistance, etc.)*

What needs to be done

- Achieving health equity and eliminating health disparities requires valuing everyone and making intentional, consistent efforts to address avoidable systematic inequalities, historical and contemporary injustices.

To create change

- *Public understanding* – of what creates health

- *Public agenda* – create expectation that we can and will address these conditions

- *Public/political will* – to make tough choices- accountability for policies, programs

SEXUAL ORIENTATION

GENDER IDENTITY

AGE

RACE

GENDER EXPRESSION

ABILITY STATUS
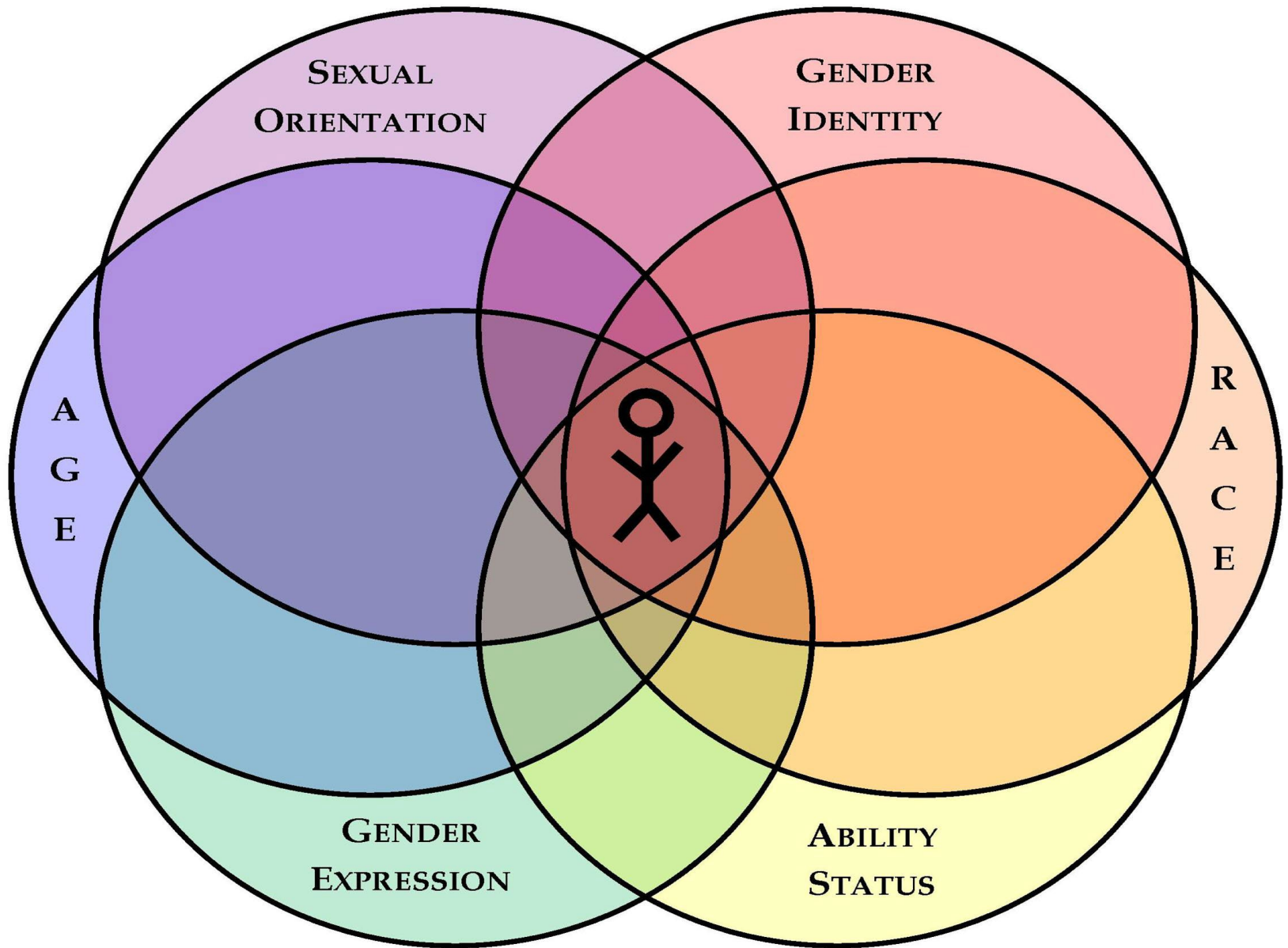
WHEN THE HEART and MIND WORK TOGETHER

LIBERATION

Questions & Comments

References

- *Health Equity*. Minnesota Department of Health. Retrieved from http://www.health.state.mn.us/divs/opi/healthequity/resources/bloomington-health-equity.html

- Collins, J. *Health Equity*. Partners for a Healthier Community, Inc. Presented at the Western Massachusetts Health Equity Summit, 2013.

- Medical AIDS Outreach