

Introduction to Social Determinants of Health & Promotion of Health Equity

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Learning Objectives

- 1) Define health, health equities and disparities and social determinants of health.
- 2) Understand the dynamic between health and social factors.
- 3) Be familiar with national and region-specific data regarding health inequity.
- 4) Discuss evidence-based strategies for the promotion of health equity.

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Learning objective #1

Define health, health equity & disparity and social determinants of health.



Health

Health is about more than what happens in a doctor's office or a hospital room.

Health is what allows us to engage fully in the activities of our daily lives and to make meaningful contributions to our communities. It is fundamental to human well-being, but it is not equally distributed across our community.

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Health equity

Attainment of the highest level of health for all people

Health equity efforts ensure that all people have full and equal access to opportunities that enable them to lead healthy lives.

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Health inequity & disparity

- **Health Inequities** Differences in health that are avoidable, unfair, and unjust
- **Health Disparities** Differences in health outcomes among groups of people
 - Usually in reference to a negative effect on the health of people who have systematically experienced greater obstacles to health, often from characteristics historically linked to discrimination, such as race or ethnicity, religion, gender, mental health etc

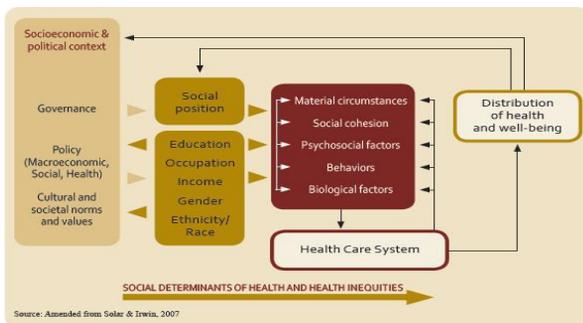
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Social determinant of health

The circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness, are social determinants of health.

These circumstances are in turn shaped by a wider set of forces: economic policies and systems, development agendas, social norms, social policies and political systems

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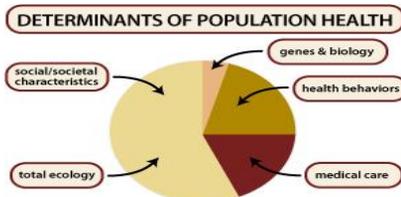


Learning objective #2

Understand the dynamic between health and social factors.



There are challenges to good health that go beyond personal choice



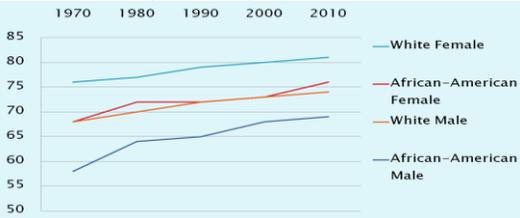
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Jasmine: a story of two lives

<https://forthesakeofall.org/2014/06/23/jasmine/>

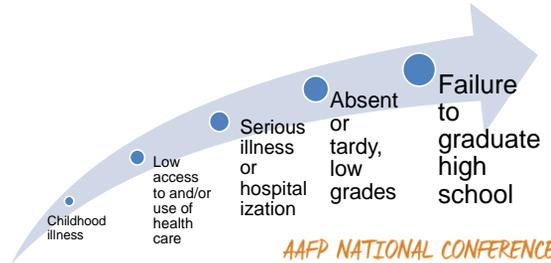
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The link between gender, race & health Life expectancy at birth, by race & sex: US, 1970-2009



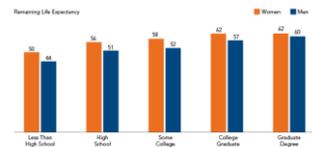
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The link between education & health



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Remaining Years of Life for U.S. Adults at Age 25 by Educational Attainment, 2005



Source: Brian L. Rostron et al., "Education Reporting and Classification on Death Certificates in the United States," *Vital and Health Statistics Series 2*, no. 151 (2010): 1-16.

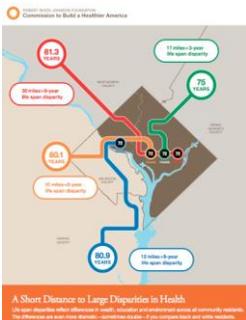
Years of life remaining at age 25 by educational level

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The link between neighborhood & health

High-Poverty	Low-Poverty
More likely to have fast food chains, liquor stores, convenience stores	More likely to have supermarkets, banks or other anchor institutions
More likely to have greater exposure to pollution and violent crime	More likely to have safe places for recreation

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Life expectancy by different neighborhoods within the same metropolitan area

http://www.rwjf.org/en/culture-of-health/2013/01/stable_jobs_health.html

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The link between employment and health

- A job brings not only income but also:
 - Health insurance
 - Benefits such as wellness programs
 - Ability to provide proper child care
 - Retirement benefits
 - Resources to live health-promoting neighborhoods

Lacking the above is stressful, which in turn contributes to a variety of health problems.

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Since 1977, the life expectancy of male workers retiring at age 65 has risen 6 years for those in the top half of income distribution but only 1.3 years in those in the bottom half.

http://www.nwif.org/en/culture-of-health/2013/01/stable_jobs_health.html

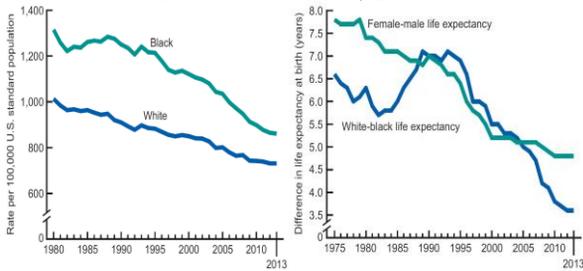
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Learning objective #3

Be familiar with national and region-specific data regarding health inequity.



National Vital Statistics Report, Deaths in the US, 2013



State of Missouri, 2012 MO Department of Health and Human Services

	Total	Male	Female	White	Black
Life expectancy, in years	77.2	74.6	79.7	77.7	73.0

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St. Louis metropolitan area, 2010 MO Department of Health and Human Services

	Some college education or higher	Unemployment rates	Poverty
Caucasian	70%	8%	8%
African-American	50%	22%	30%

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St. Louis metropolitan area, 2010 incidence per 100,000 MO Department of Health and Human Services

	Heart disease	Cancer	Stroke	Diabetes
Caucasian	175	161	40	15
African-American	256	216	53	45

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Tools

- National Center for Health Statistics:
National Vital Statistics System
<http://www.cdc.gov/nchs/nvss/index.htm>
- Robert Graham Center
<http://www.graham-center.org/rgc/home.html>

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Small Group DISCUSSION

In what ways have you personally witnessed health inequity as a medical student or resident?

What unique health inequities exist in your region, state or local community?

What local resources exist to study health inequities in your community?

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Learning objective #4

Discuss evidence-based strategies for the promotion of health equity.



WHO is working to...

- Improve the conditions of daily life
- Tackle the inequitable distribution of power, money and resources globally, nationally and locally
- Measure the problem, evaluate action, expand the knowledge base, develop a workforce trained in social determinants and raise public awareness about social determinants of health

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CDC recommends individuals and organizations...

- Public Health Policy
 - Work with federal agencies, nongovernment organizations and philanthropies
- Data Systems
 - Work to create relevant metrics for social determinants of health that would be monitored by subject matter experts
- Agency Partnerships & Capacity Building
 - Work toward health equity in communities
- Prevention Research & Evaluation
 - Move toward participatory research that engages communities

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Healthy People 2020

- Economic stability
- Education
- Health & health care
- Neighborhood & built environment
- Social & community context

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Recommendations from For the Sake of All/Forward through Ferguson

1. Invest in quality early childhood development for all children.
2. Help low-to-moderate income families create economic opportunities.
3. Invest in coordinate school health programs for all students.
4. Invest in mental health awareness, screening, treatment & surveillance.
5. Invest in quality neighborhoods for all.
6. **IMPROVE ACCESS TO PRIMARY CARE:** Coordinate and expand chronic and infectious disease prevention and management.

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Large Group REFLECTION

What is one thing you know now that you did not know one hour ago?

What strategies could you, your medical school or your residency support or implement to improve health equity in your community?

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Q&A

References

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- 2) World Health Organization Social Determinants of Health Discussion Paper Series http://www.who.int/social_determinants/publications/en/ accessed 5/26/16
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- 5) Anderson LM, Adeney KL, Shinn C et al. Community coalition-driven interventions to reduce health disparities among racial and ethnic minority populations. Cochrane Database Syst Rev. 2015 Jun 15; 6.
- 6) Robert Wood Johnson Foundation.

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