

Social Determinants of Health and Equity

Patients First

Social Accountability: The Mission of Medicine

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May 20, 2011

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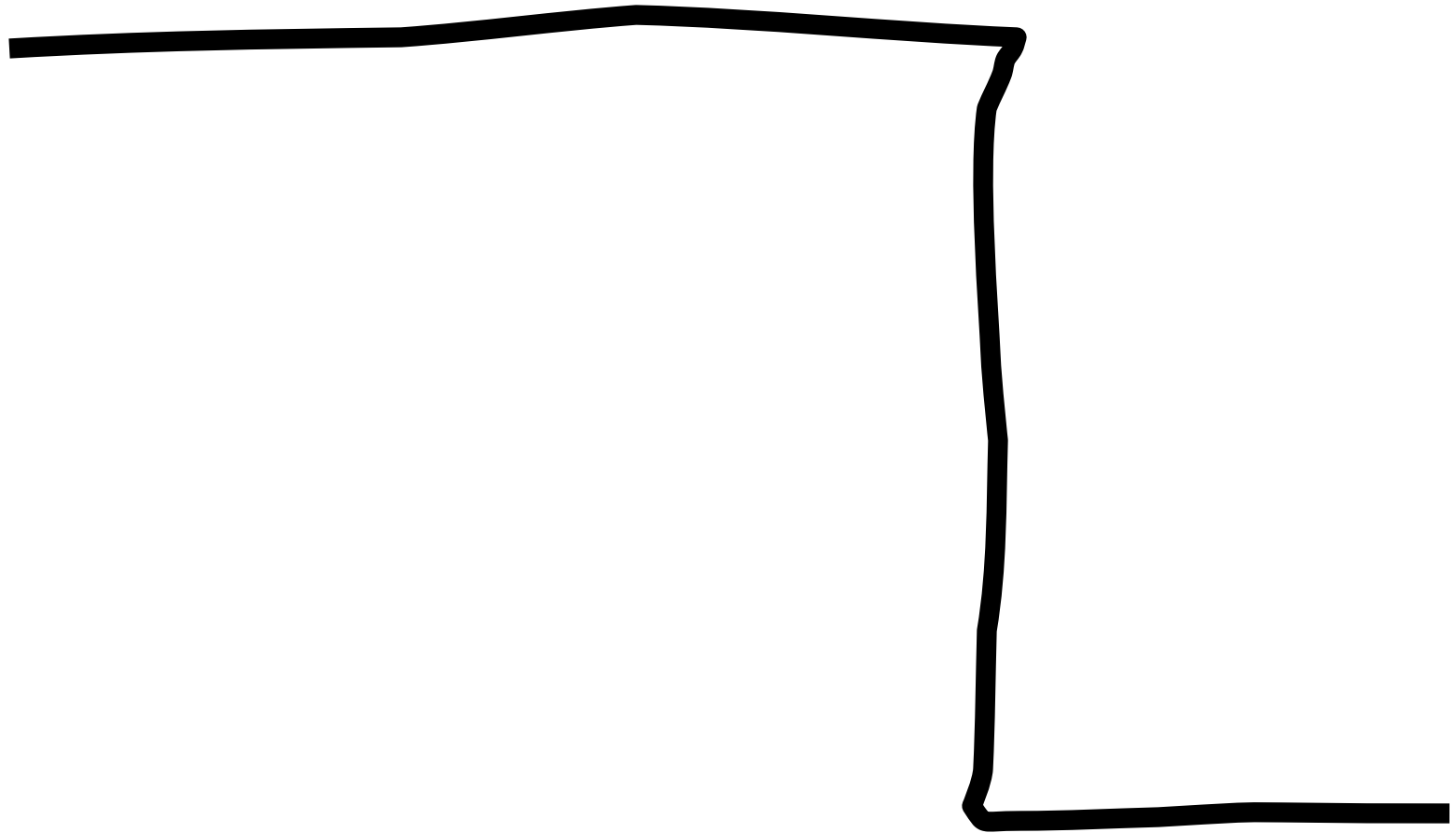
Patients First

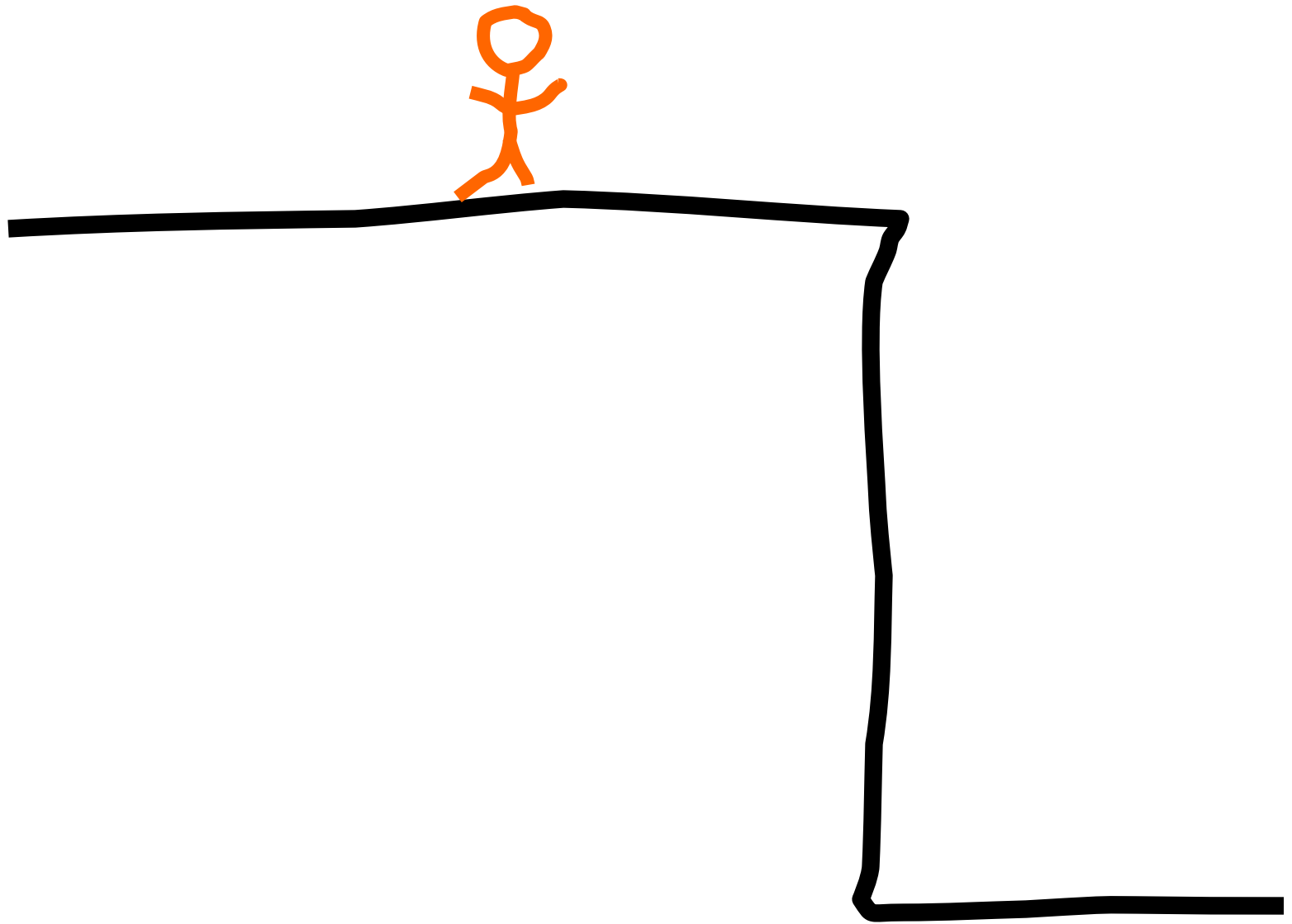
Social Accountability: The Mission of Medicine

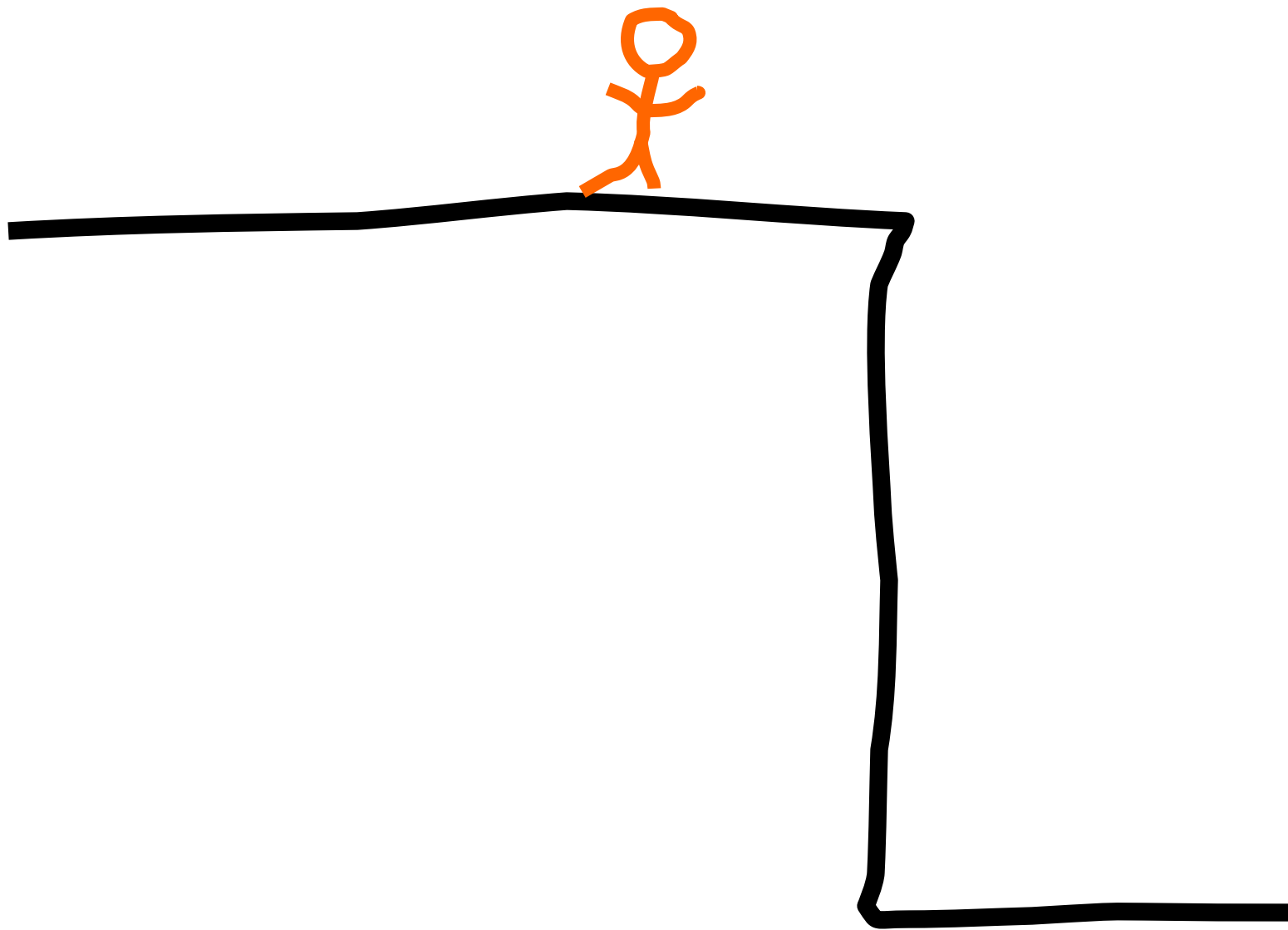
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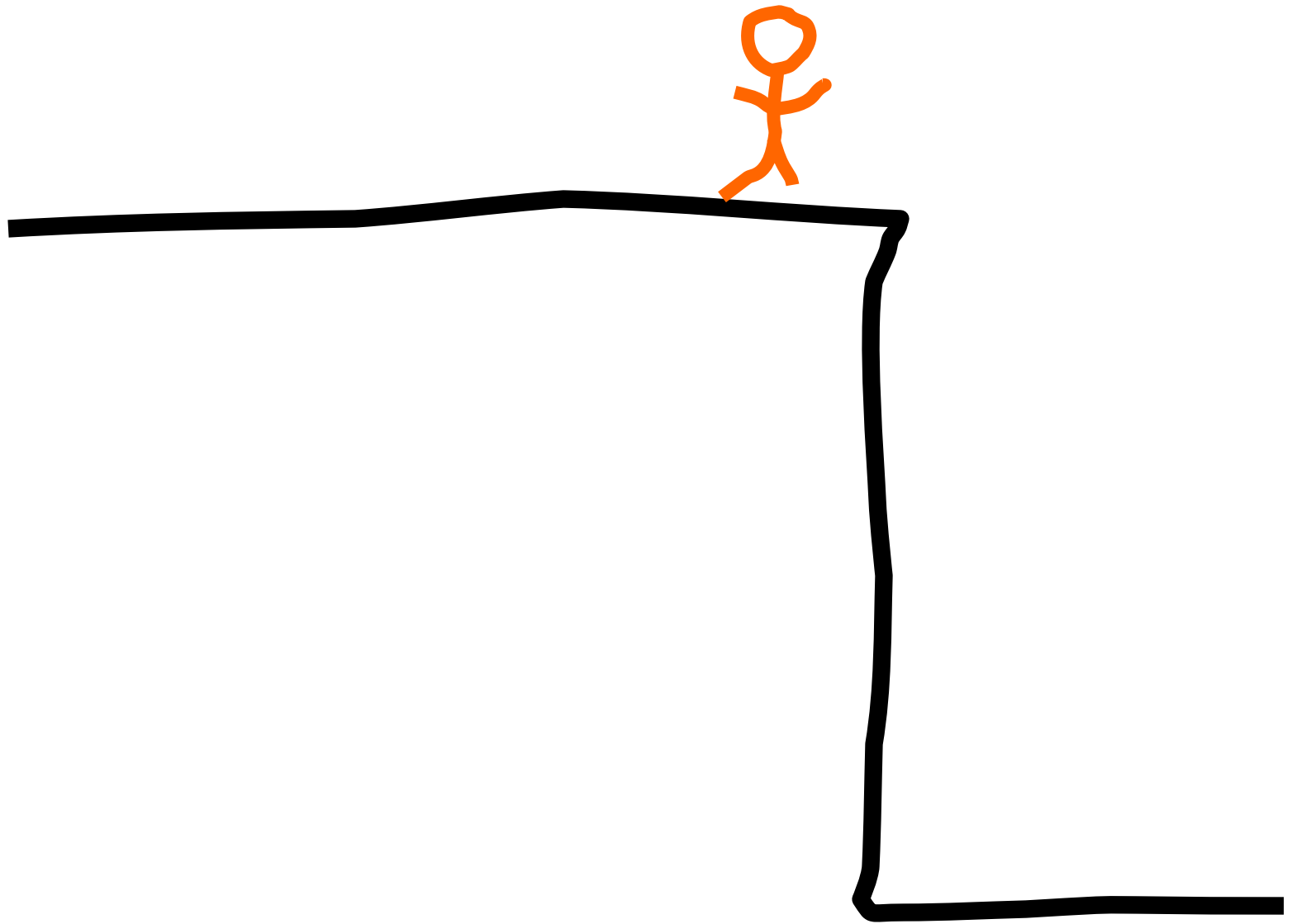
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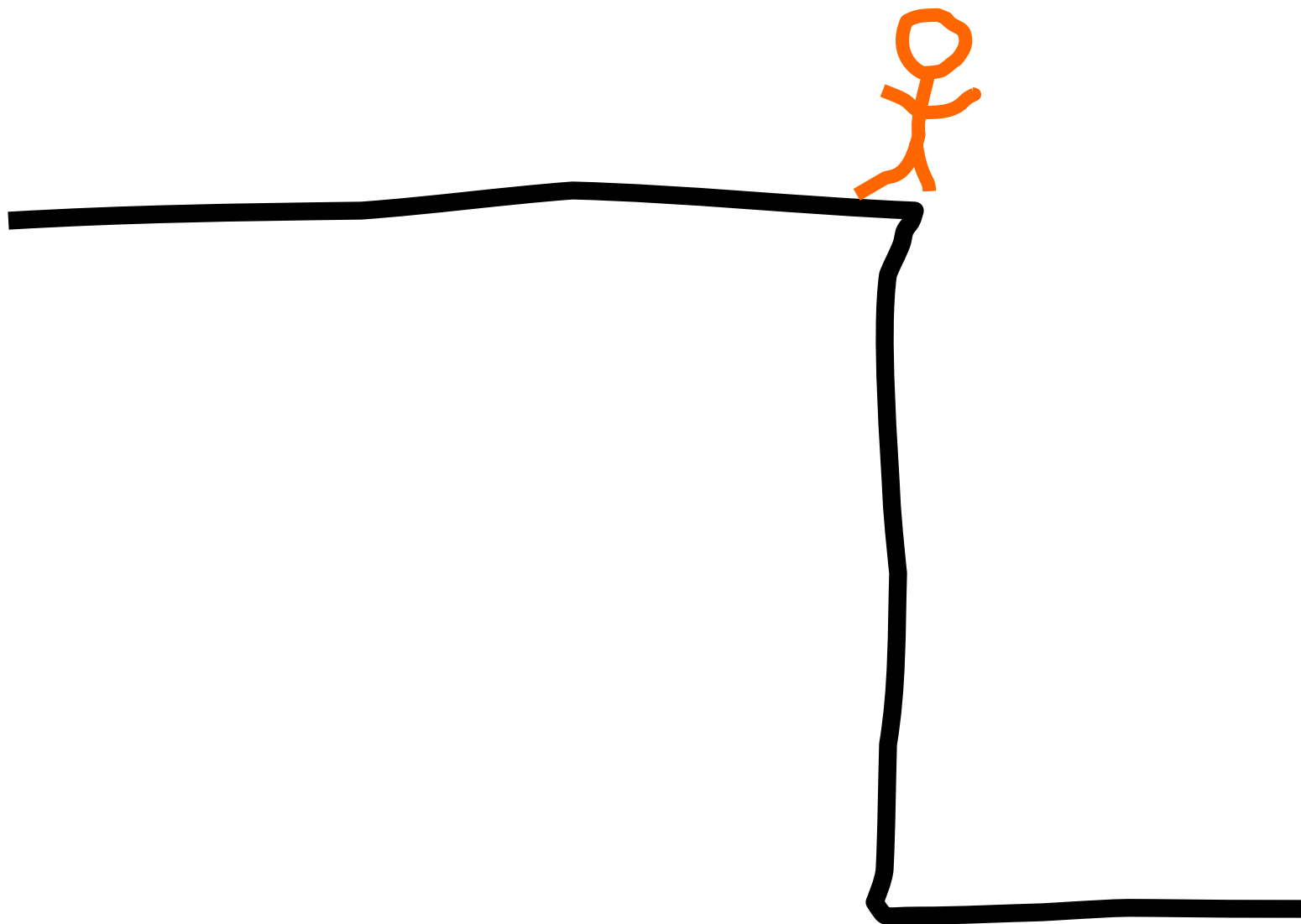
Levels of health intervention

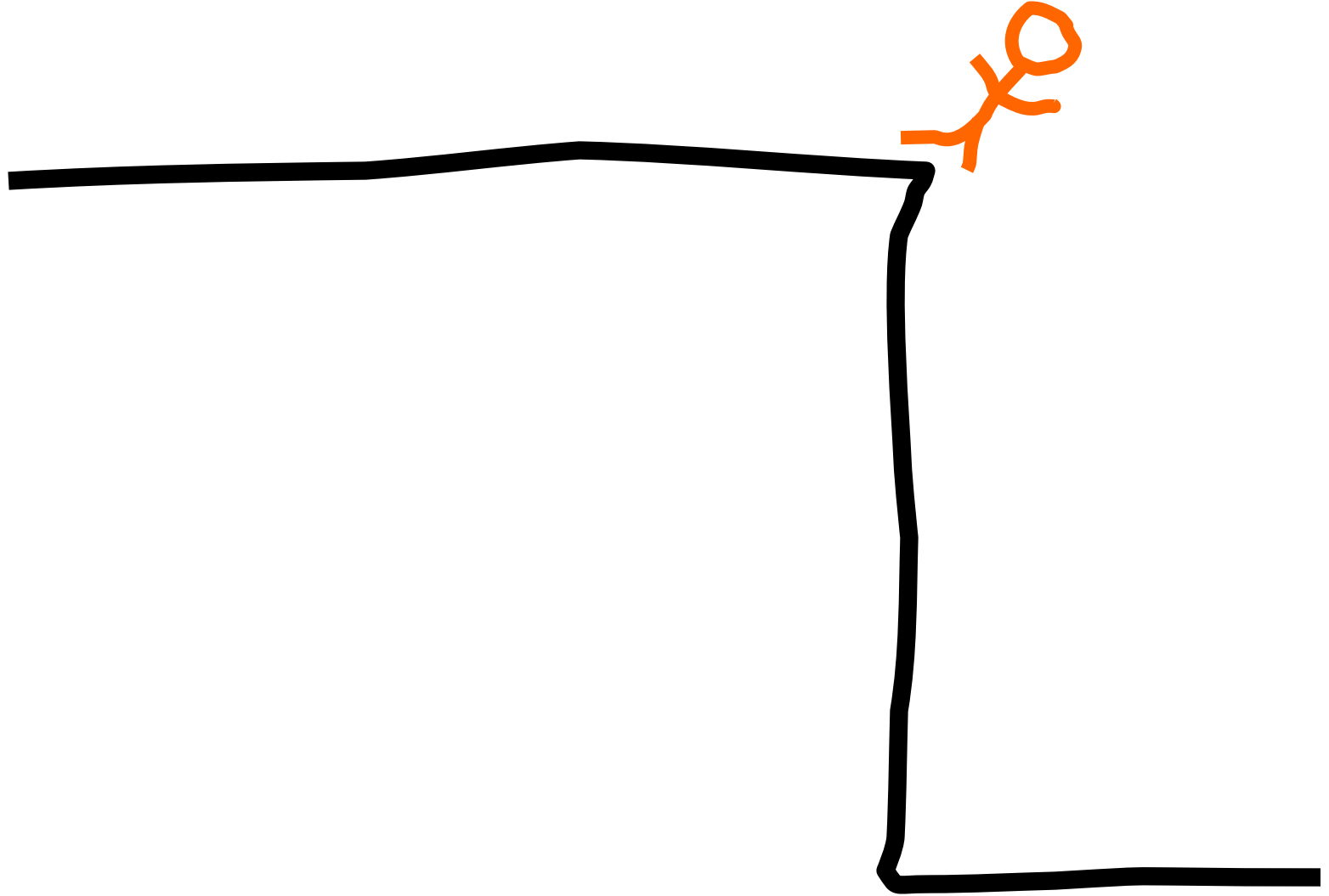


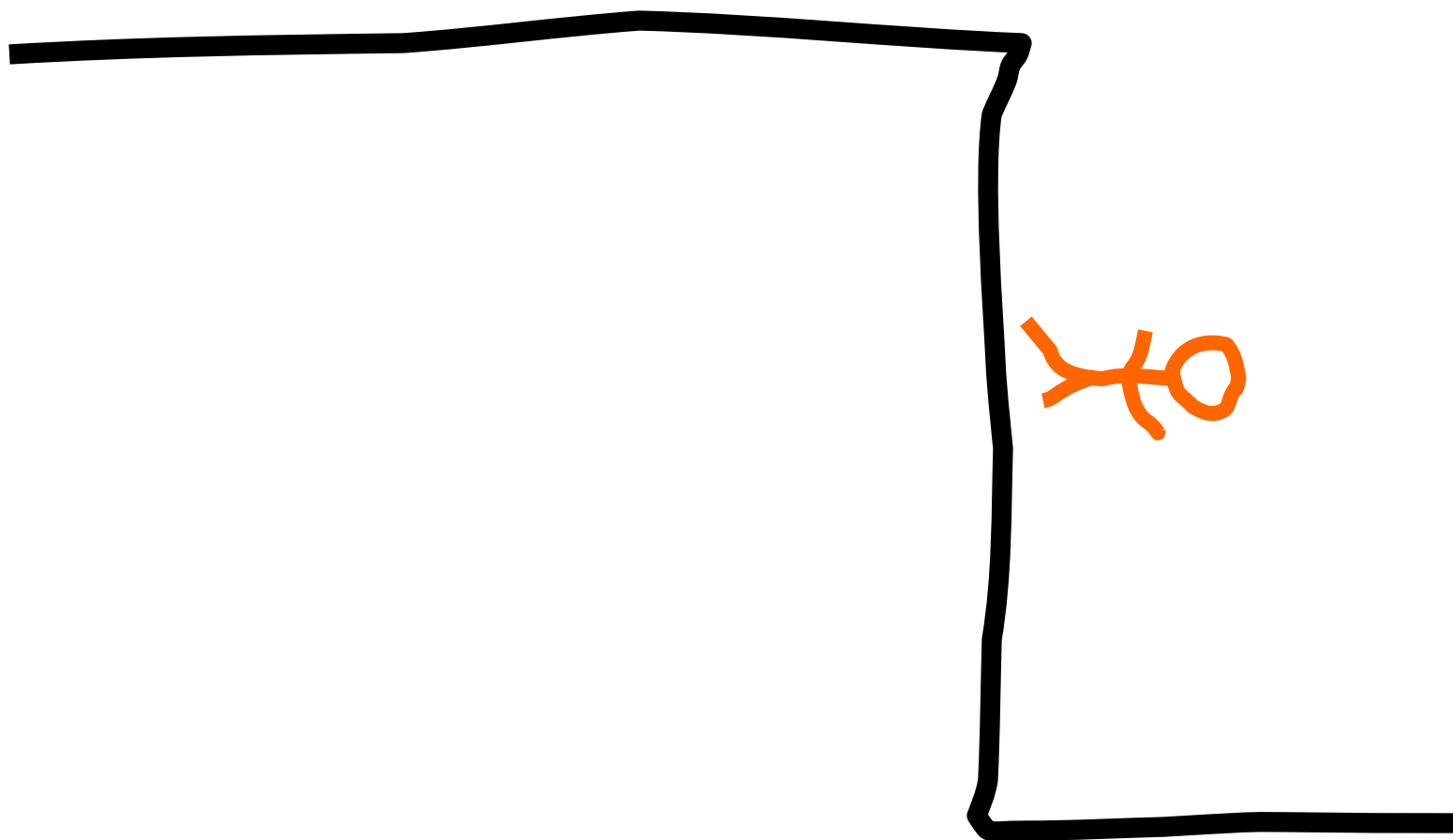


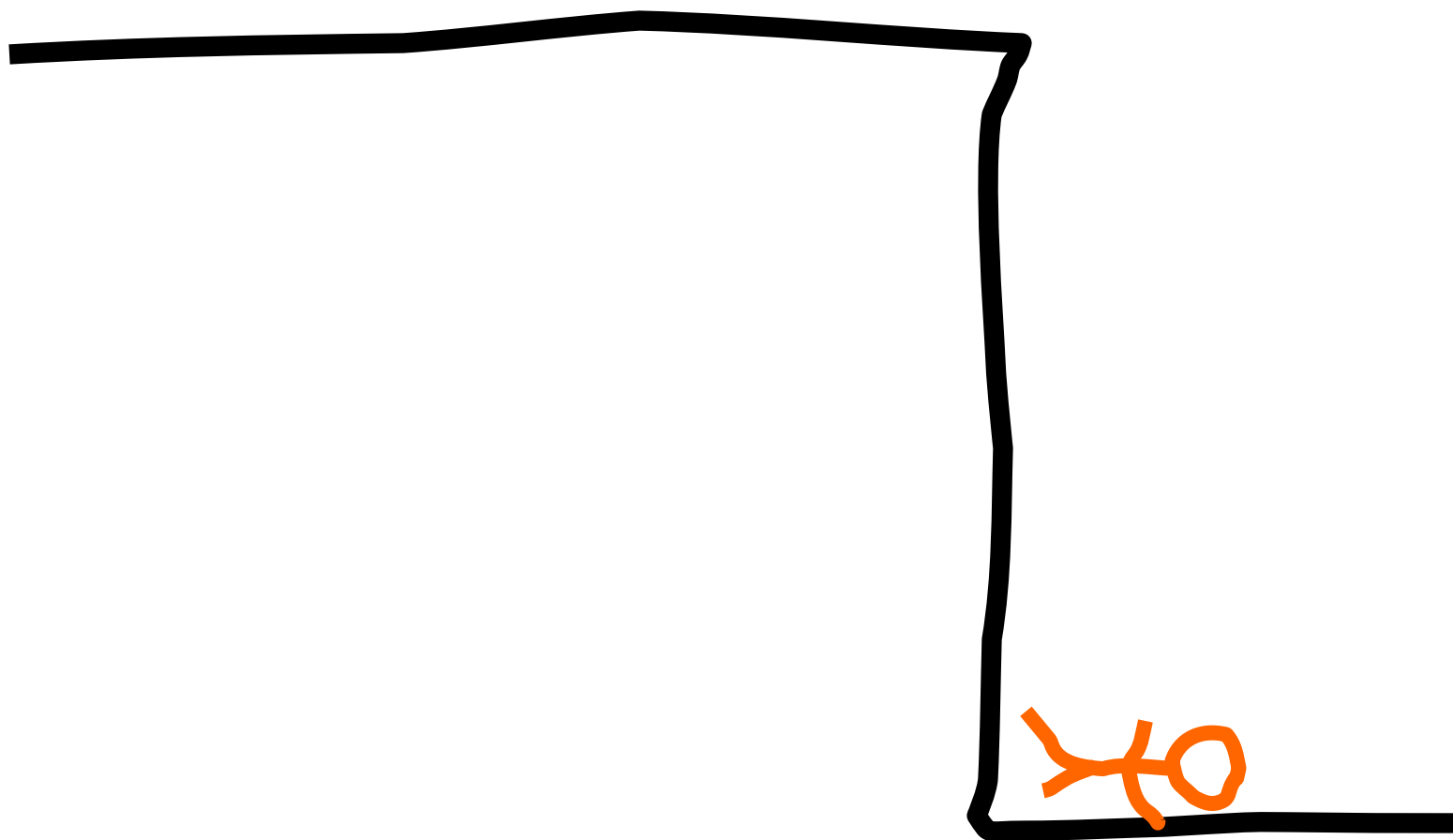


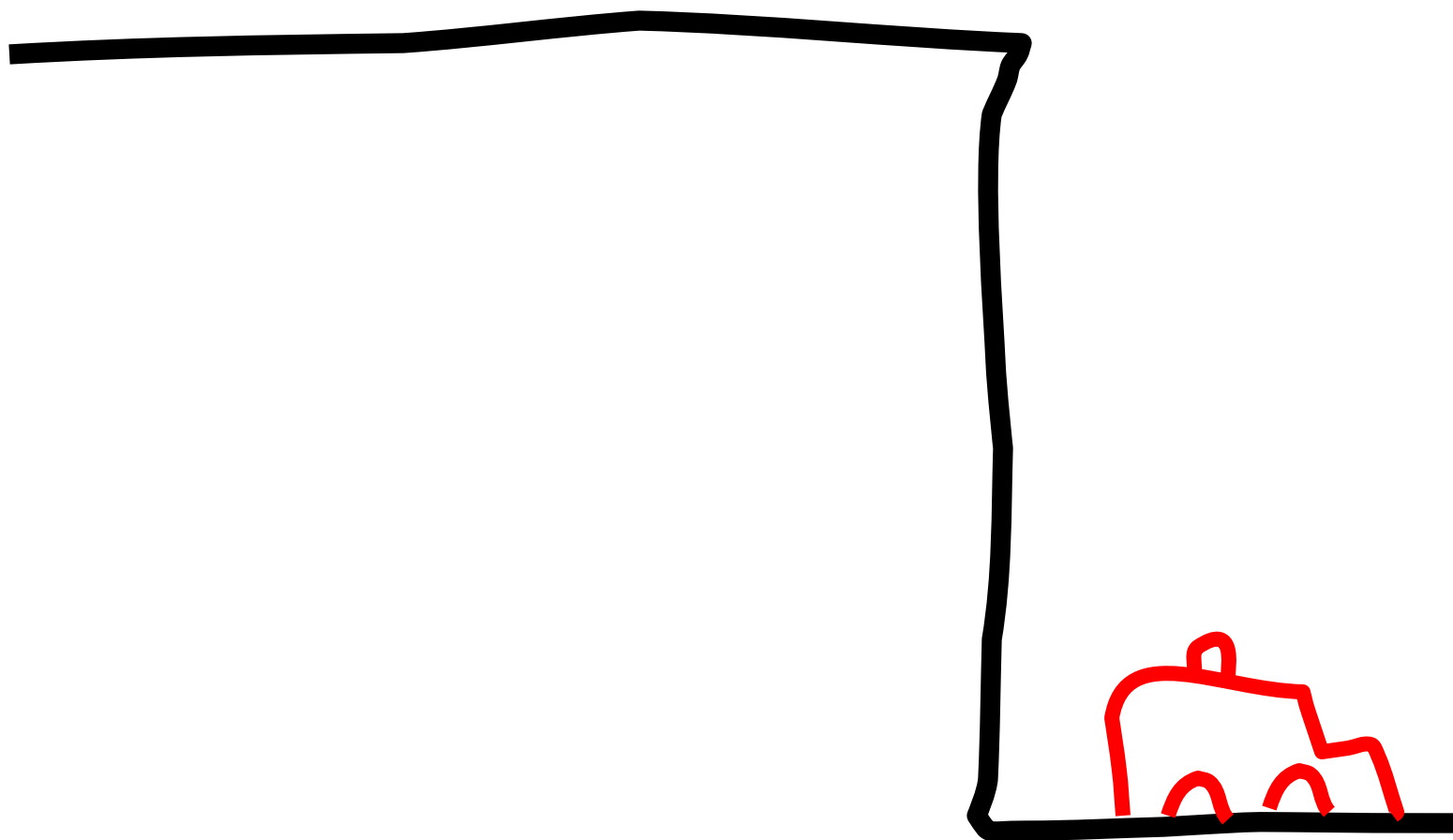


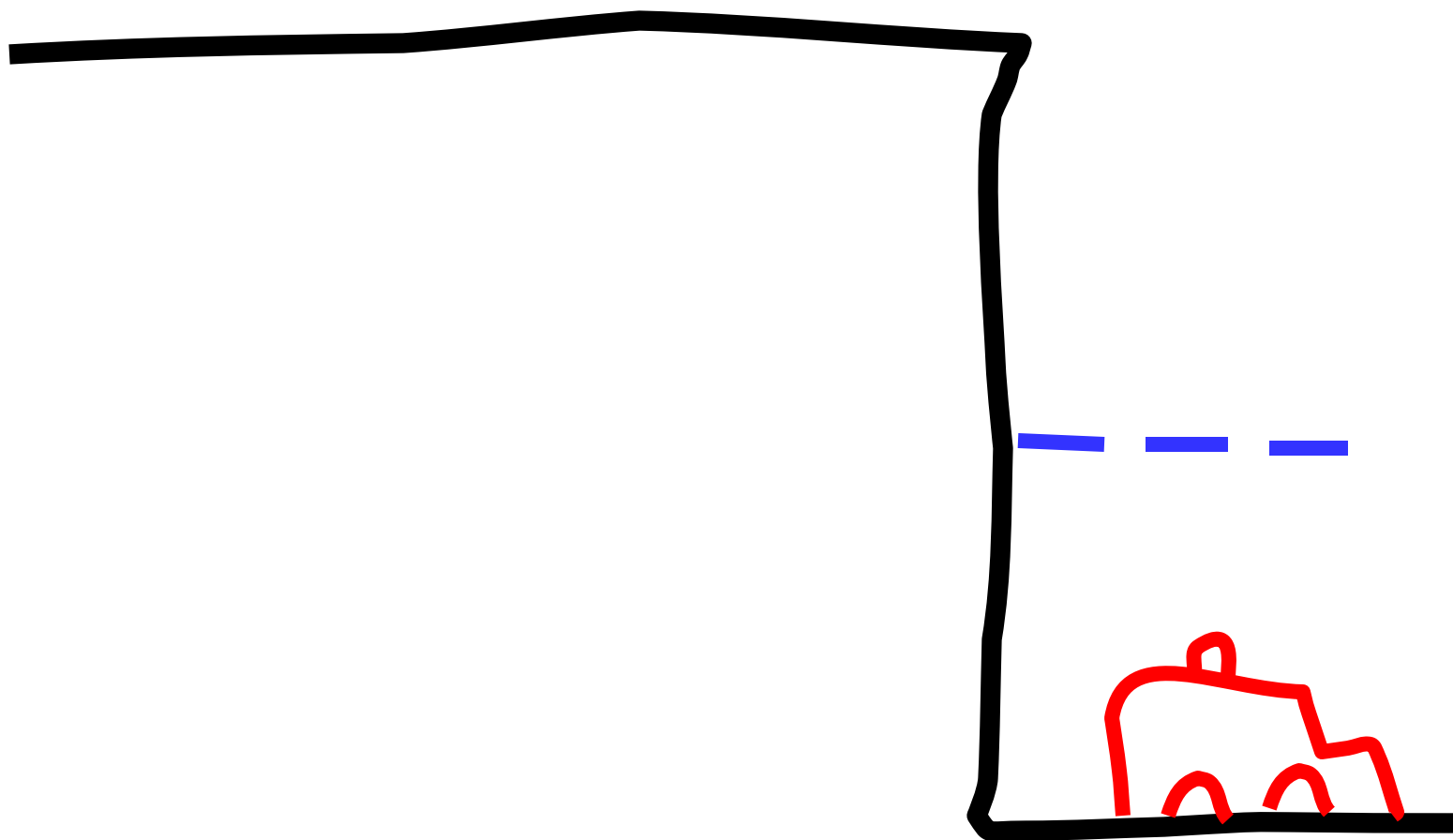


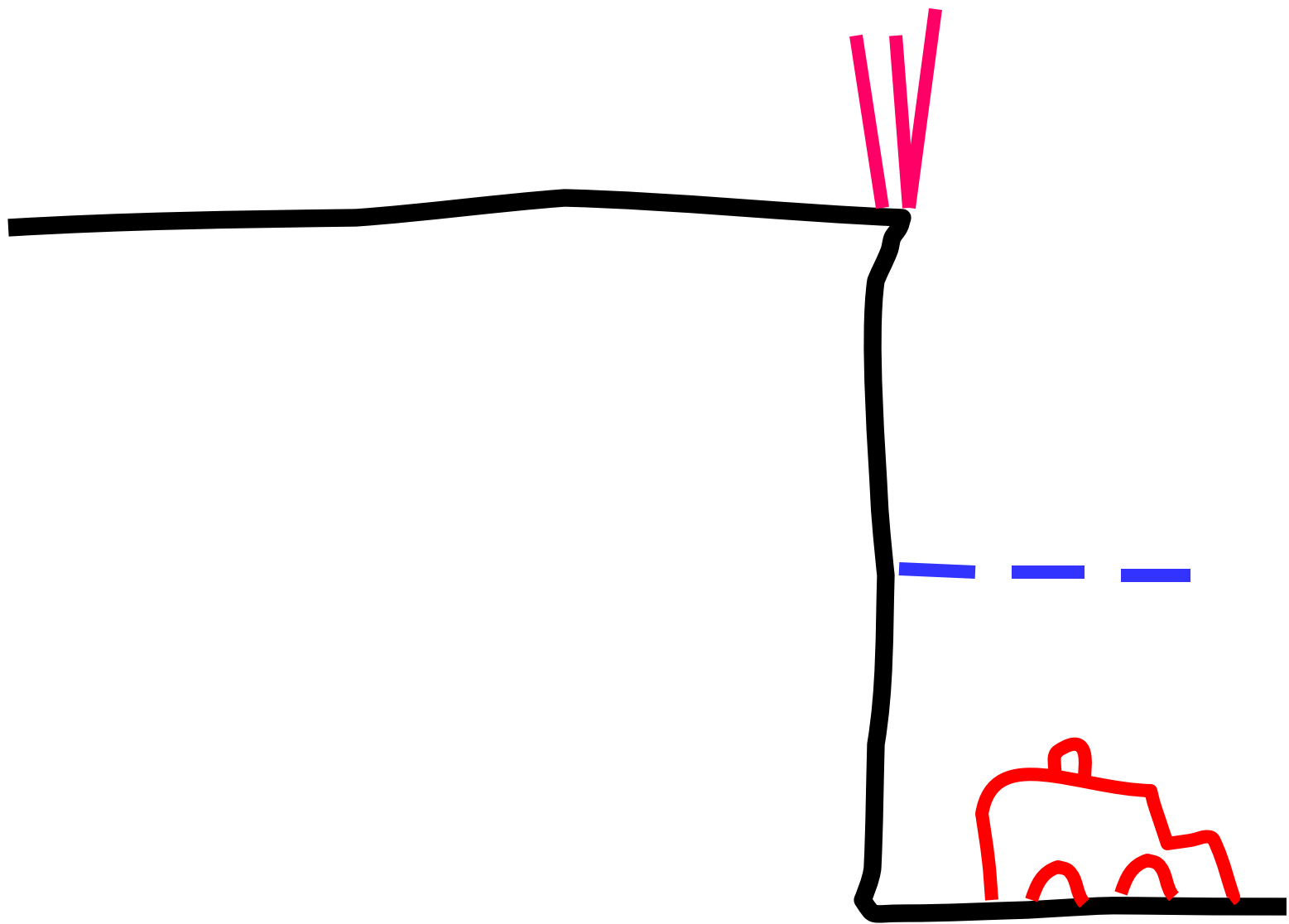


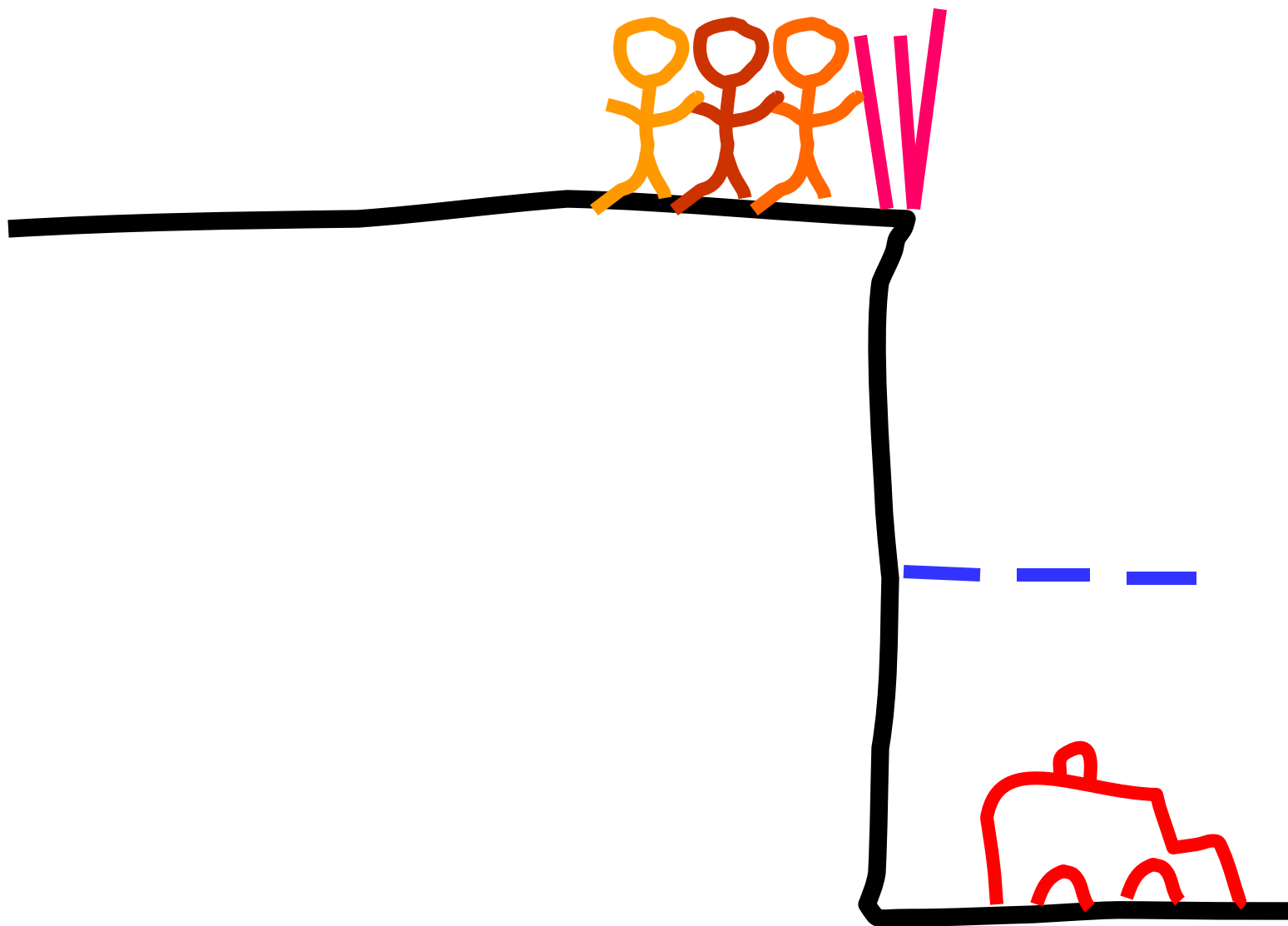


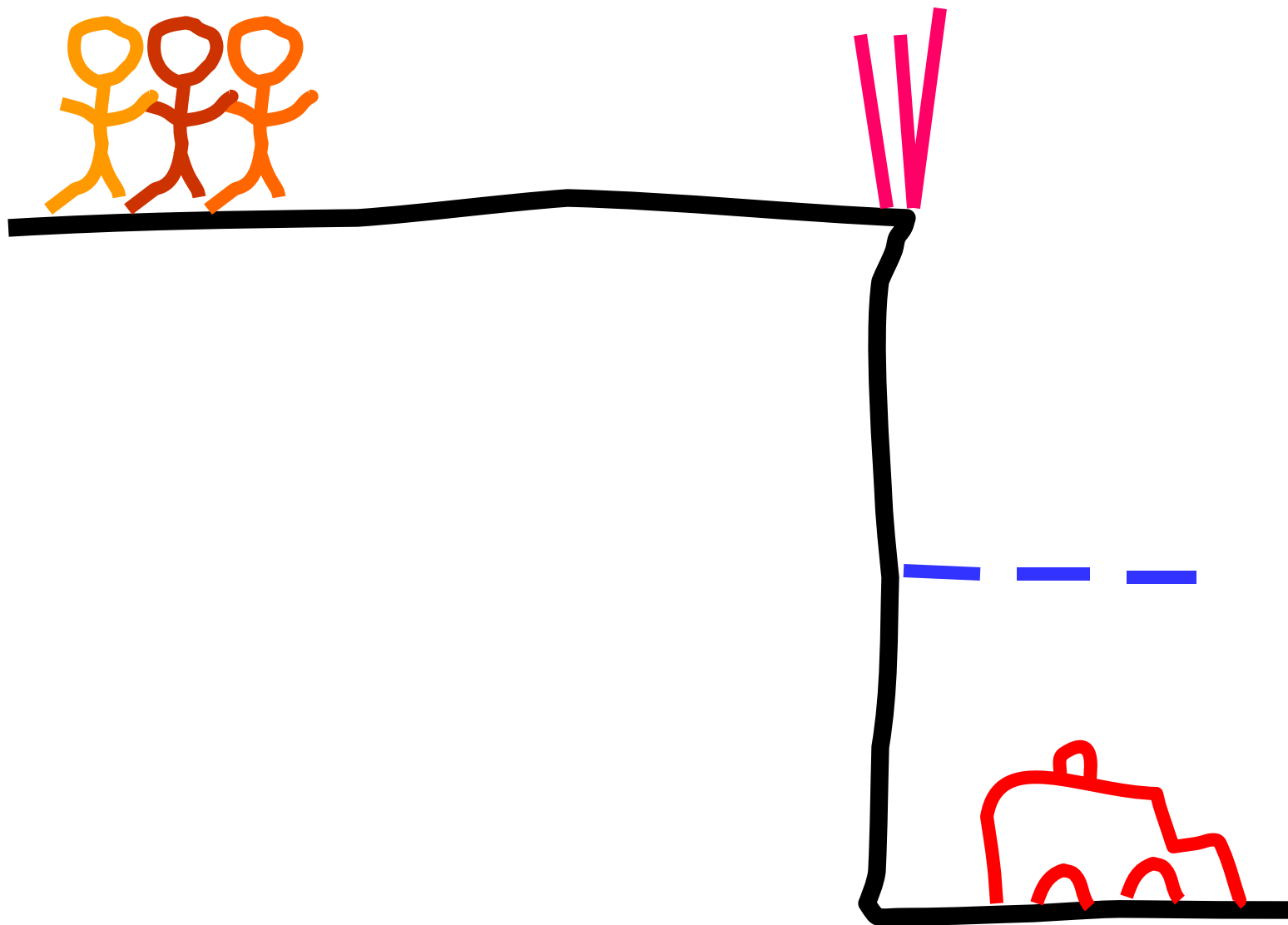


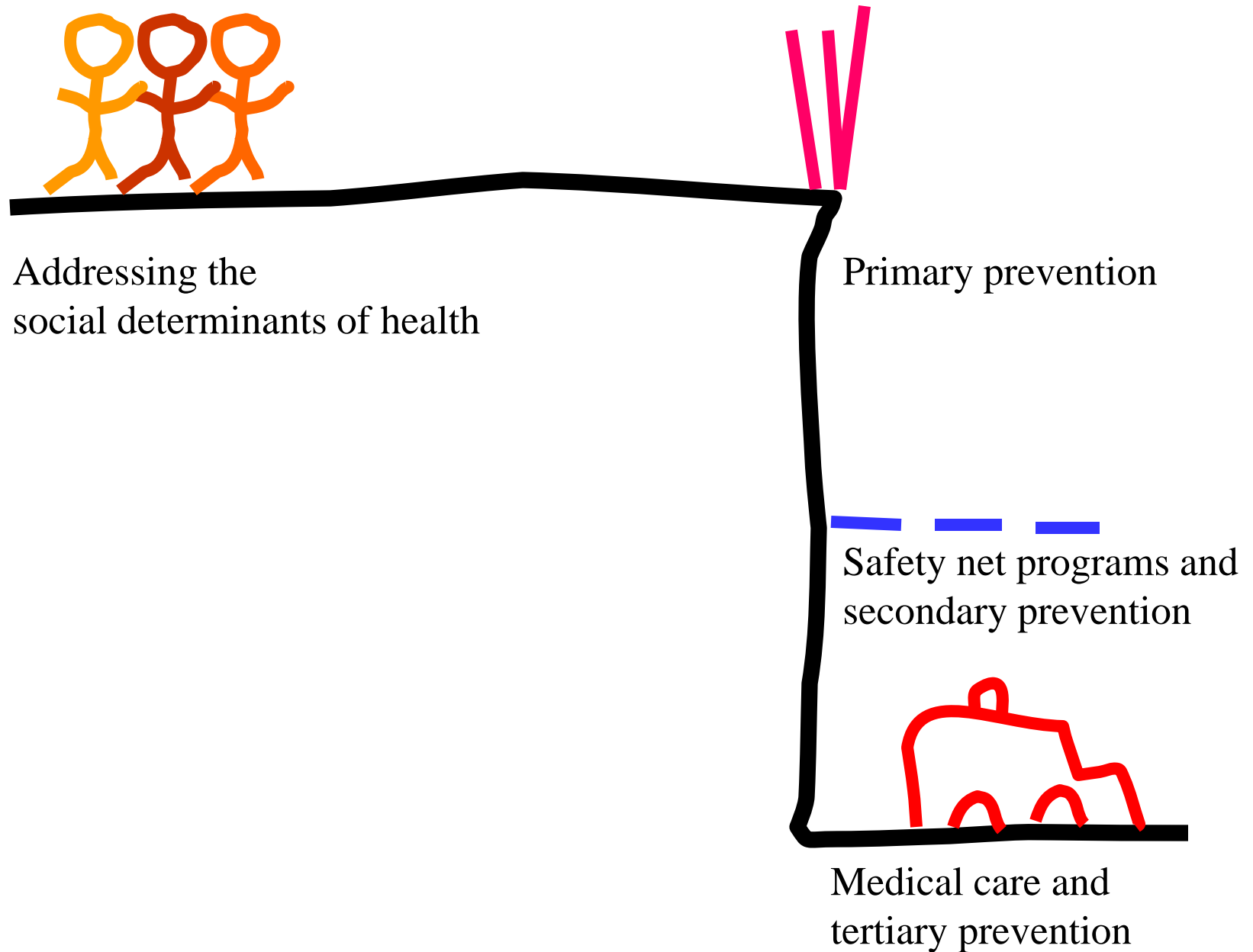






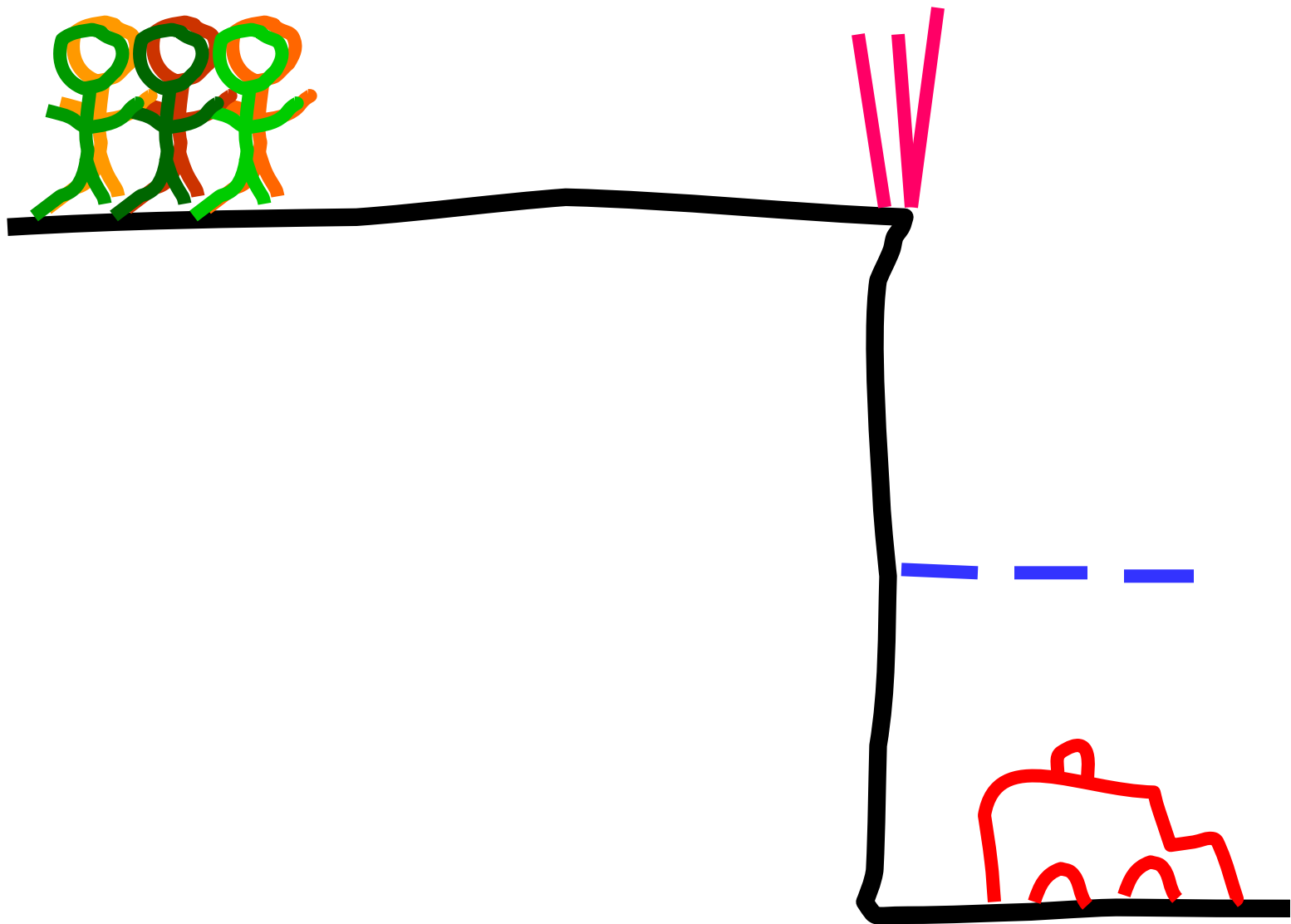


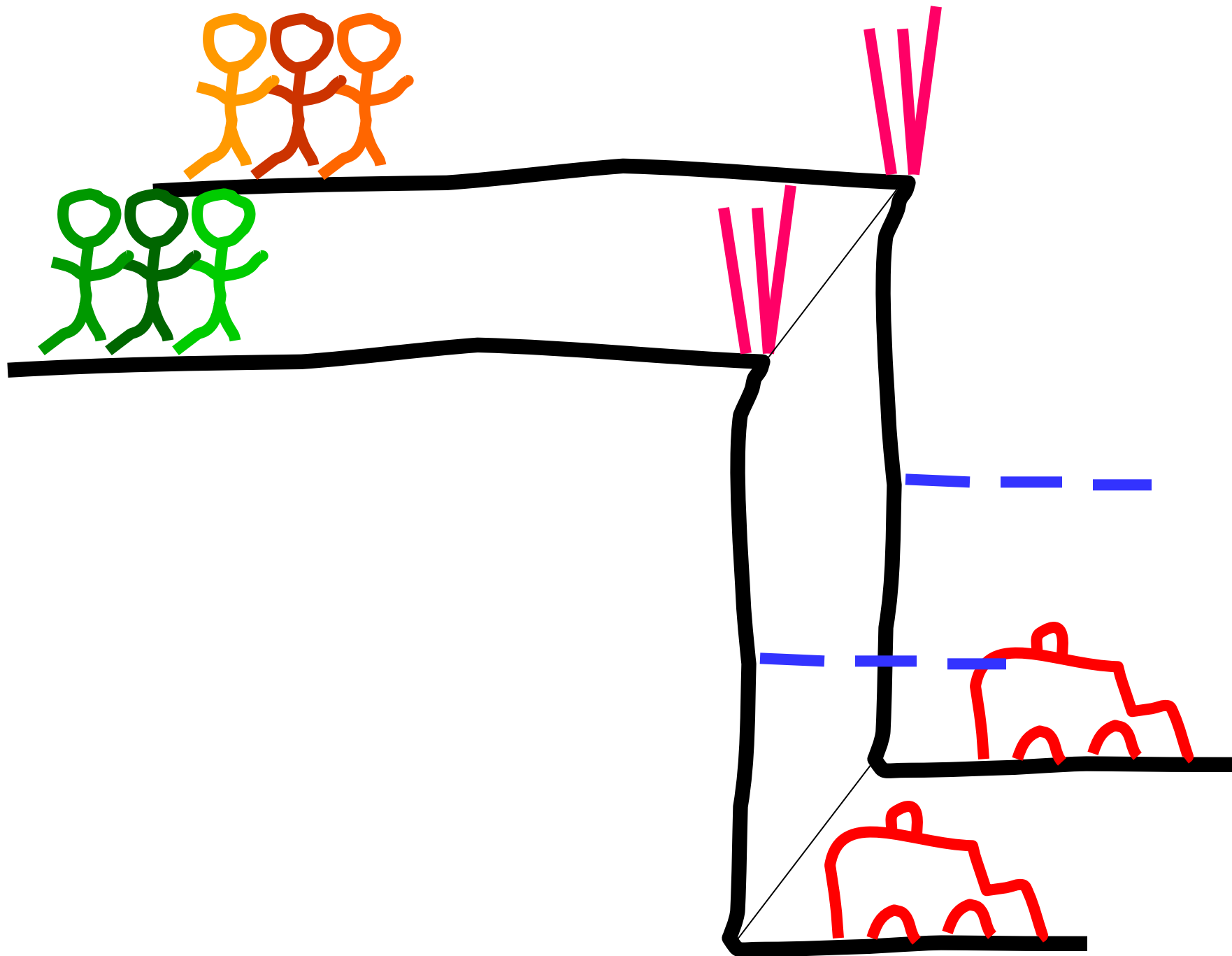


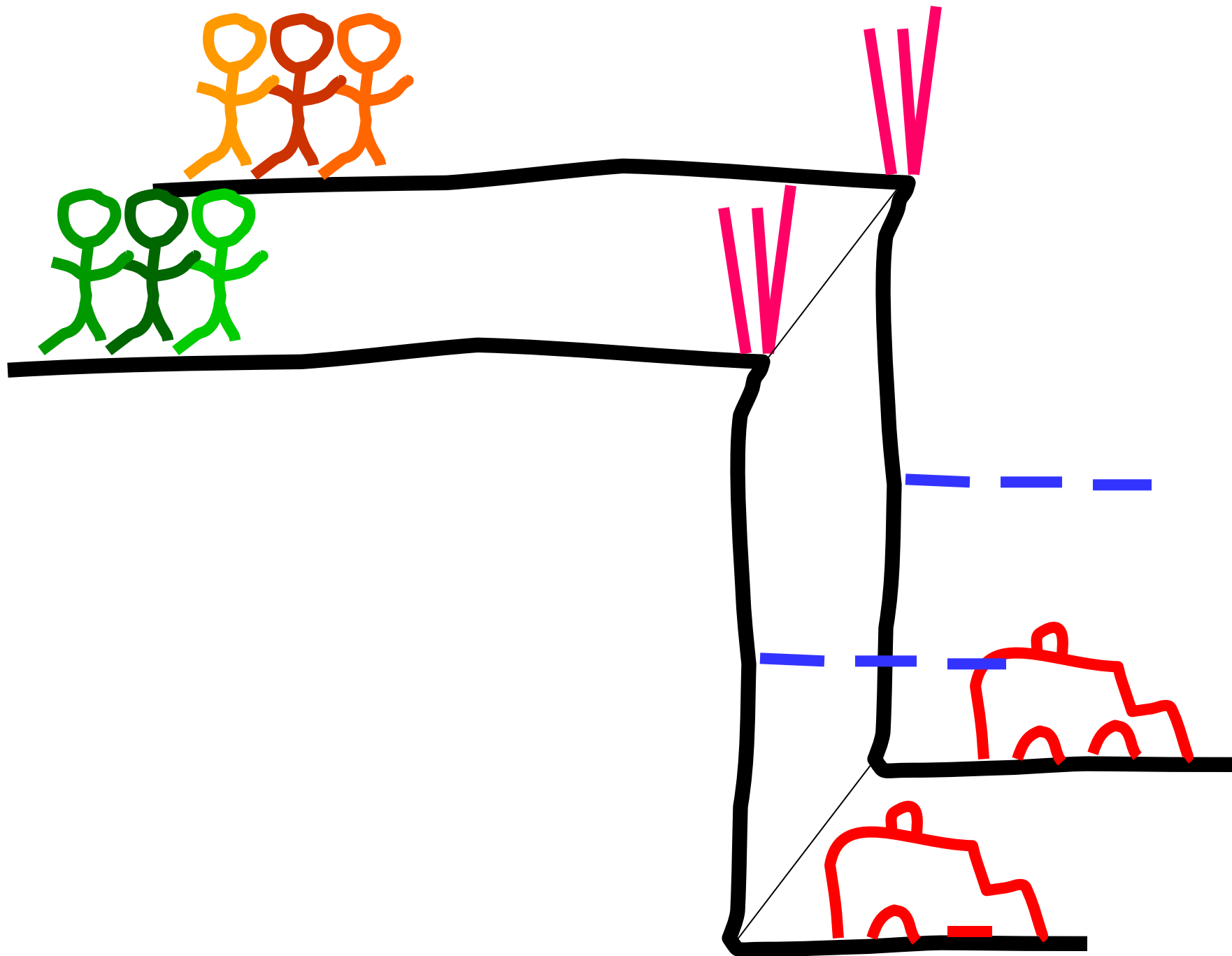


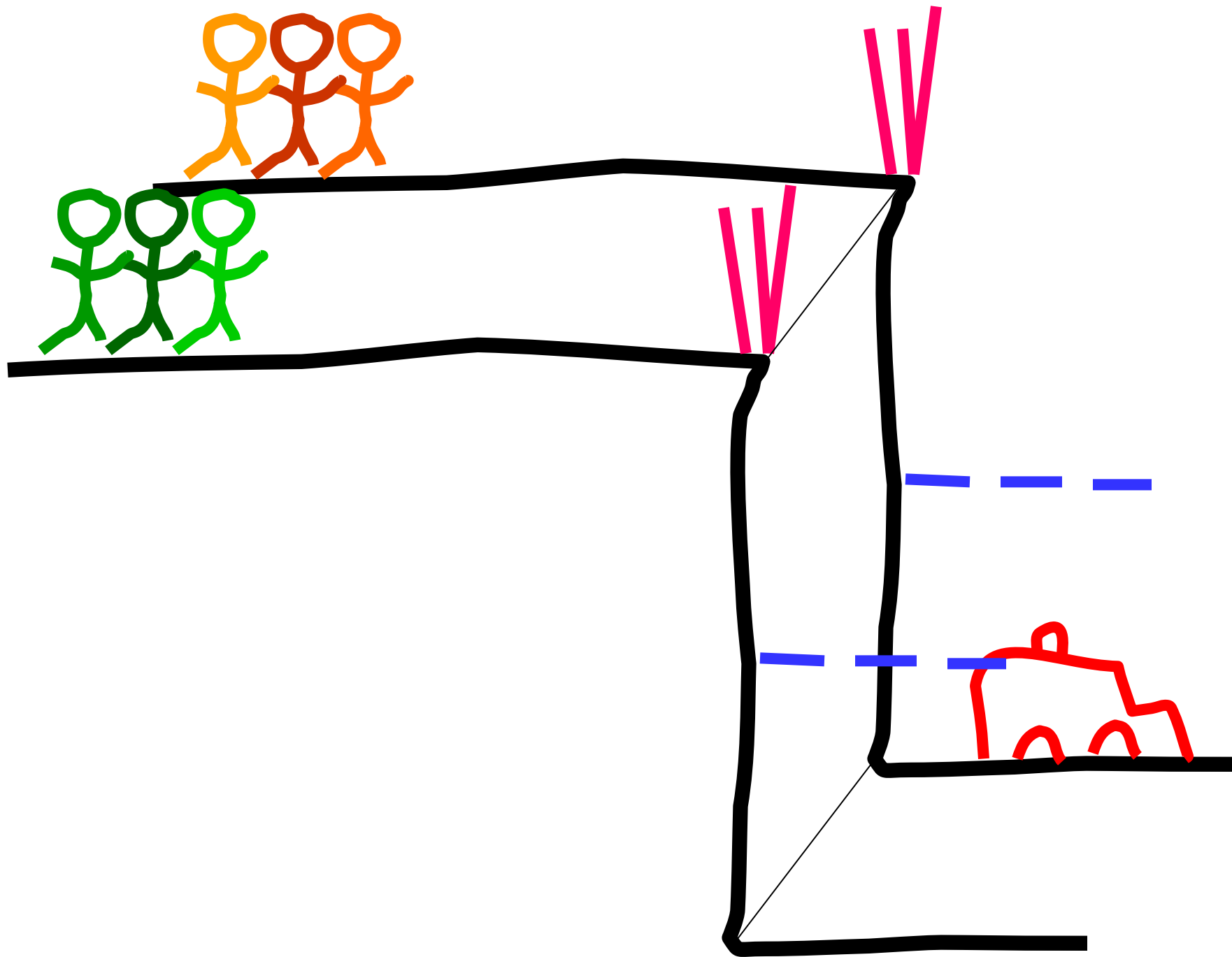
But how do disparities arise?

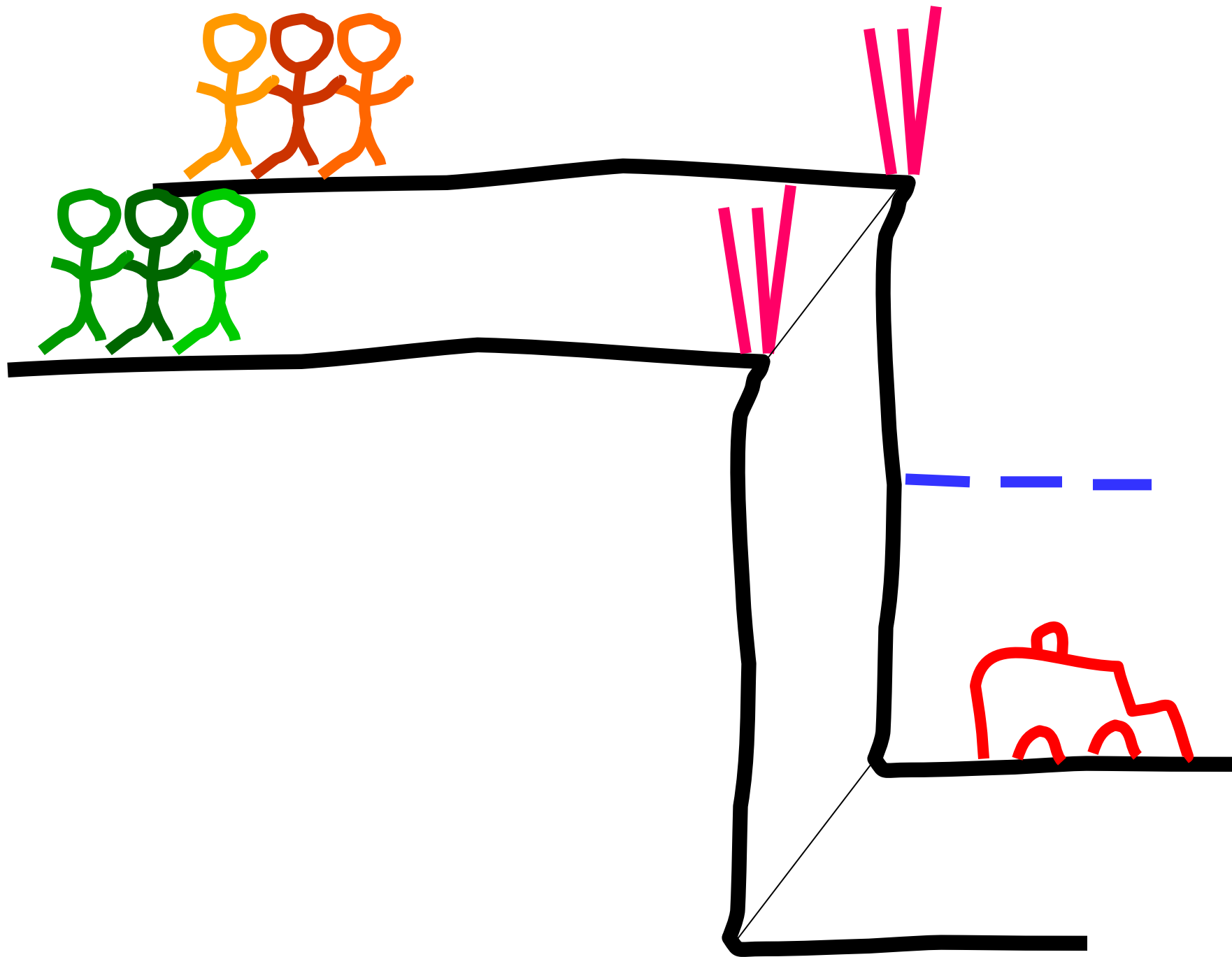
- ❑ **Differences in the quality of care received within the health care system**
- ❑ **Differences in access to health care, including preventive and curative services**
- ❑ **Differences in life opportunities, exposures, and stresses that result in differences in underlying health status**

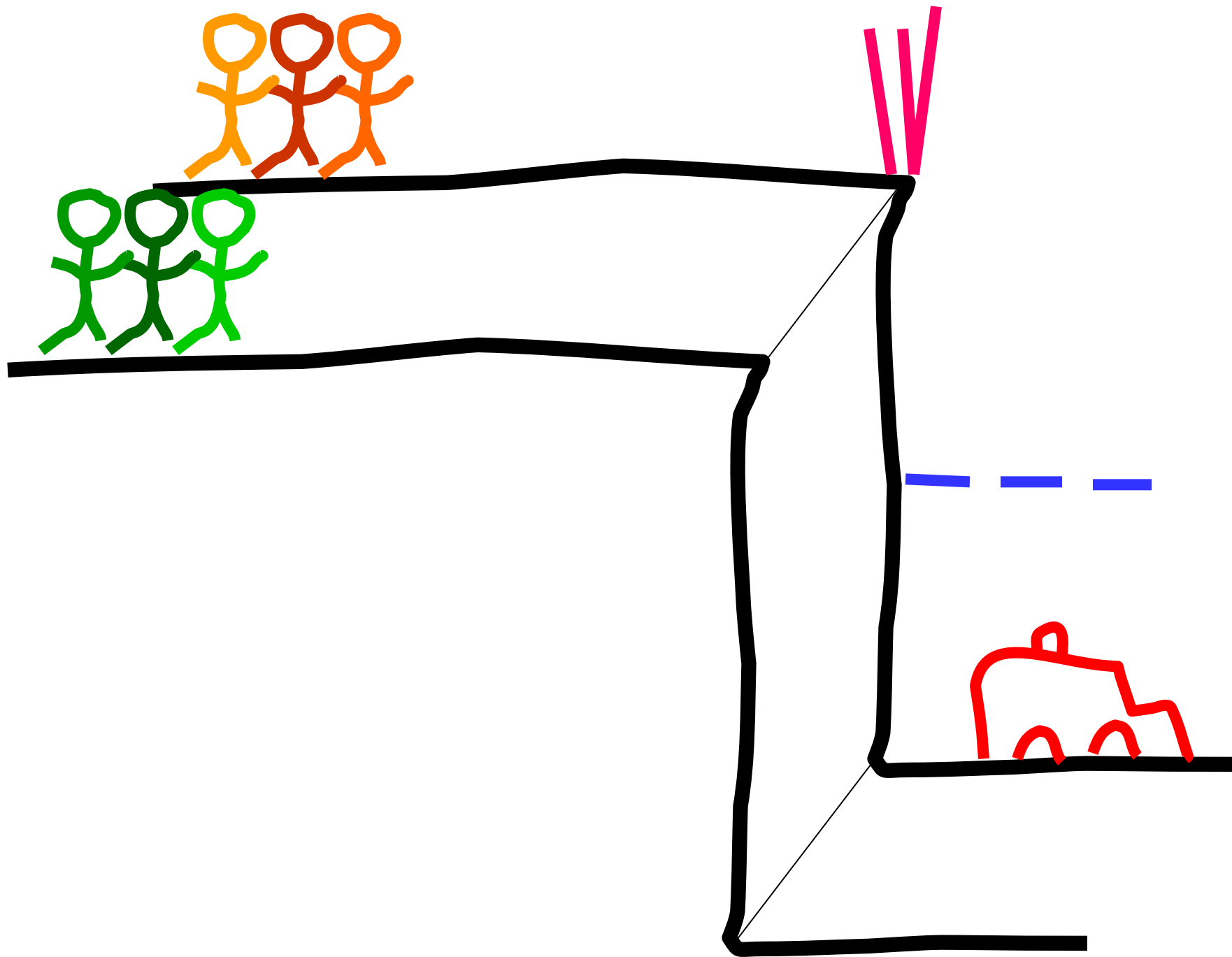


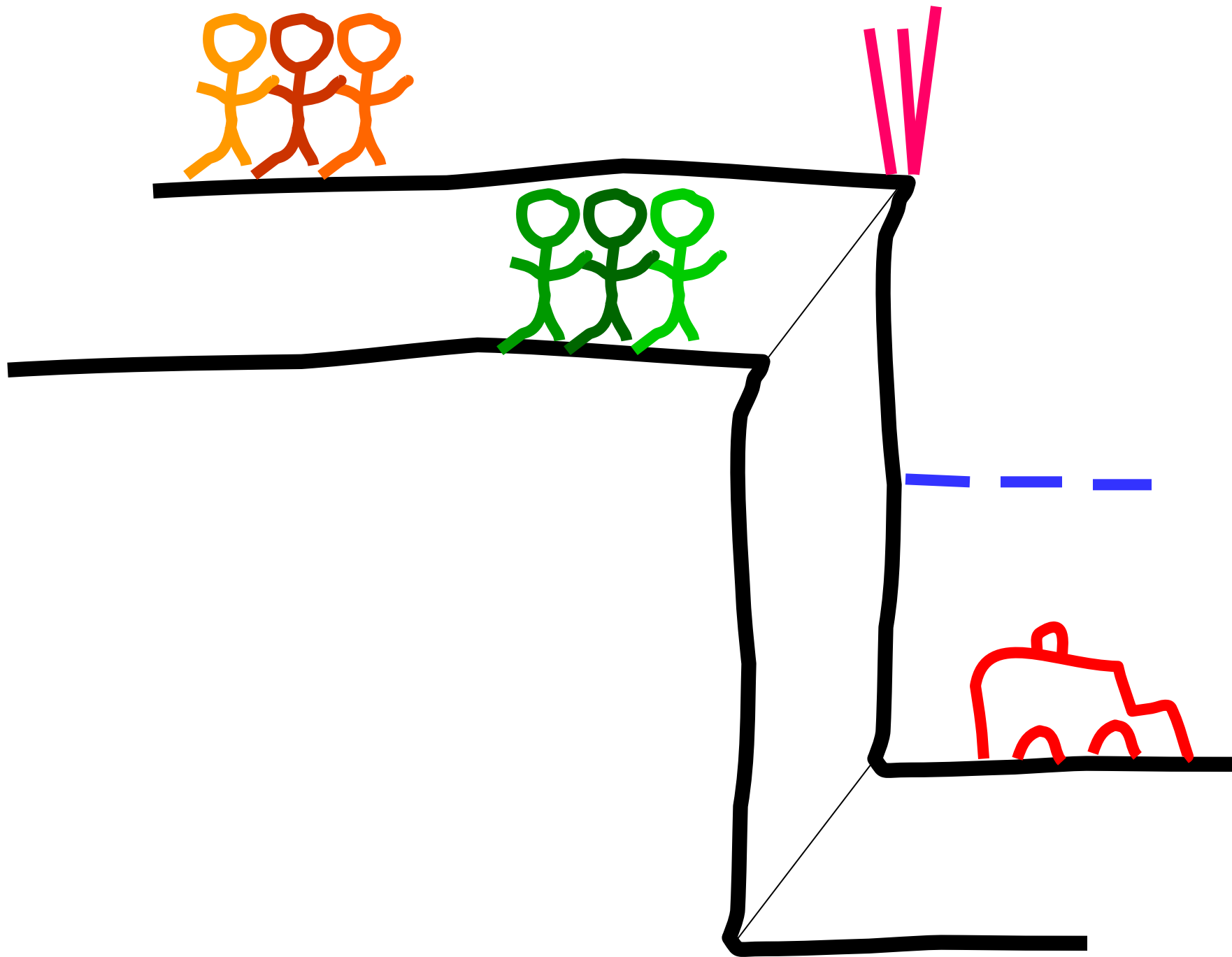


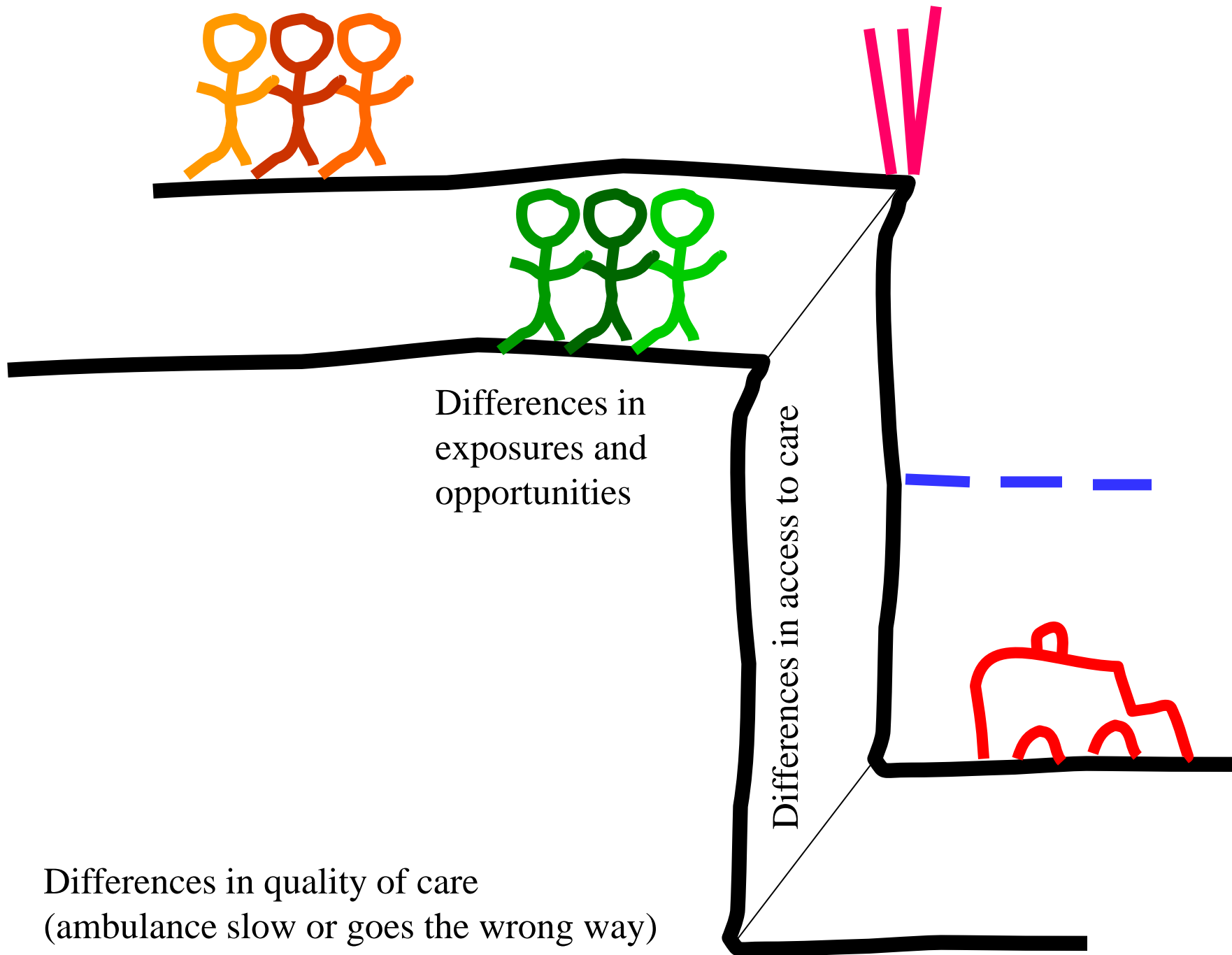


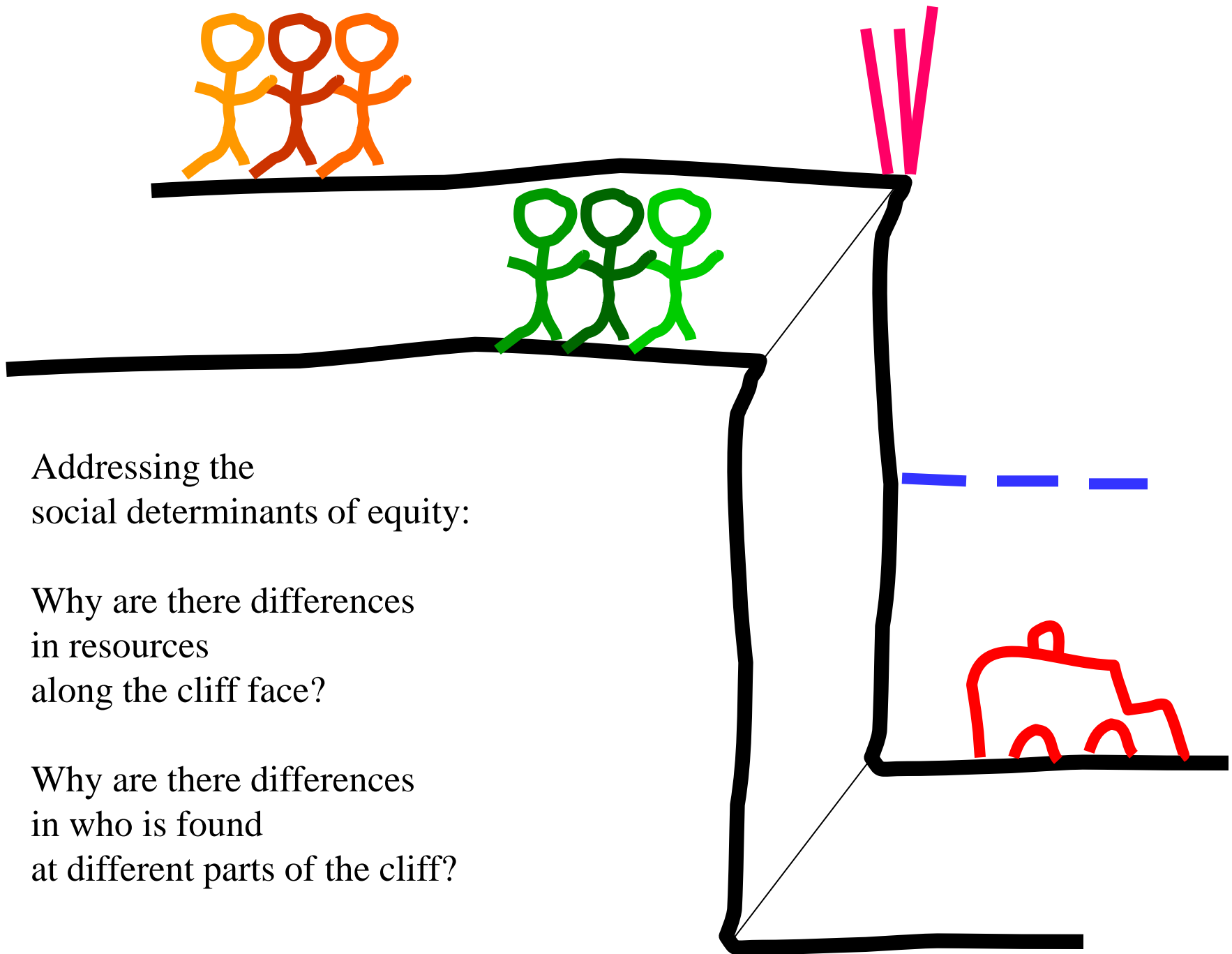












Addressing the
social determinants of equity:

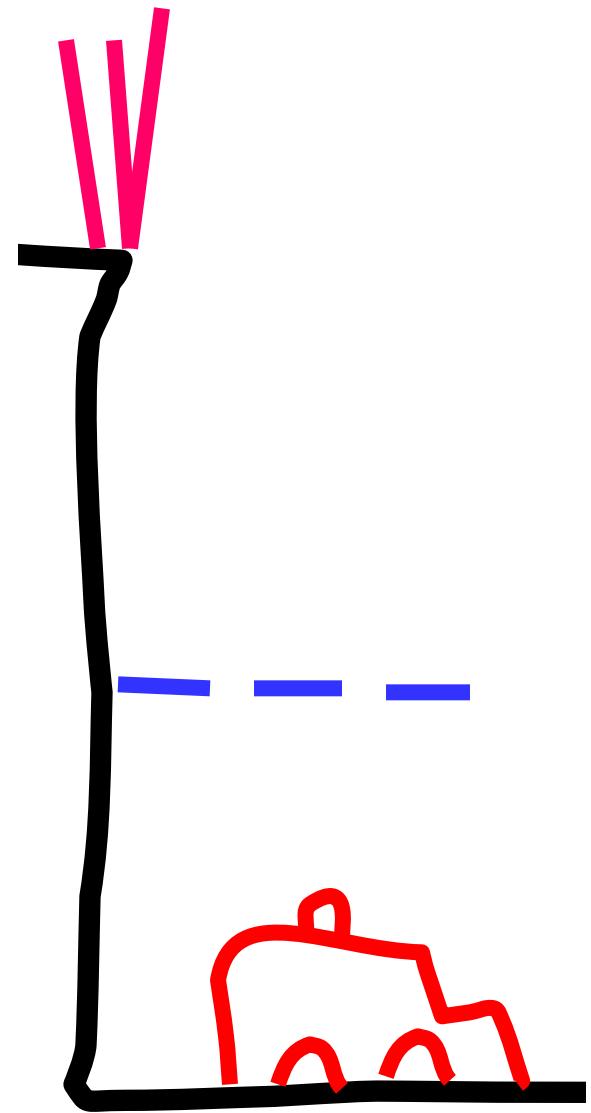
Why are there differences
in resources
along the cliff face?

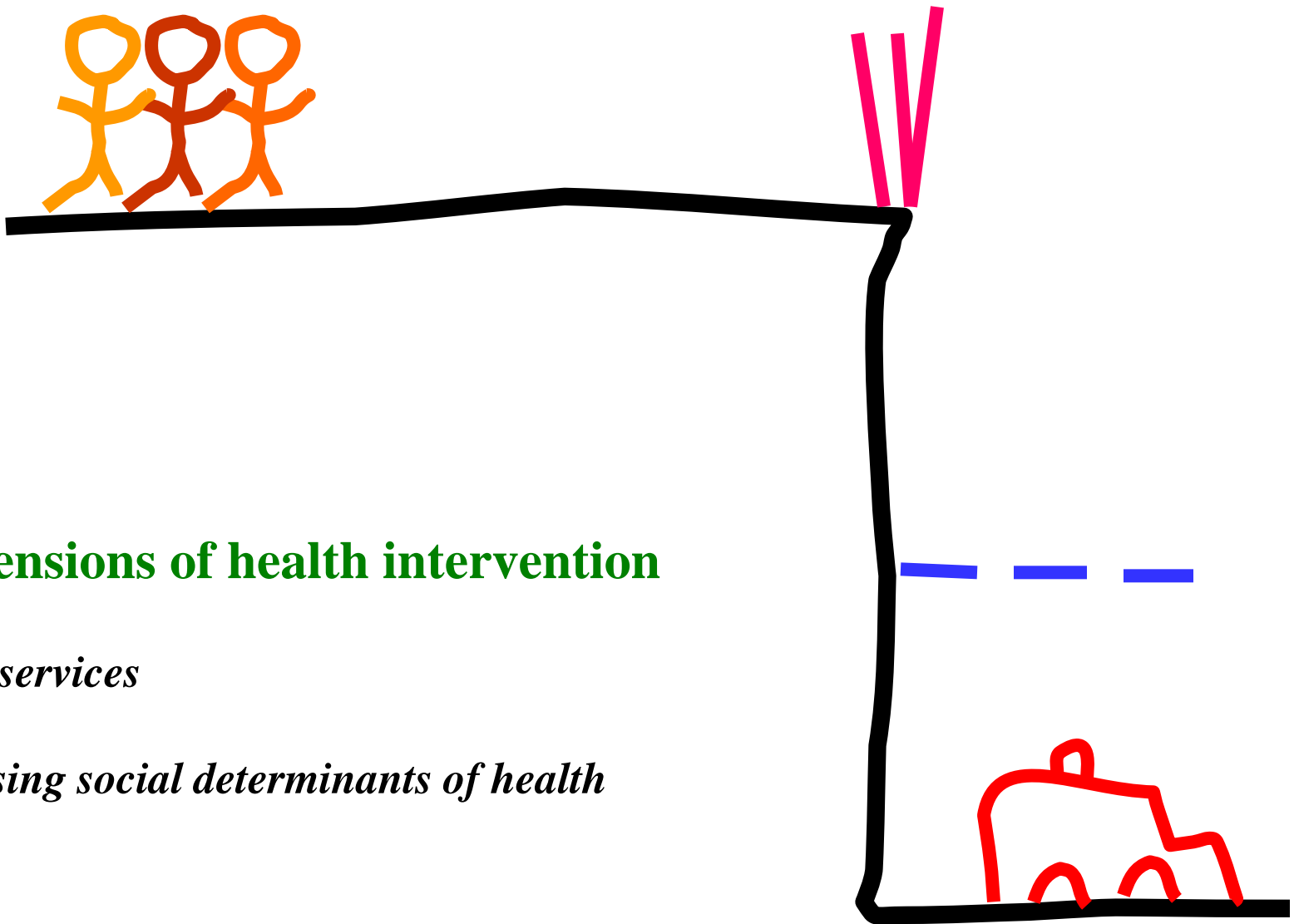
Why are there differences
in who is found
at different parts of the cliff?

3 dimensions of health intervention

3 dimensions of health intervention

Health services

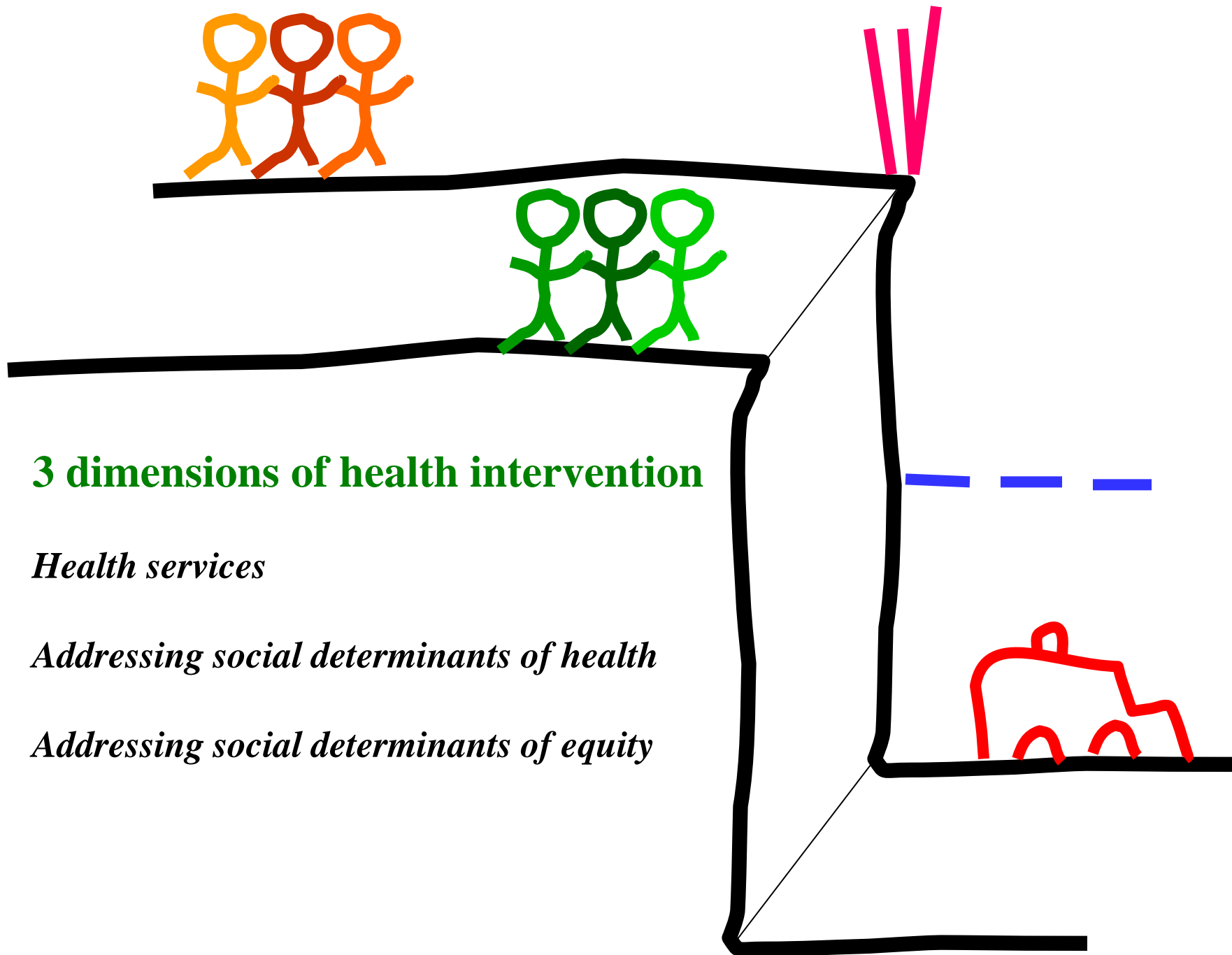




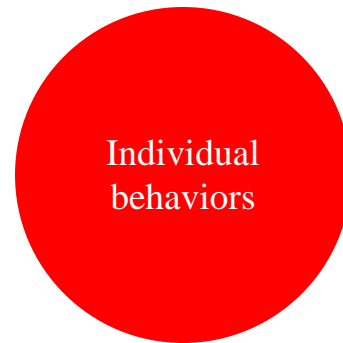
3 dimensions of health intervention

Health services

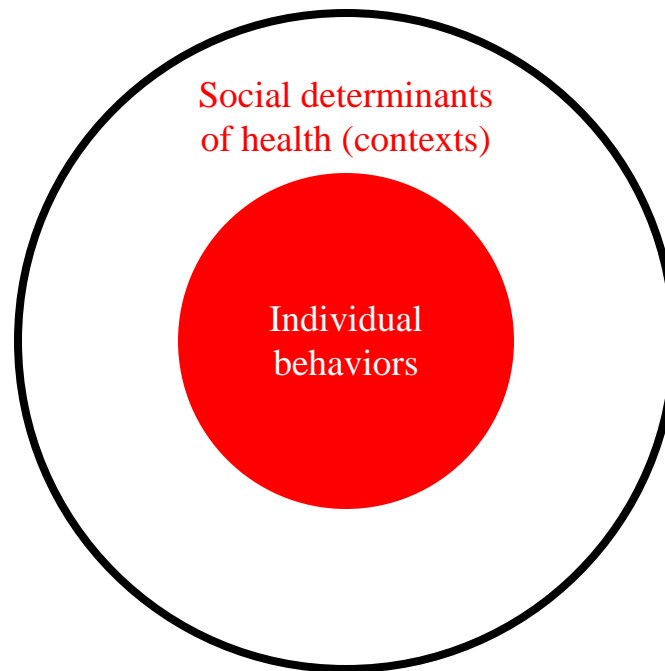
Addressing social determinants of health



Determinants of health



Determinants of health

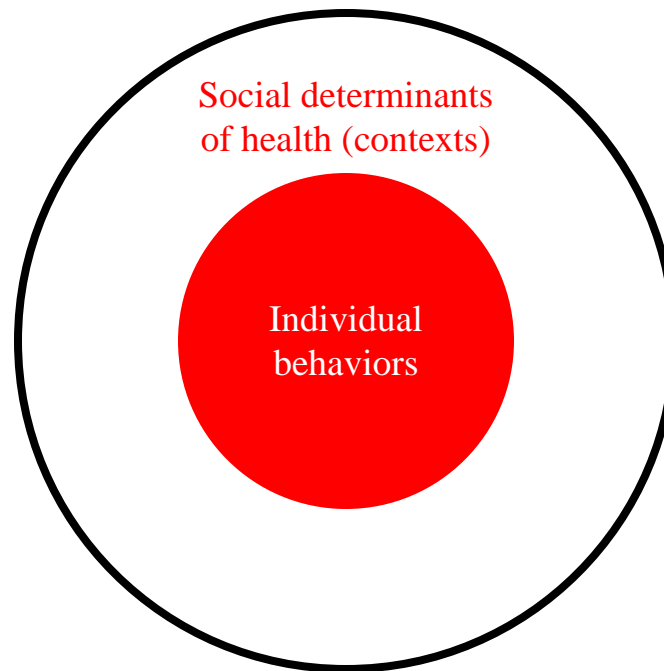


Determinants of health

**Determinants
of health and
illness that are
outside of the
individual**

Beyond genetic
predispositions

Beyond individual
behaviors

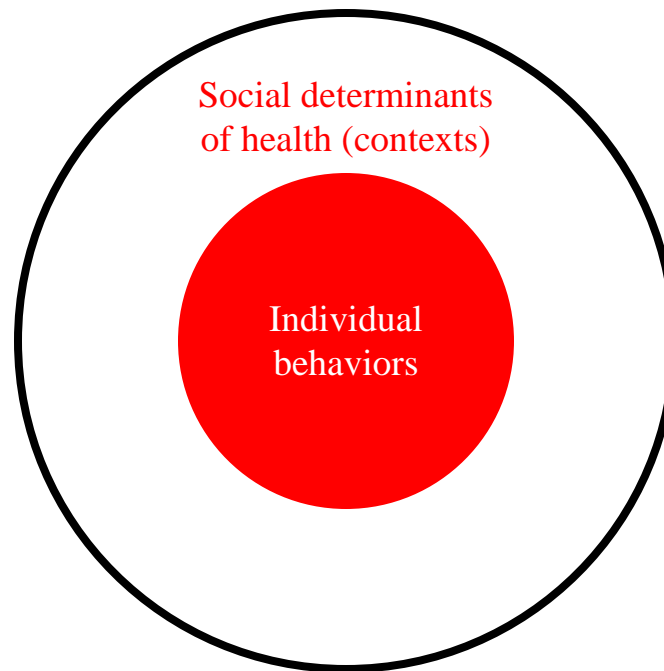


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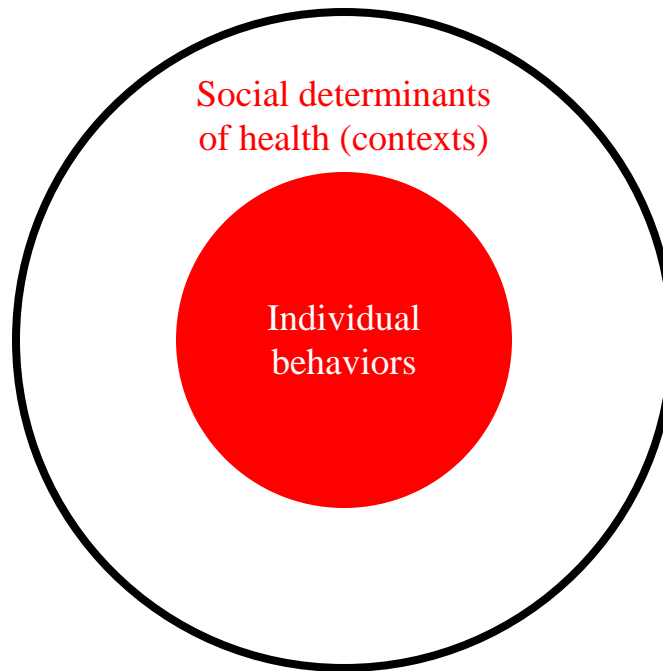


**The contexts in
which
individual
behaviors arise**

Determinants of health

Individual resources

Education,
occupation,
income, wealth



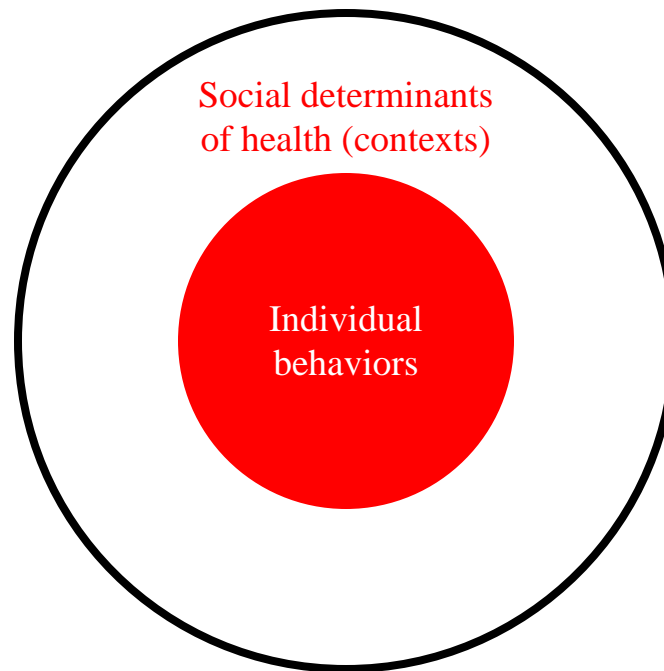
Determinants of health

Individual resources

Education,
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Neighborhood resources

Housing, food
choices, public
safety,
transportation,
parks and
recreation,
political clout



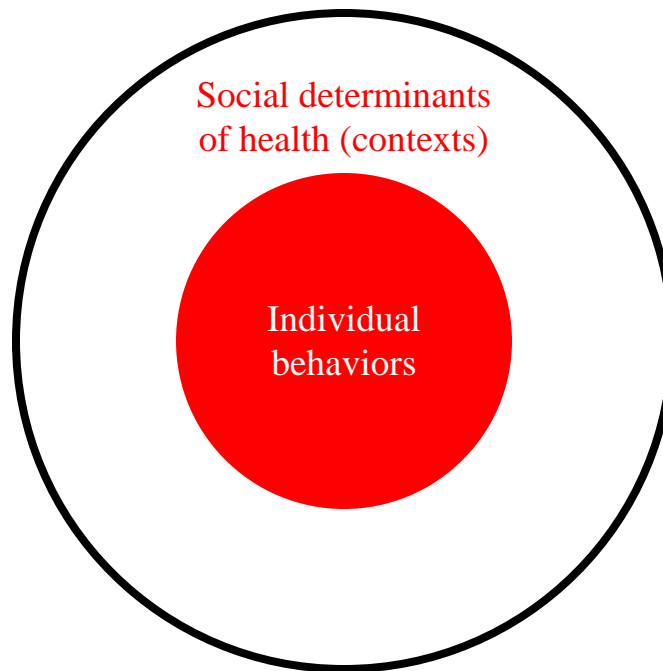
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Hazards and toxic exposures

Pesticides, lead,
reservoirs of
infection

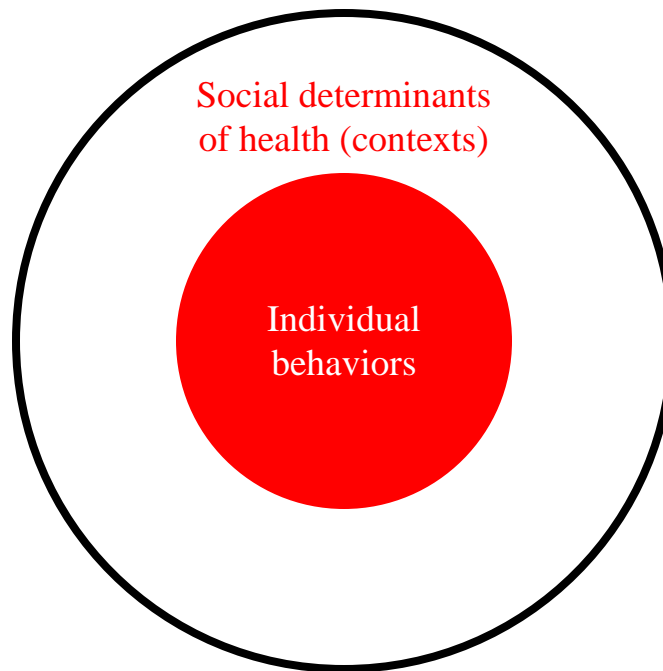
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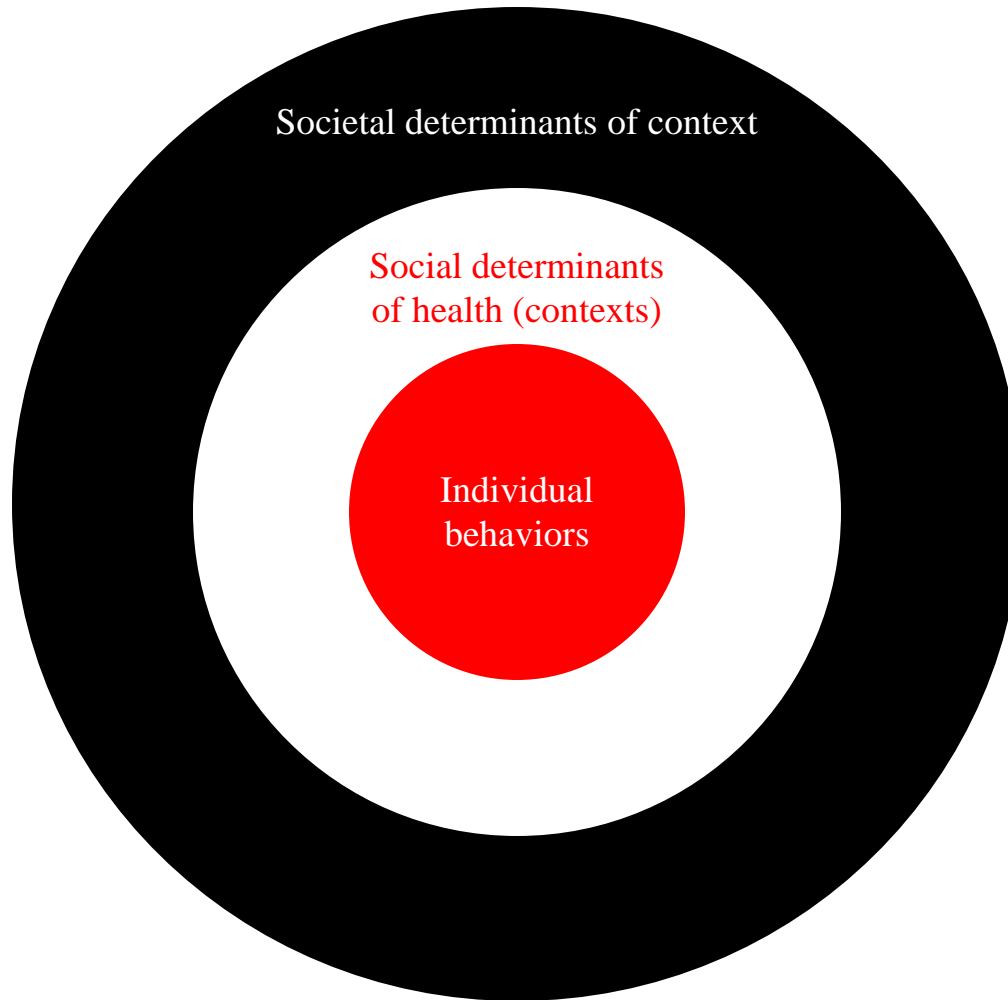
Hazards and toxic exposures

Pesticides, lead,
reservoirs of
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Opportunity structures

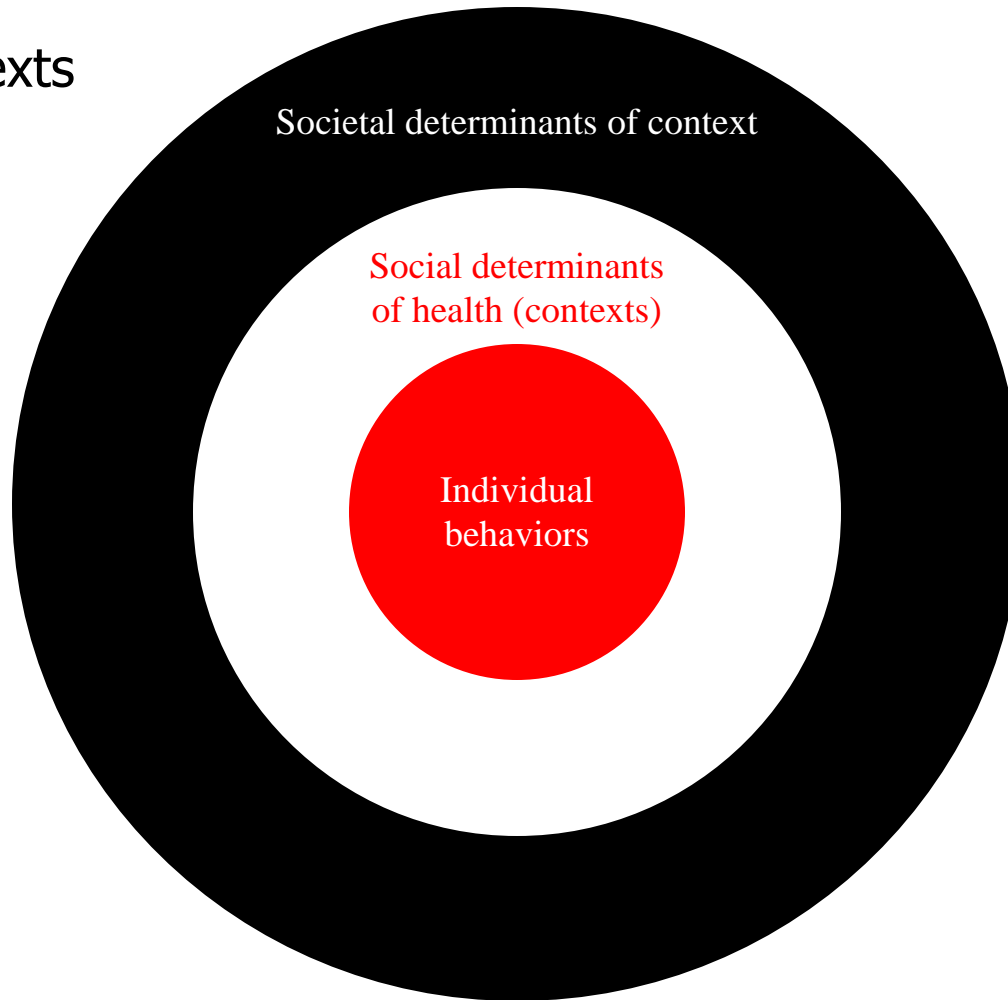
Schools, jobs,
justice

Determinants of health



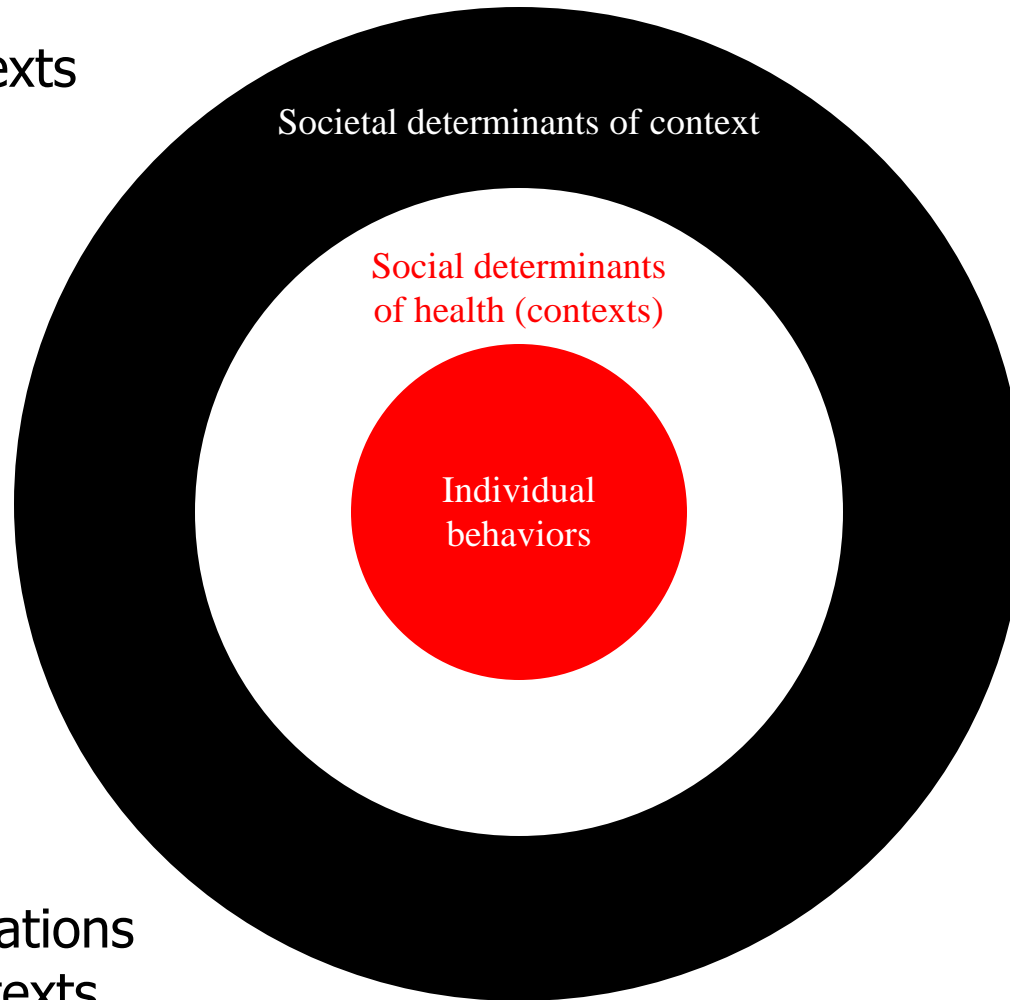
Determinants of health

Determine the
range of
observed contexts



Determinants of health

Determine the
range of
observed contexts



Determine the
distribution of
different populations
into those contexts

Determinants of health

Determine the
range of
observed contexts

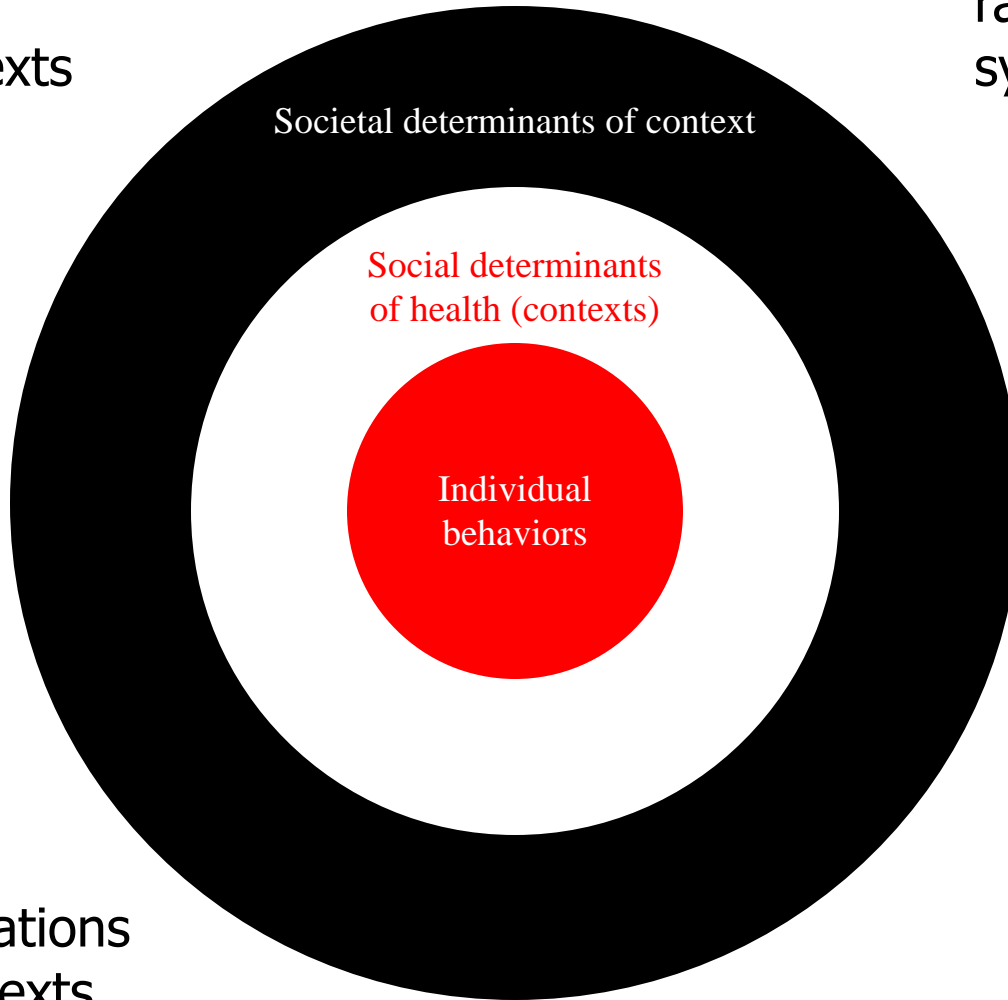
Include capitalism,
racism, and other
systems of power

Societal determinants of context

Social determinants
of health (contexts)

Individual
behaviors

Determine the
distribution of
different populations
into those contexts



Determinants of health

Determine the range of observed contexts

Include capitalism, racism, and other systems of power

Societal determinants of context

Social determinants of health (contexts)

Individual behaviors

Determine the distribution of different populations into those contexts

The social determinants of equity

Beyond individual behaviors

- ❑ **Address the social determinants of health, *including poverty*, in order to achieve large and sustained improvements in health outcomes**
- ❑ **Address the social determinants of equity, *including racism*, in order to achieve social justice and eliminate health disparities**

Naming and Addressing

***the Impacts of Racism
on Health***

What is racism?

A system

What is racism?

A system of structuring opportunity and assigning value

What is racism?

A system of structuring opportunity and assigning value based on the social interpretation of how we look (“race”)

What is racism?

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- Unfairly disadvantages some individuals and communities

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- Unfairly advantages other individuals and communities

What is racism?

A system of structuring opportunity and assigning value based on the social interpretation of how we look (“race”)

- Unfairly disadvantages some individuals and communities
- Unfairly advantages other individuals and communities
- Saps the strength of the whole society through the waste of human resources

Levels of Racism

- ❑ Institutionalized**
- ❑ Personally-mediated**
- ❑ Internalized**

Institutionalized racism

- ❑ **Differential access to the goods, services, and opportunities of society, by “race”**
- ❑ **Examples**
 - Housing, education, employment, income
 - Medical facilities
 - Clean environment
 - Information, resources, voice
- ❑ **Explains the association between social class and “race”**

Personally-mediated racism

- ❑ **Differential assumptions about the abilities, motives, and intents of others, by “race”**
- ❑ **Differential actions based on those assumptions**

- ❑ **Prejudice and discrimination**
- ❑ **Examples**
 - Police brutality
 - Physician disrespect
 - Shopkeeper vigilance
 - Waiter indifference
 - Teacher devaluation

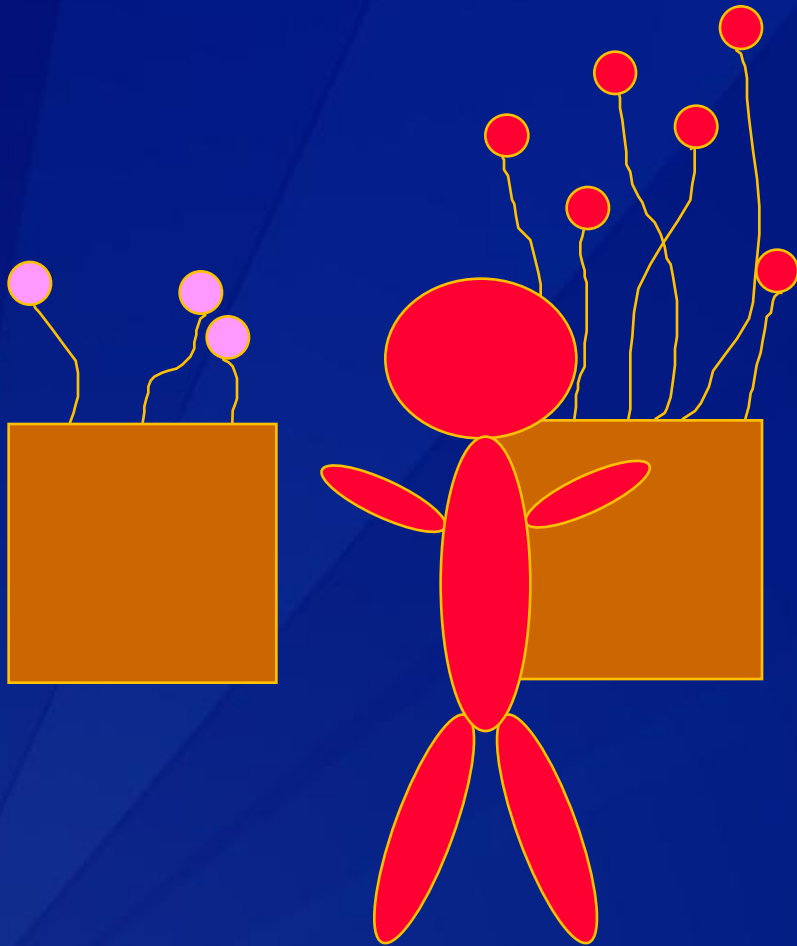
Internalized racism

- ❑ **Acceptance by the stigmatized “races” of negative messages about our own abilities and intrinsic worth**
- ❑ **Examples**
 - Self-devaluation
 - White man’s ice is colder
 - Resignation, helplessness, hopelessness
- ❑ **Accepting limitations to our full humanity**

Levels of Racism: A Gardener's Tale

Source: Jones CP, *Am J Public Health* 2000

Who is the gardener?



- Power to decide
- Power to act
- Control of resources

■ **Dangerous when**

- Allied with one group
- Not concerned with equity

Addressing institutionalized racism

❑ Scan for evidence of “racial” disparities

- Routinely monitor opportunities as well as outcomes by “race”
- “Could racism be operating here?”

❑ Identify mechanisms

- **Structures:** the *who?*, *what?*, *when?*, and *where?* of decision-making
- **Policies:** the written *how?*
- **Practices and norms:** the unwritten *how?*
- **Values:** the *why?*

What is *[inequity]*?

A system of structuring opportunity and assigning value based on *[fill in the blank]*

What is *[inequity]*?

A system of structuring opportunity and assigning value based on *[fill in the blank]*, which

- Unfairly disadvantages some individuals and communities
- Unfairly advantages other individuals and communities
- Saps the strength of the whole society through the waste of human resources

Many axes of inequity

- ❑ “Race”**
- ❑ Gender**
- ❑ Ethnicity**
- ❑ Labor roles and social class markers**
- ❑ Nationality, language, and legal status**
- ❑ Sexual orientation**
- ❑ Disability status**
- ❑ Geography**
- ❑ Religion**

These are risk markers, not risk factors

Achieving health equity

- ❑ **“Health equity” is assurance of the conditions for optimal health for all people**
- ❑ **Achieving health equity requires**
 - Valuing all individuals and populations equally
 - Recognizing and rectifying historical injustices
 - Providing resources according to need
- ❑ **Health disparities will be eliminated when health equity is achieved**

International Convention on the Elimination of all forms of Racial Discrimination (ICERD)

- ❑ **International anti-racism treaty adopted by the UN General Assembly in 1965**

<http://www2.ohchr.org/english/law/cerd.htm>

- ❑ **US signed in 1966**

- ❑ **US ratified in 1994**

- ❑ **2nd US report submitted to the UN Committee on the Elimination of Racial Discrimination (CERD) in 2007**

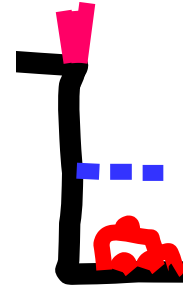
http://www2.ohchr.org/english/bodies/cerd/docs/AdvanceVersion/cerd_c_usa6.doc

CERD *Concluding Observations*

- ❑ **14-page document (8 May 2008) available online**
<http://www.state.gov/documents/organization/107361.pdf>
- ❑ **Concerns and recommendations**
 - Racial profiling (para 14)
 - Residential segregation (para 16)
 - Disproportionate incarceration (para 20)
 - Differential access to health care (para 32)
 - Achievement gap in education (para 34)

Our goal: To expand the conversation

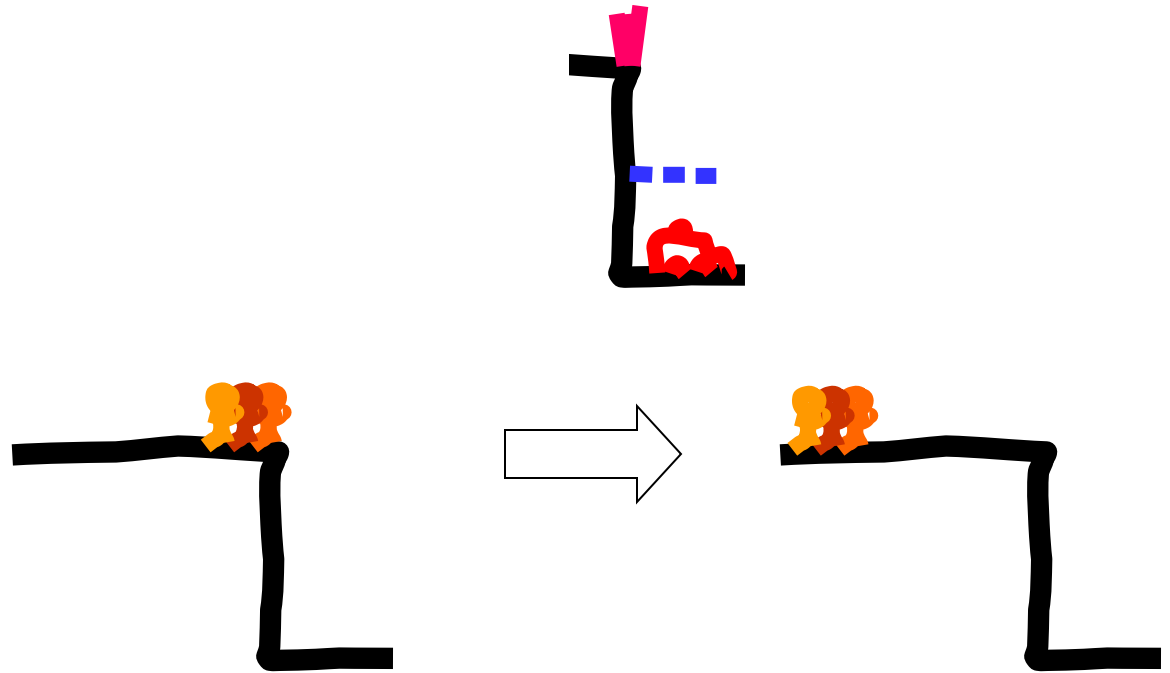
Health services



Our goal: To expand the conversation

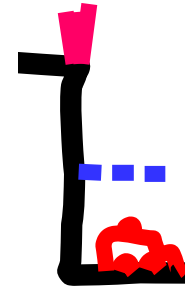
Health services

Social determinants
of health

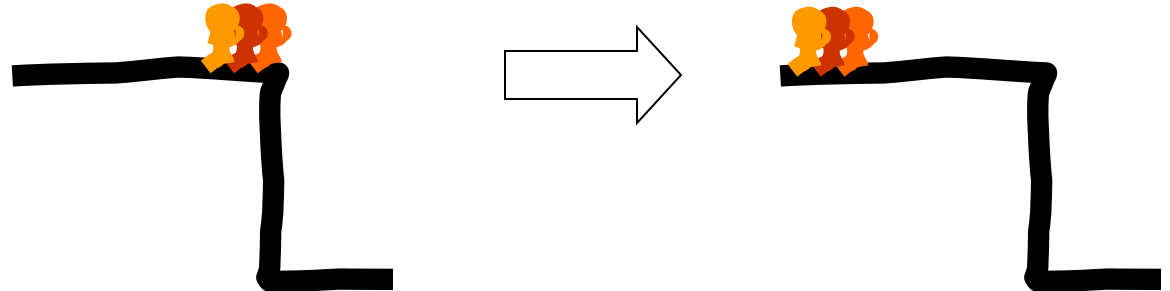


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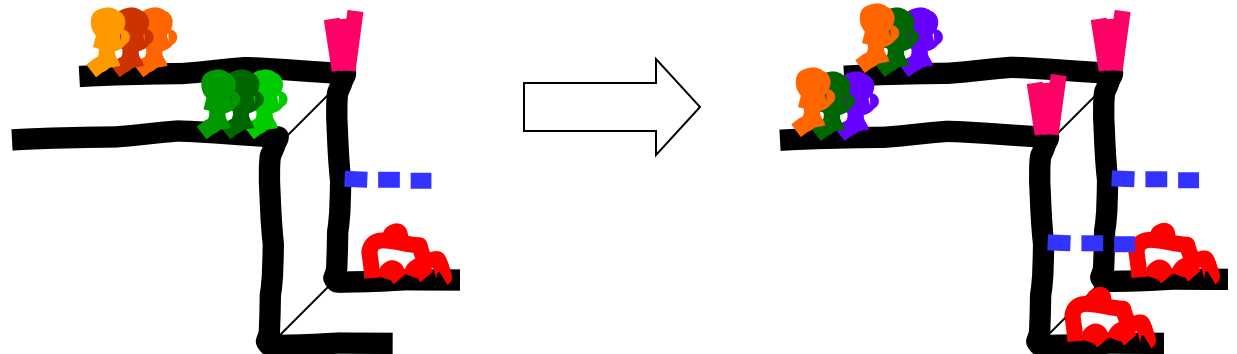
Health services



Social determinants of health



Social determinants of equity



Our tasks

❑ Put racism on the agenda

- Name racism as a force determining the other social determinants of health
- Routinely monitor for differential exposures, opportunities, and outcomes by “race”

Our tasks

- ❑ **Ask, “How is racism operating here?”**
 - Identify mechanisms in structures, policies, practices, norms, and values
 - Attend to both what exists and what is lacking

Our tasks

❑ **Organize and strategize to act**

- Join in grassroots organizing around the conditions of people's lives
- Identify the structural factors creating and perpetuating those conditions
- Link with similar efforts across the country and around the world

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1600 Clifton Road NE, Atlanta, GA 30333
Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348
E-mail: cdcinfo@cdc.gov Web: www.cdc.gov

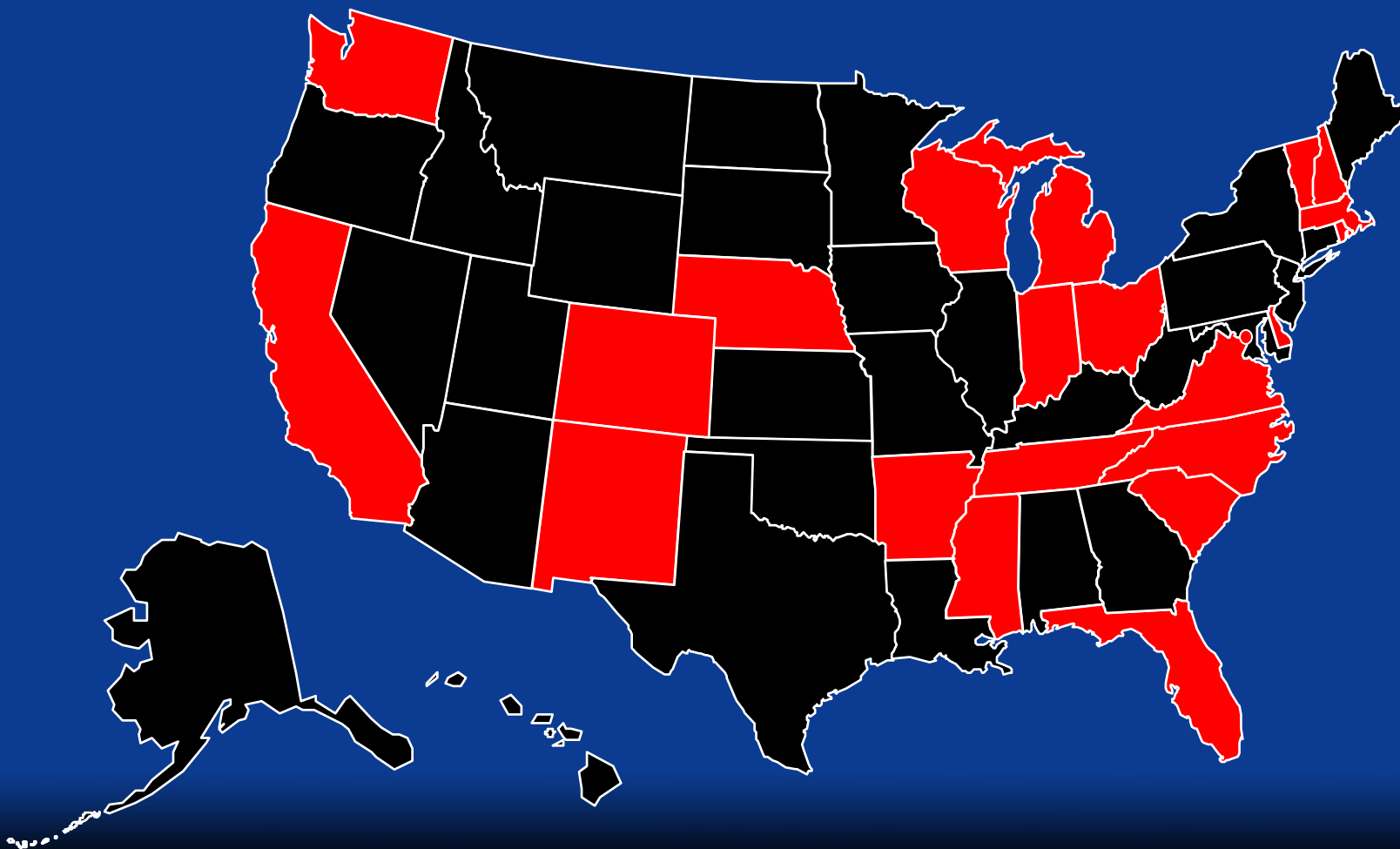
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“Reactions to Race” module

❑ Six-question optional module on the Behavioral Risk Factor Surveillance System since 2002

- “How do other people usually classify you in this country?”
- “How often do you think about your race?”
- Perceptions of differential treatment at work or when seeking health care
- Reports of physical symptoms or emotional upset as a result of “race”-based treatment

States using the “Reactions to Race” module 2002 to 2009 BRFSS



Arkansas, California, Colorado, Delaware, District of Columbia, Florida, Indiana, Massachusetts, Michigan, Mississippi, Nebraska, New Hampshire, New Mexico, North Carolina, Ohio, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, Washington, Wisconsin

Socially-assigned “race”

❑ **How do other people usually classify you in this country? Would you say:**

- White
- Black or African-American
- Hispanic or Latino
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native
- Some other group

Socially-assigned “race”

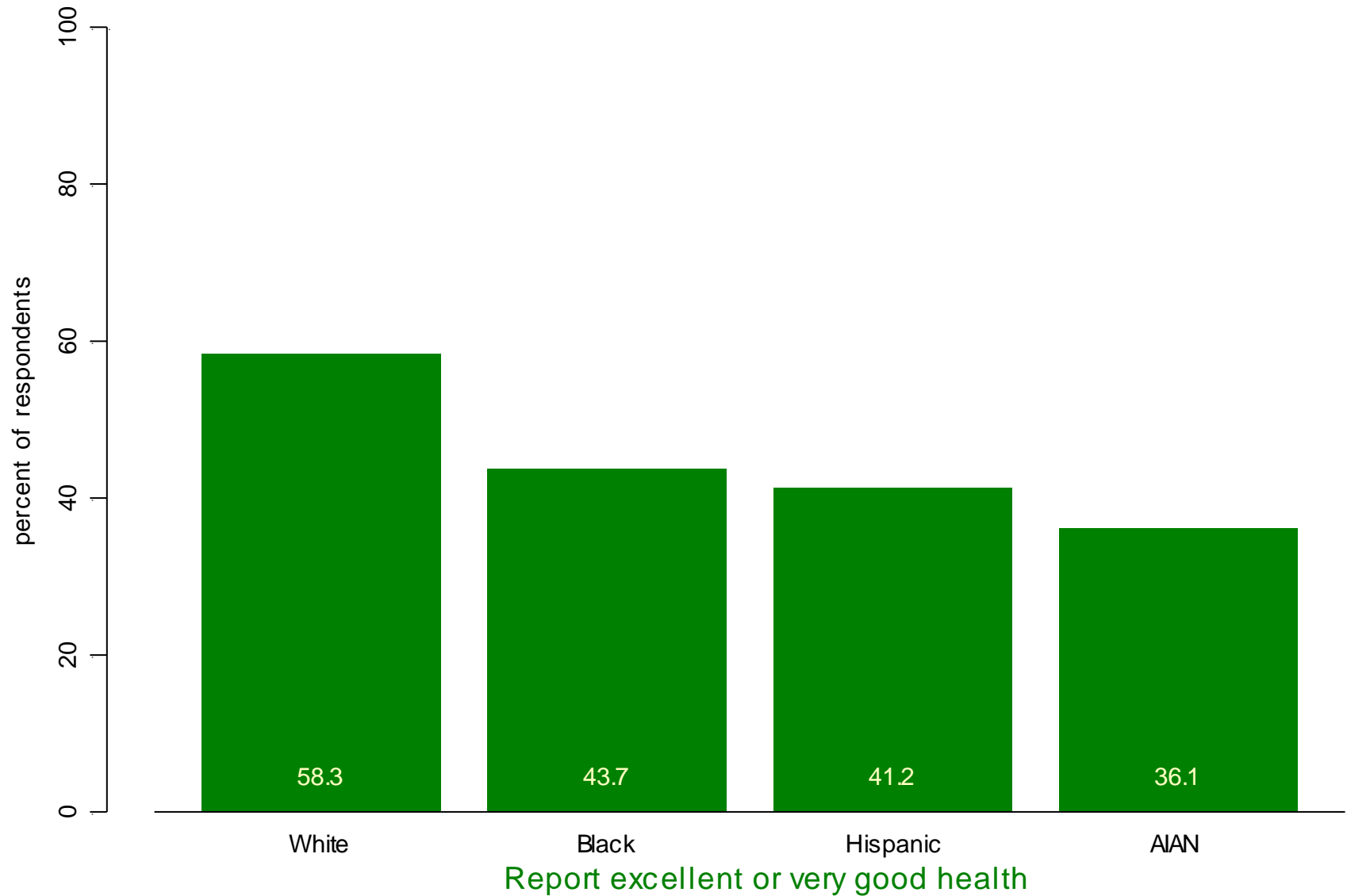
- ❑ **On-the-street “race”** quickly and routinely assigned without benefit of queries about self-identification, ancestry, culture, or genetic endowment
- ❑ ***Ad hoc* racial classification**, an influential basis for interactions between individuals and institutions for centuries
- ❑ **Substrate upon which racism operates**

General health status

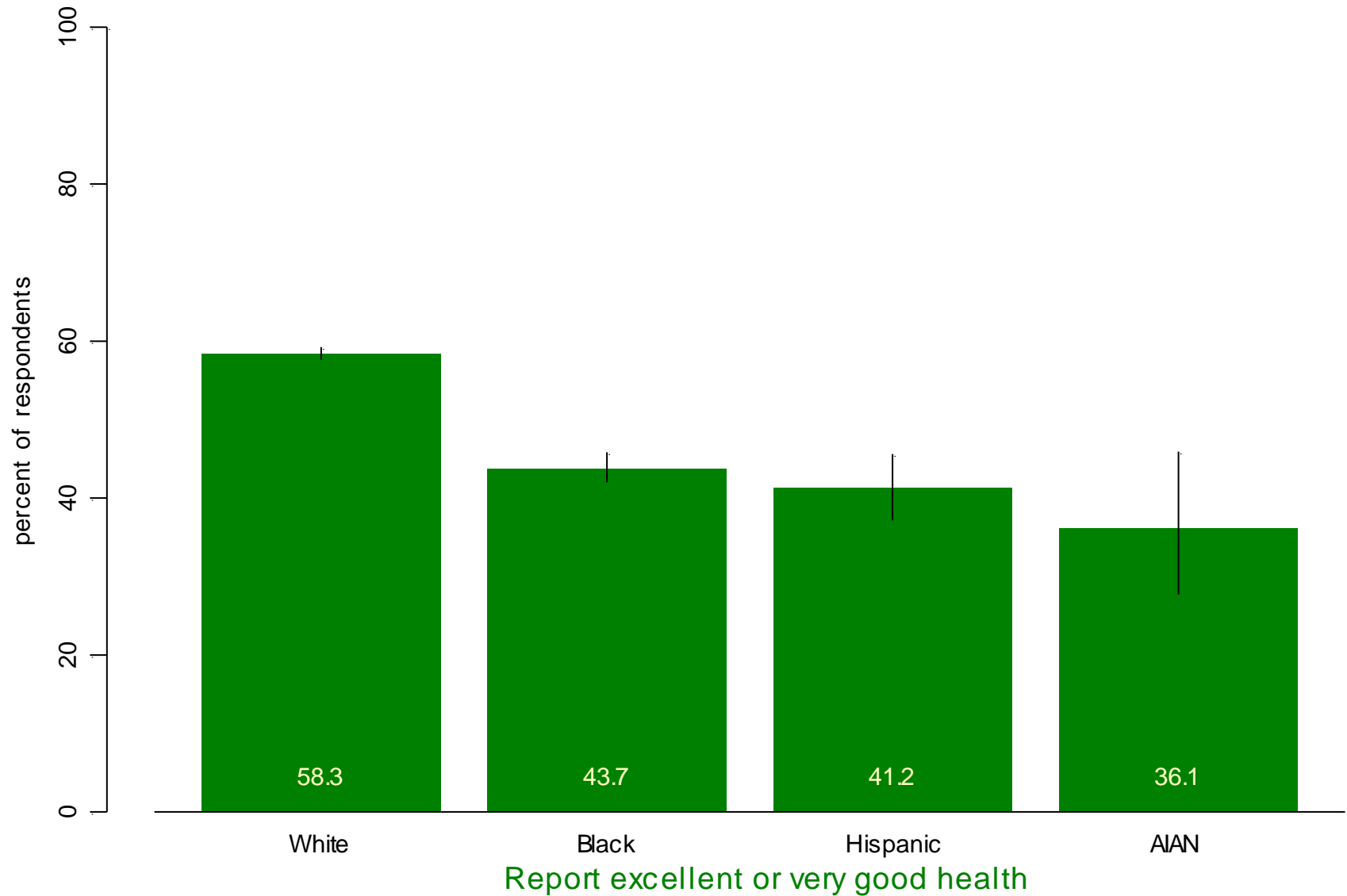
❑ **Would you say that in general your health is:**

- Excellent
- Very good
- Good
- Fair
- Poor

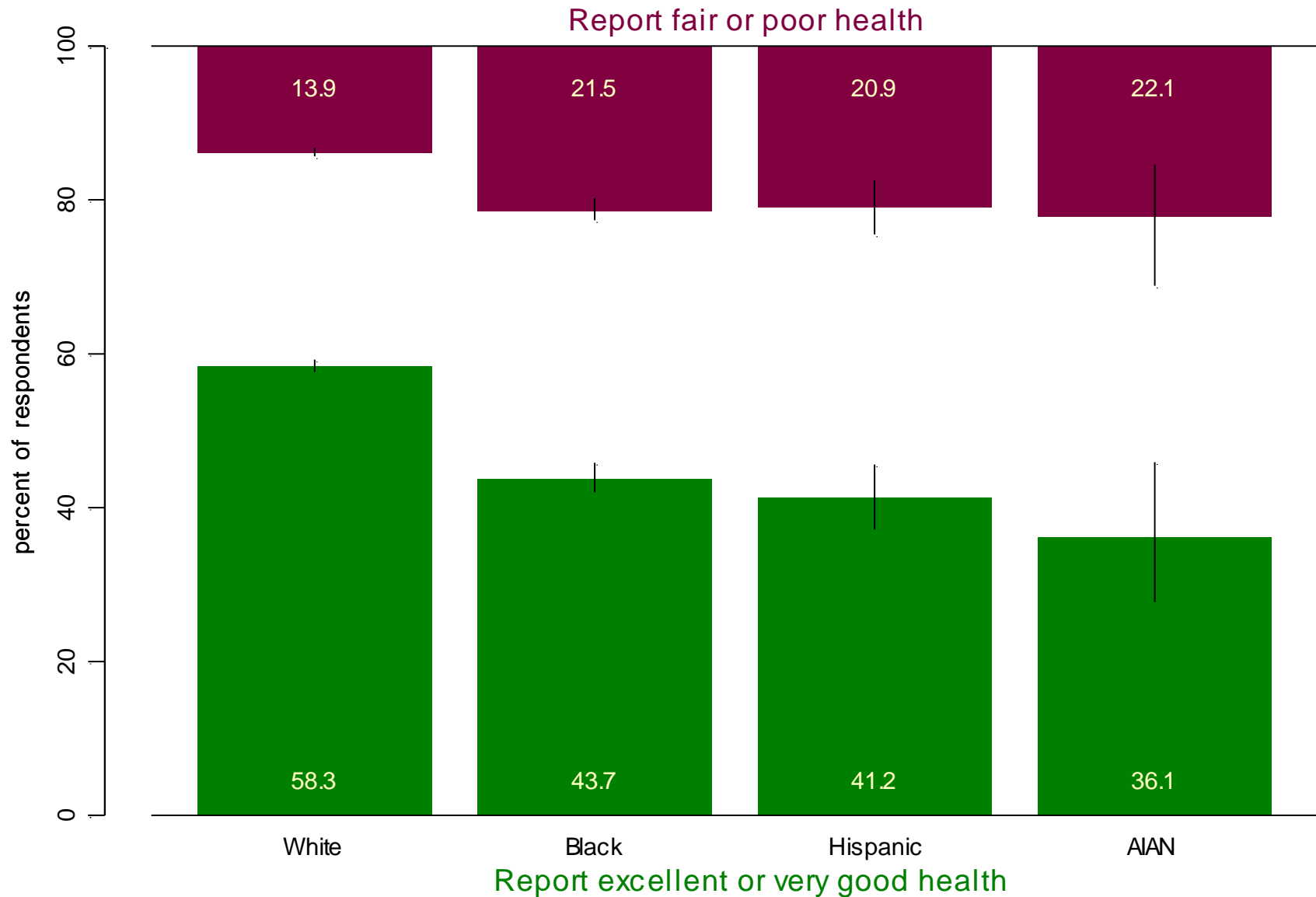
General health status by socially-assigned "race", 2004 BRFSS



General health status by socially-assigned "race", 2004 BRFSS



General health status by socially-assigned "race", 2004 BRFSS



General health status and “race”

- Being perceived as *White* is associated with better health

Self-identified ethnicity

☐ Are you Hispanic or Latino?

- Yes
- No

Self-identified “race”

- ❑ Which one or more of the following would you say is your race?**
 - White
 - Black or African-American
 - Asian
 - Native Hawaiian or Other Pacific Islander
 - American Indian or Alaska Native
 - Other

- ❑ Which one of these groups would you say best represents your race?**

Self-identified “race”/ethnicity

❑ **Hispanic**

- “Yes” to Hispanic/Latino ethnicity question
- Any response to race question

❑ **White**

- “No” to Hispanic/Latino ethnicity question
- Only one response to race question, “White”

❑ **Black**

- “No” to Hispanic/Latino ethnicity question
- Only one response to race question, “Black”

❑ **American Indian/Alaska Native**

- “No” to Hispanic/Latino ethnicity question
- Only one response to race question, “AI/AN”

Two measures of “race”

How usually classified by others

White

Black

Hispanic

AIAN

...

How self-identify

White 26,373	98.4	0.1	0.3	0.1	1.1
Black 5,246	0.4	96.3	0.8	0.3	2.2

Two measures of “race”

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Two measures of “race”

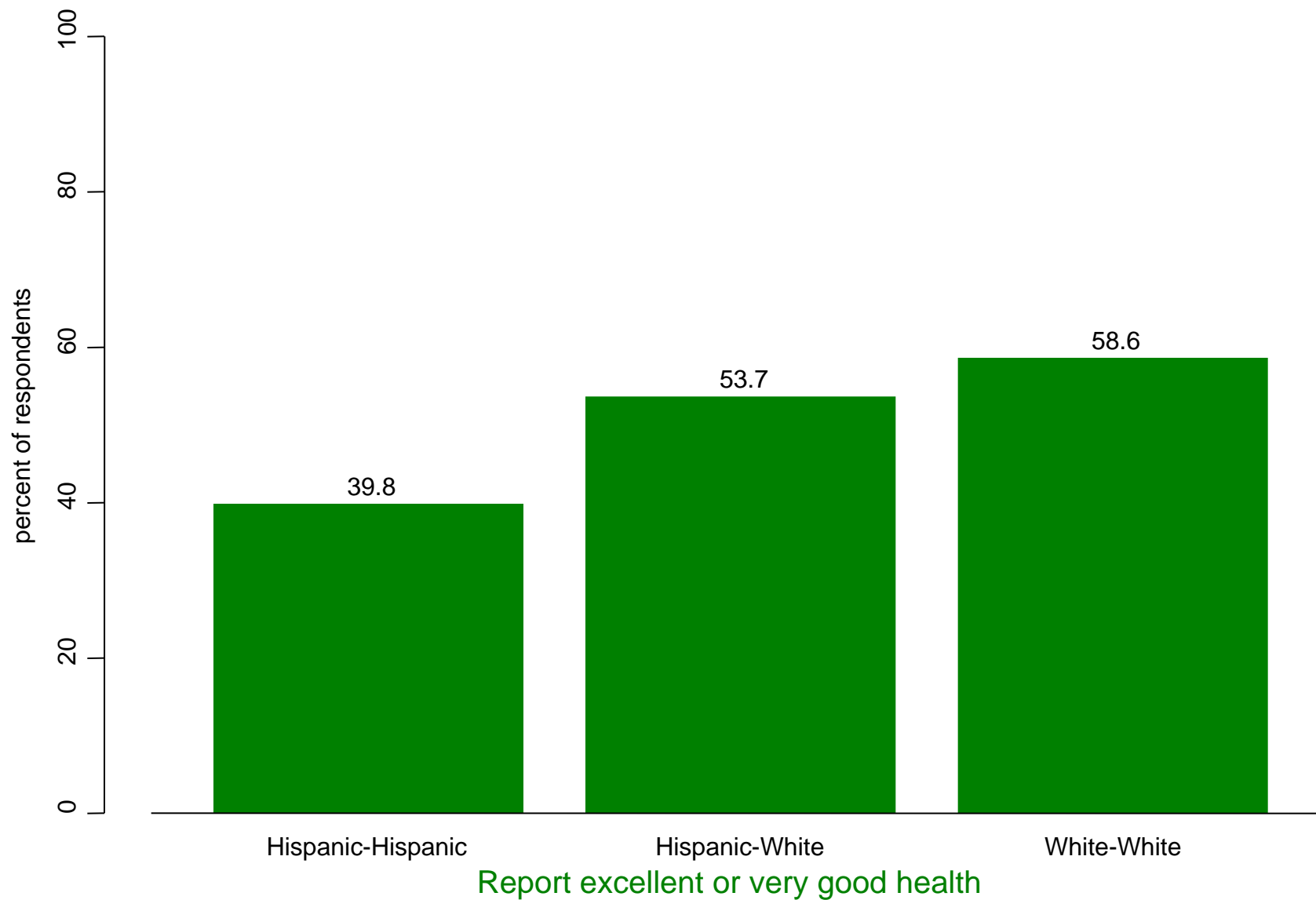
How usually classified by others

White Black Hispanic AIAN . . .

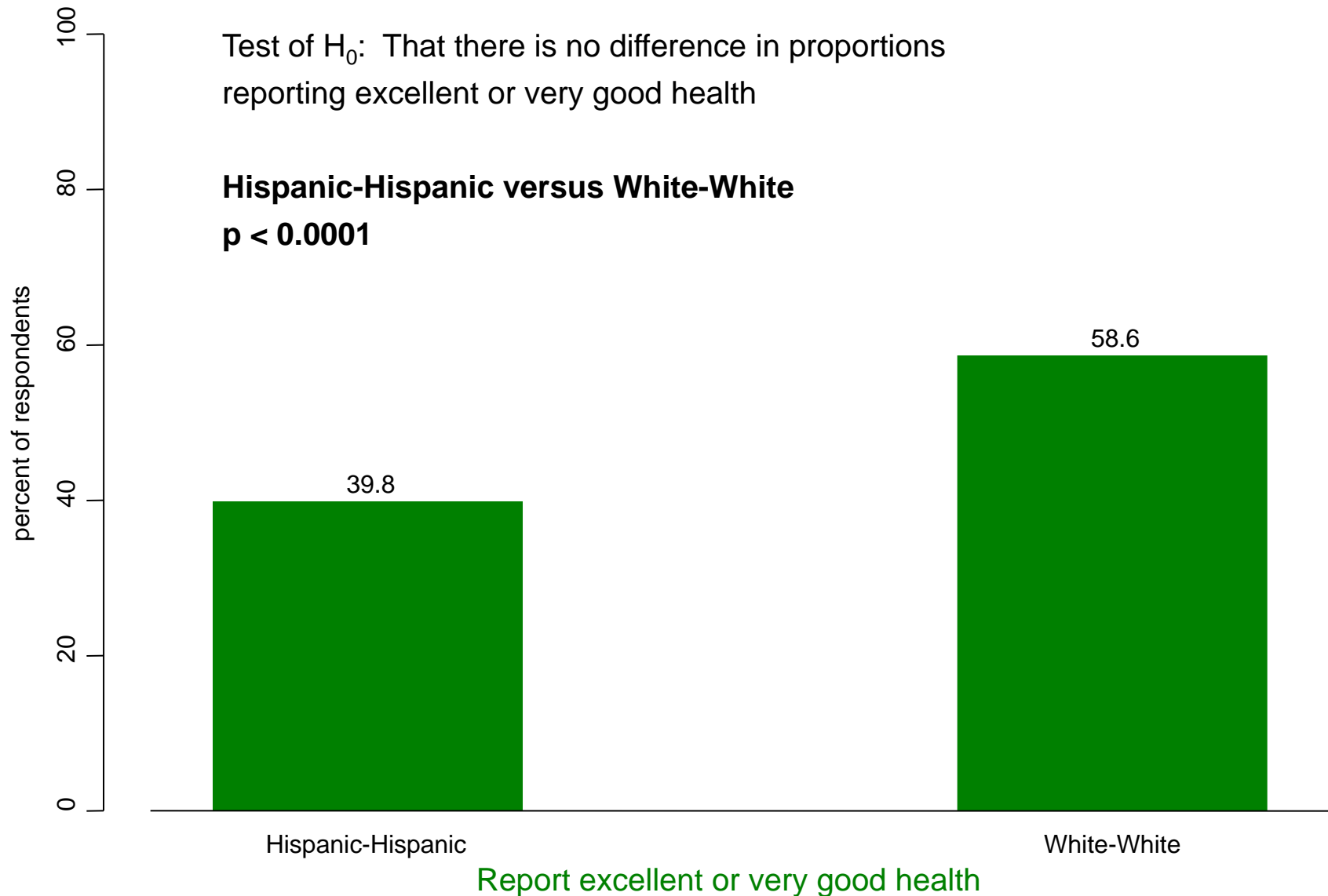
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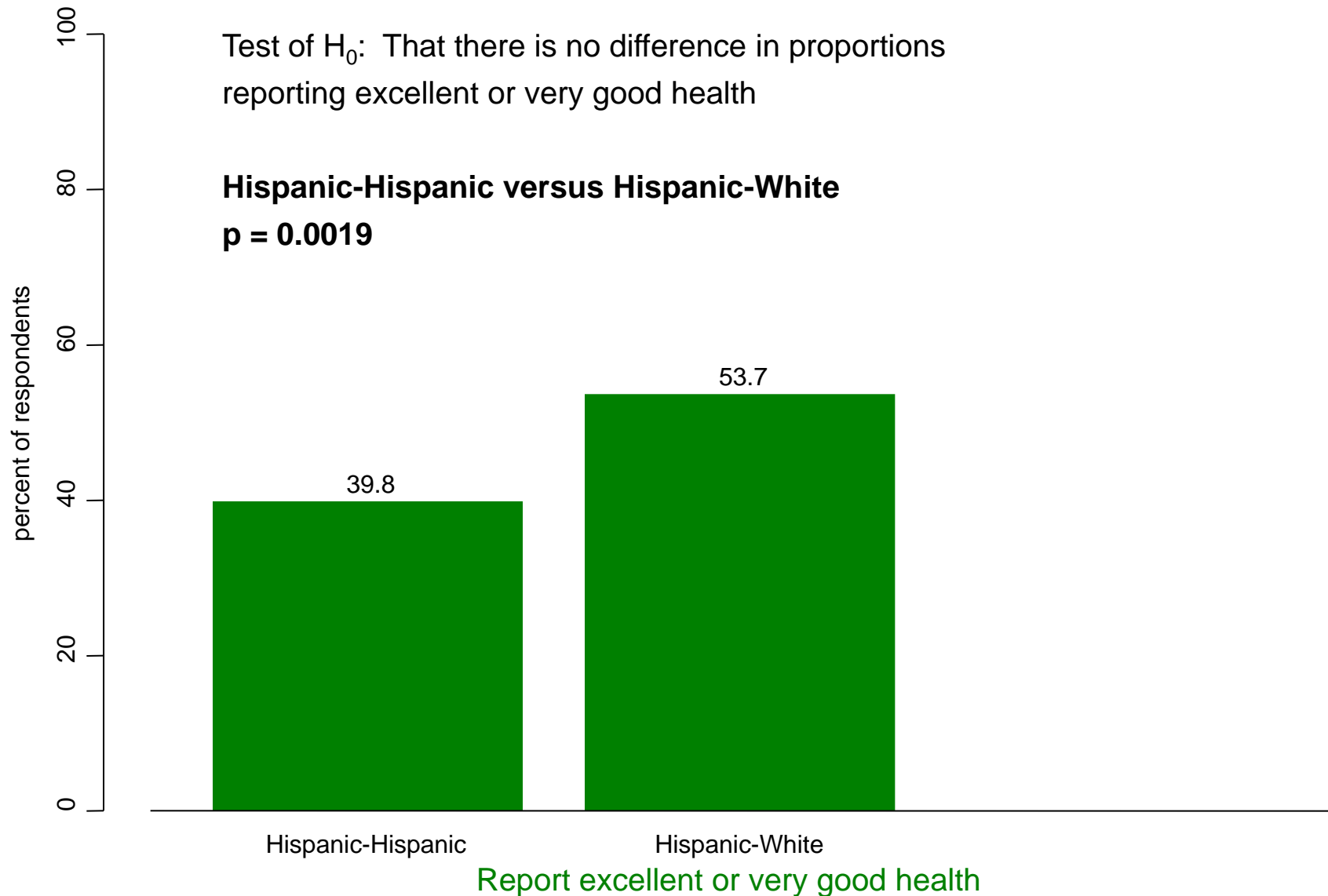
General health status, by self-identified and socially-assigned "race", 2004



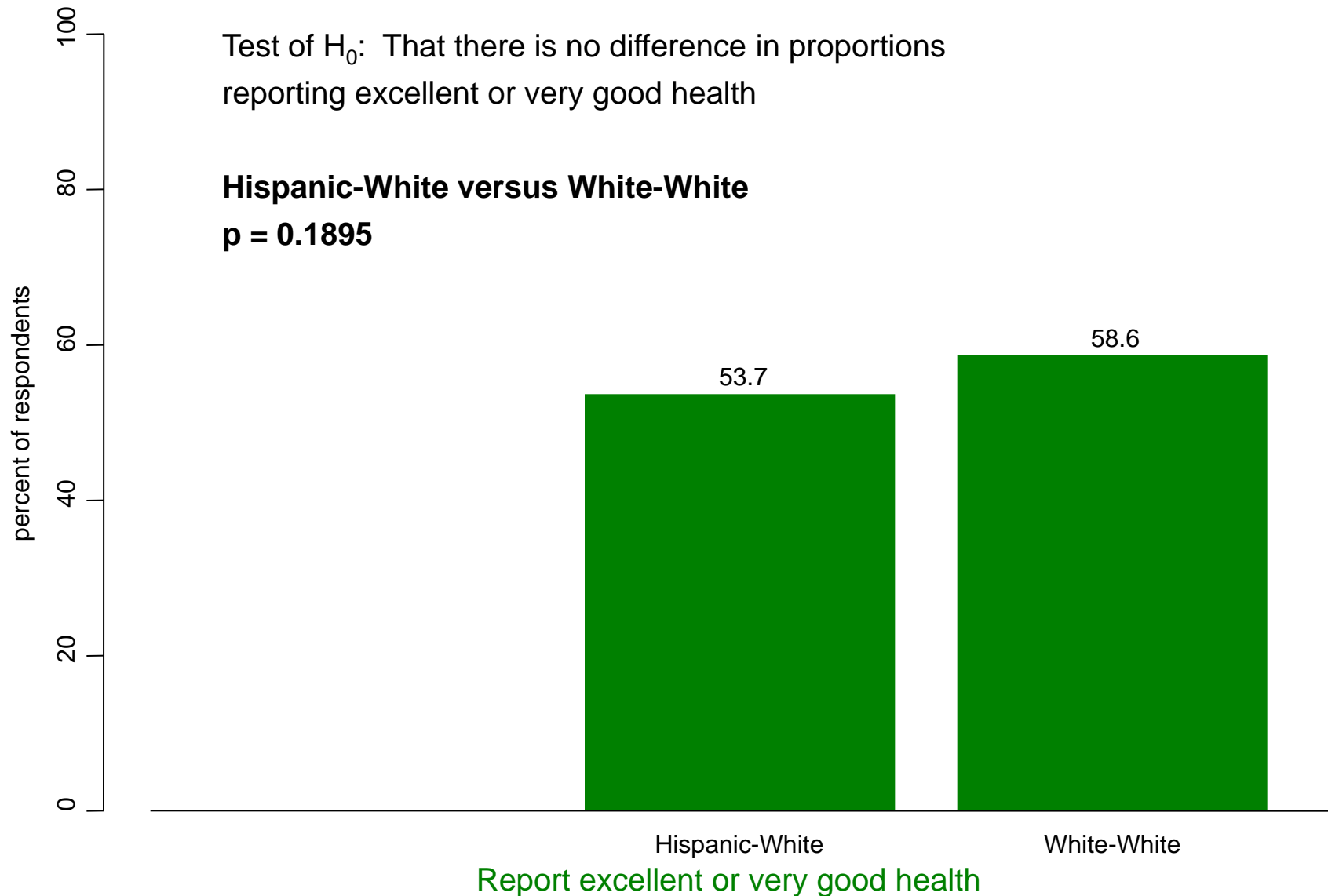
General health status, by self-identified and socially-assigned "race", 2004



General health status, by self-identified and socially-assigned "race", 2004



General health status, by self-identified and socially-assigned "race", 2004



Two measures of “race”

How usually classified by others

White

Black

Hispanic

AIAN

...

How self-identify

White 26,373	98.4	0.1	0.3	0.1	1.1
Black 5,246	0.4	96.3	0.8	0.3	2.2
Hispanic 1,528	26.8	3.5	63.0	1.2	5.5
AIAN 321	47.6	3.4	7.3	35.9	5.8

Two measures of “race”

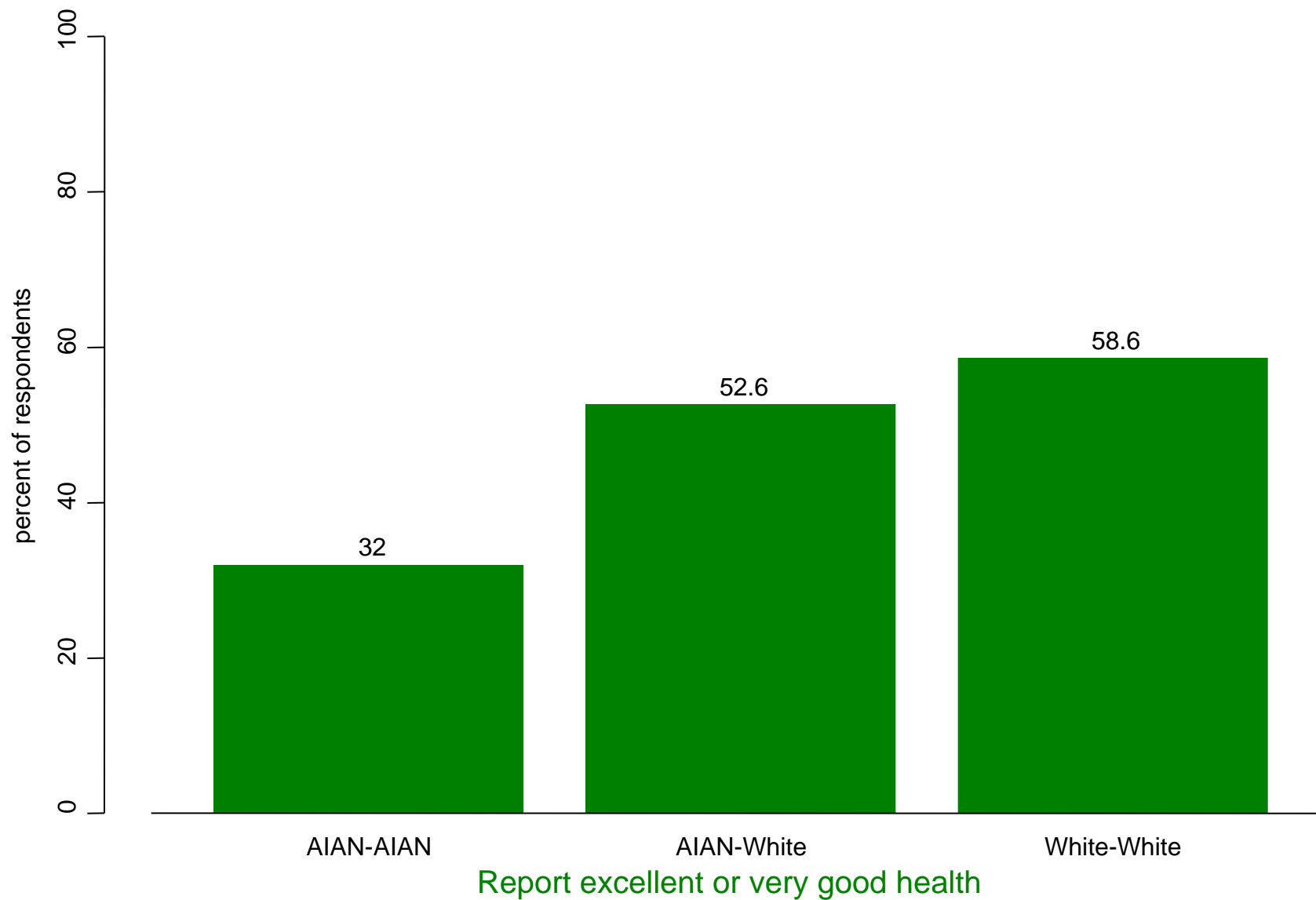
How usually classified by others

White Black Hispanic AIAN . . .

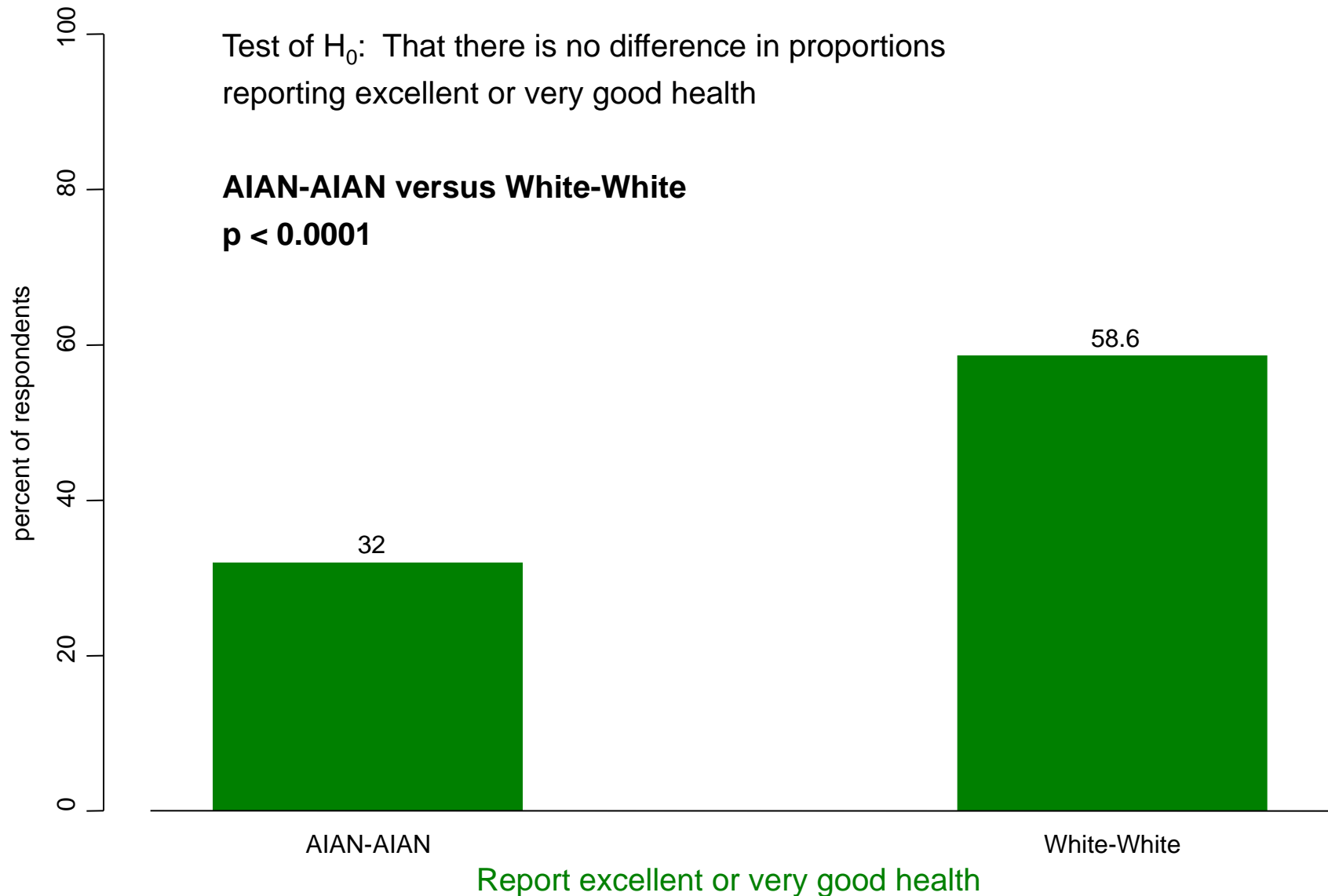
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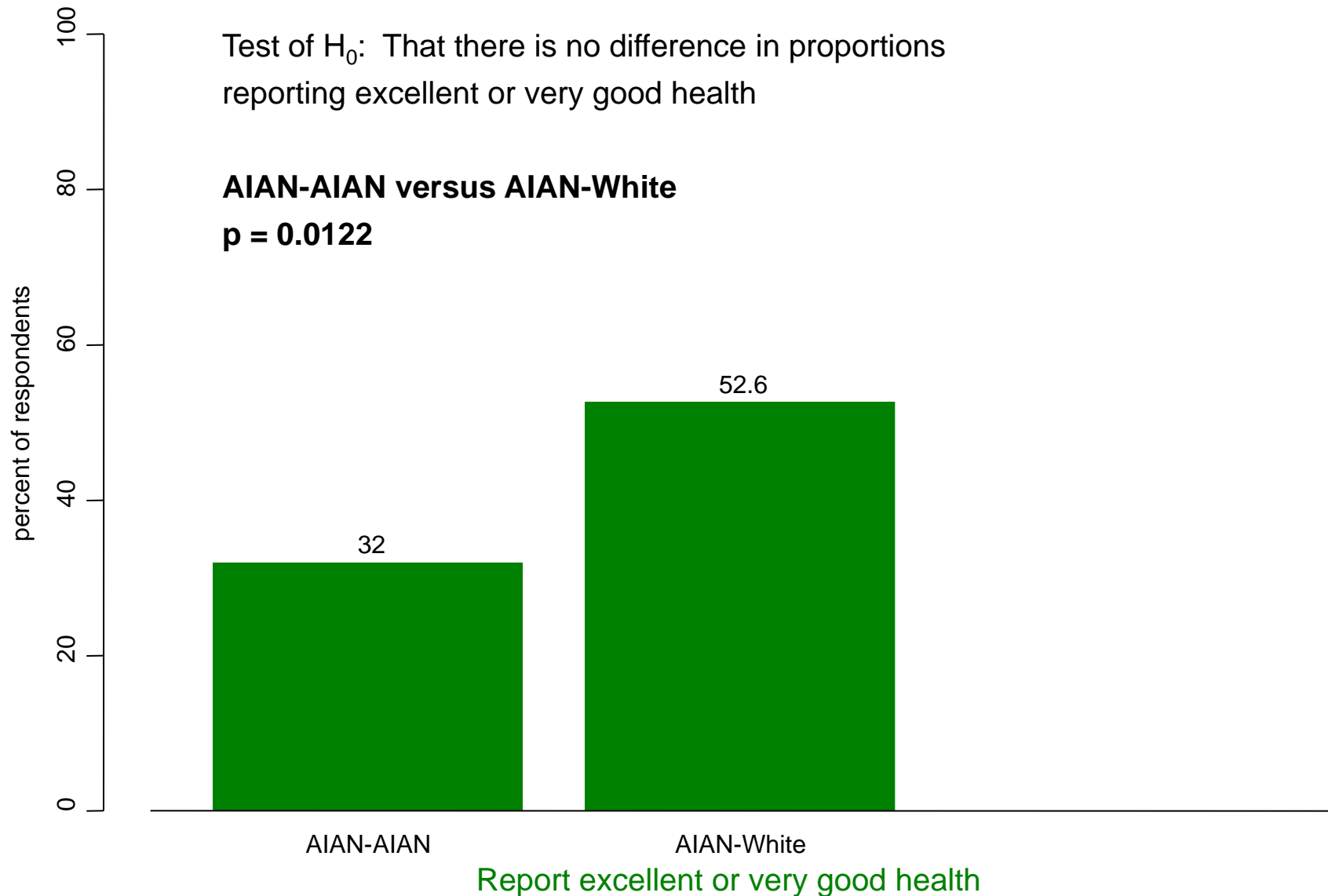
General health status, by self-identified and socially-assigned "race", 2004



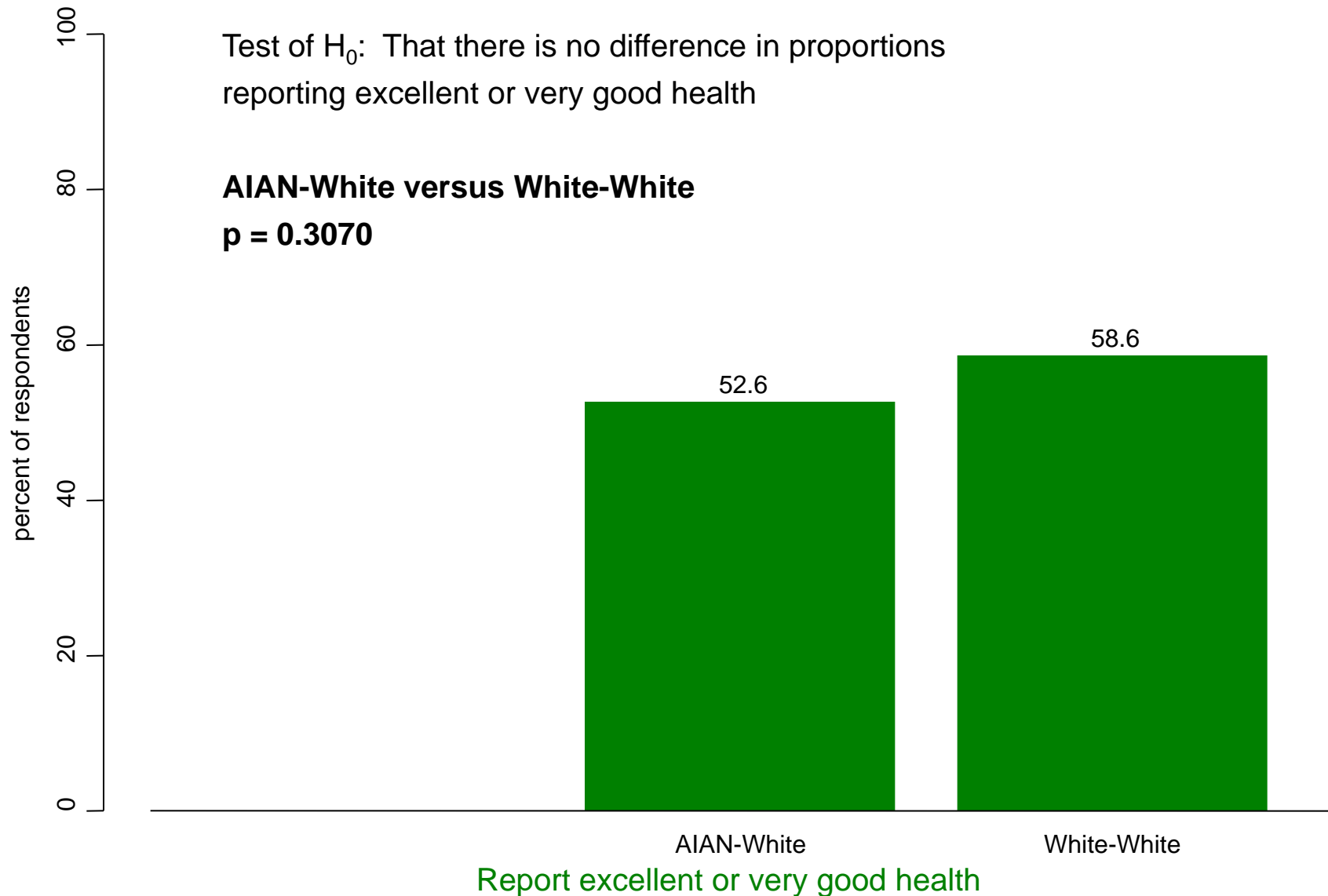
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General health status, by self-identified and socially-assigned "race", 2004



General health status, by self-identified and socially-assigned "race", 2004



General health status and “race”

- ❑ Being perceived as *White* is associated with better health
 - Even within non-*White* self-identified “race”/ethnic groups

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- ❑ **Being perceived as *White* is associated with better health**
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General health status and “race”

- ❑ **Being perceived as *White* is associated with better health**
 - Even within non-*White* self-identified “race”/ethnic groups
 - Even within the same educational level

- ❑ **Being perceived as *White* is associated with higher education**

Key questions

- ❑ **Why is socially-assigned “race” associated with self-rated general health status?**
 - Even within non-*White* self-identified “race”/ethnic groups
 - Even within the same educational level

- ❑ **Why is socially-assigned “race” associated with educational level?**

Racism

A system of structuring opportunity and assigning value based on the social interpretation of how we look (“race”), which

- Unfairly disadvantages some individuals and communities
- Unfairly advantages other individuals and communities
- Saps the strength of the whole society through the waste of human resources

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

Challenges and strategies: Changing opportunity structures

- ❑ Understand the importance of history**
- ❑ Challenge the narrow focus on the individual**
- ❑ View systems and structures as modifiable**
- ❑ Transform consumers to citizens**
- ❑ Expose the myth of meritocracy**
- ❑ Break down barriers to opportunity**
- ❑ Build bridges to opportunity**

Challenges and strategies: Valuing all people equally

- ❑ Break out of bubbles to experience our common humanity**
- ❑ Embrace all children as OUR children**
- ❑ Ask “Who are you?” not “What are you?”**
- ❑ Insist on parity, inclusion, and representation in decision-making**
- ❑ Confront the reality that capitalism profits from unequal valuation**