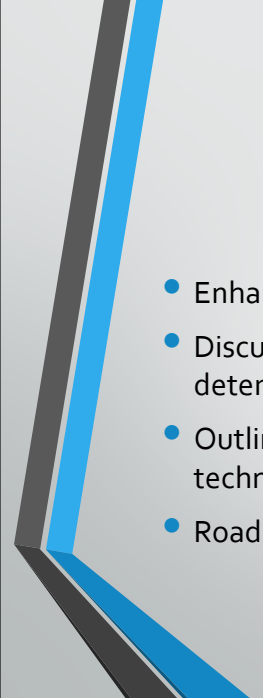


Advancing Health Equity

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Nebraska Department of Health and Human Services

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Objectives

- Enhance understandings of Health Equity.
- Discuss uniqueness of health equity, health disparity and social determinates of health.
- Outline strategies to include social determinates of health into practice and techniques to advance health equity.
- Roadmap to advancing Health Equity, Office of Health Disparity example.

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Echohawk Lefthand

- Native American – Dine' (Navajo) Nation
- Father, Uncle, Son, Nephew, Significant other
- Public Health advocate to the max
- Grew up in SW Colorado and hometown of Teec Nos Pos, AZ./UT.
- USMC Veteran
- Lived in Nebraska 8 years and love love love the outdoors.

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What would you want to know if providing services for my demographics?

- What else would you ask?
 - Age? Gender? Faith? Education? Housing?
 - 45 yr old -> Gen X/Millennial, (Mentality)
 - Gender -> Inclusivity, (Acceptance/Freedom)
 - Faith -> Much of the United States is Christian centered (Acceptance/Freedom)

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Segway into health equity

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What does Health Equity mean??

REALITY	EQUALITY	EQUITY	JUSTICE
One gets more than is needed, while the other gets less than is needed. Thus, a huge disparity is created.	The assumption is that everyone benefits from the same supports. This is considered to be equal treatment.	Everyone gets the support they need, which produces equity.	All 3 can see the game without supports or accommodations because the cause(s) of the inequity was addressed. The systemic barrier has been removed.

Inequality
Unequal access to opportunities.

Equality?
Evenly distributed skills and resources.

Equity
Customize to meet needs and address inequality.

Justice
Fixing the system to give equal access to both tools and opportunities.

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Robert Wood Johnson Foundation

- “Health equity means that everyone has a fair and just opportunity to be as healthy as possible.
 - This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”

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Intersectionality

Merriam-Webster

- the complex, cumulative way in which the effects of multiple forms of discrimination (such as racism, sexism, and classism) combine, overlap, or intersect especially in the experiences of marginalized individuals or groups

Merriam-Webster

Example: Black women face disadvantage based on race and gender; Migrant communities in rural areas; Disabled LGBTQ, Females with ADHD.

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Health Equity, Health Disparity, and Social Determinates of Health

Health Disparity

- Preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations.

CDC, 2019

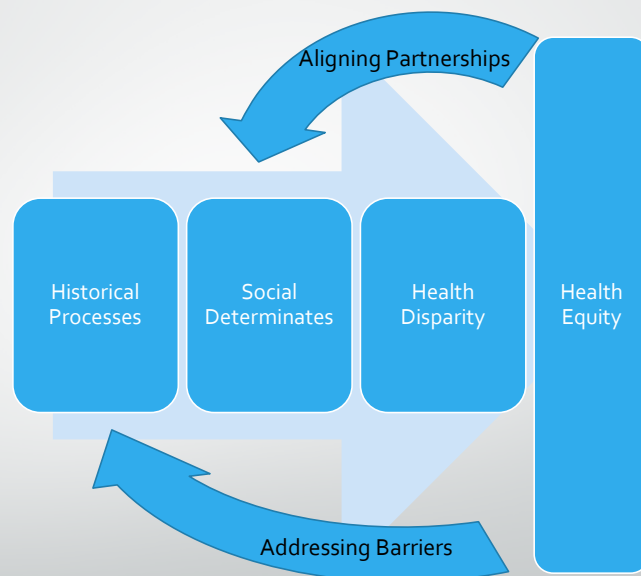
Social Determinates of Health

- Are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.

WHO, 2019

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It's a Process and an Outcome



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Social Determinates of Health lead to differences in health outcomes (disparities).

American Medical Association states – Health Equity is both an *Outcome* and an *Action*.

Figure 1
Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training	Discrimination	Stress	Quality of care
Medical bills	Playgrounds	Higher education			
Support	Walkability				
	Zip code / geography				

Health Outcomes
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations



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Two Strategic Pathways

Structural or Systems-based Determinates

- Opportunities and access
- Resources and means
- Institutional policies and practices
- Influence and power
- Participation in decision-making processes

Social Determinates of Health

- Education
- Economic Stability
- Social Community context
- Community structure and environment
- Healthcare

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Examples

Structural or Systems-based Determinates

- Sustained coordination among agencies.
 - Education, Transportation, Housing, Public Health, Healthcare alignments, coordination, prioritization.
- Prioritized community voices.
 - Shared leadership, co-driven programming
- Ensuring data collection and reporting is representative and accurate.
 - How do we know our impact?
- Accountability and enforcement.
 - Policies, regulations, practices, procedures, processes.

Social Determinates of Health

- Education
 - Chronic Absenteeism, graduation, higher education, academic skills.
- Economic Stability
 - Employment, Housing, Food,
- Social/Community context
 - Voting, incarceration, mentoring, food security,
- Neighborhood and built environment
 - Environmental health, policy, housing, ability accessibility, physical activity, transportation, tobacco use
- Healthcare
 - Quality and Access

Healthy people 2030

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Key steps to achieve Health Equity (RWJF)


- **Identify important health disparities.** Many disparities in health are rooted in inequities in the opportunities and resources needed to be as healthy as possible. The determinants of health include living and working conditions, education, income, neighborhood characteristic, social inclusion, and medical care. An increase in opportunities to be healthier will benefit everyone but more focus should be placed on groups that have been excluded or marginalized in the past.
- **Change and implement policies, laws, systems, environments, and practices to reduce inequities in the opportunities and resources needed to be as healthy as possible.** Eliminate the unfair individual and institutional social conditions that give rise to the inequities.
- **Evaluate and monitor efforts using short- and long-term measures** as it may take decades or generations to reduce some health disparities. In order not to underestimate the size of the gap between advantaged and disadvantaged, disadvantaged groups should not be compared to the general population but to advantaged groups.
- **Reassess strategies in light of process and outcomes and plan next steps.** Actively engage those most affected by disparities in the identification, design, implementation, and evaluation of promising solutions

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**“The currency of Health Equity is
RELATIONSHIPS”**

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What are your relationships like with:

- Local Health Departments
- Community Based Organizations
- Tribes
- Healthcare Organizations
- Community members
- Other stakeholders

With conversations around
• ***Data, needs, &
program/service delivery***

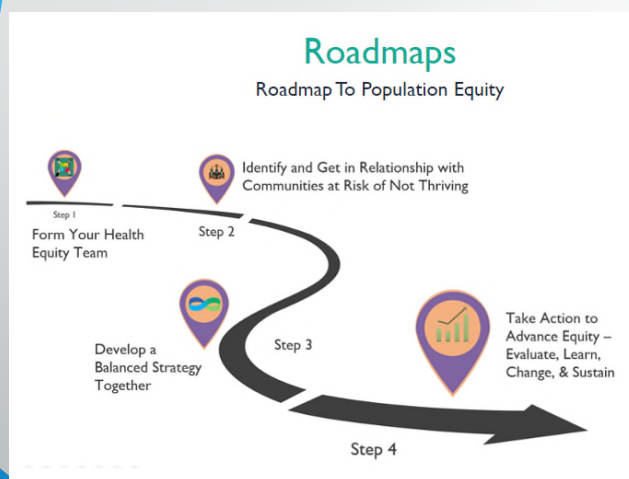
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Office Of Health Disparity

Approach

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Pathways to Population Health Equity

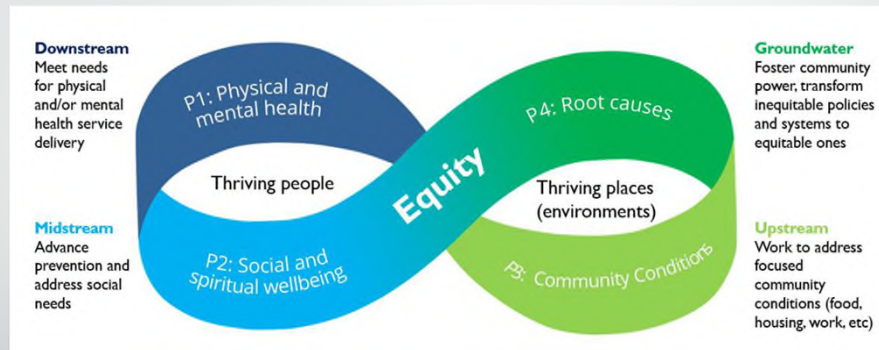


OHD approach to addressing Health Disparities in the Division of Public Health.

Compass assessment to core transformation skills needing improvement or enhancement.

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Pathways to Population Health Equity



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P2PHE Compass Assessment

Core Transformation Skills	Physical and/or Mental Health of People	Social and/or Spiritual Well-being of People	Community Conditions	Root Causes
<ul style="list-style-type: none"> Equity Stewardship Communication Partnerships with people with lived experience Understanding our populations through an equity lens Community collaboration Budgeting and payment 	<ul style="list-style-type: none"> Data for physical and/or mental health Advance population health strategies Direct care services <ul style="list-style-type: none"> Integrated care Care management 	<ul style="list-style-type: none"> Data for social and/or spiritual well-being Planning around social needs Direct care services: <ul style="list-style-type: none"> Screen for and address social needs 	<ul style="list-style-type: none"> Common vision Concrete aims Shared theory of change/community strategy Set measures with the community Community access to data 	<ul style="list-style-type: none"> Power sharing Growing community leadership and voice Institutional/health department policy Public policy and context Directing fiscal and human resources Aligning and leveraging assets

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Office of Health Disparity Approach

- Internal
 - DPH programs complete Compass Assessment
 - Strategy to improve CTS
 - Equity Steering Committee
 - Learning Series/Communities of Practice
 - Plan/Do/Study/Act
- External
 - LHD's complete Compass Assessment
 - Strategies around CTS
 - SHIP Reducing Health Disparity workgroup
 - Learning series/Communities of Practice
 - Plan/Do/Study/Act

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Helping People Live Better Lives

Questions?

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