Social Determinants of Health and Equity

The Impacts of Racism on Health
Levels of health intervention
Addressing the social determinants of health

Primary prevention

Safety net programs and secondary prevention

Medical care and tertiary prevention
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
Differences in access to care

Differences in exposures and opportunities

Differences in quality of care
(ambulance slow or goes the wrong way)
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?
Determinants of health
Determinants of health

Social determinants of health (contexts)

Individual behaviors
Determinants of health and illness that are outside of the individual

Beyond genetic predispositions

Beyond individual behaviors

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

- Beyond genetic predispositions
- Beyond individual behaviors

Determinants of health (contexts):

- Individual behaviors

The contexts in which individual behaviors arise:
Determinants of health

Individual behaviors

Social determinants of health (contexts)

Individual resources
Education, occupation, income, wealth
Determinants of health

**Individual resources**
Education, occupation, income, wealth

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

Social determinants of health (contexts)

Individual behaviors
Determinants of health

**Individual resources**
Education, occupation, income, wealth

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

**Social determinants of health (contexts)**

**Individual behaviors**

**Hazards and toxic exposures**
Pesticides, lead, reservoirs of infection
Determinants of health

Individual resources
Education, occupation, income, wealth

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

Hazards and toxic exposures
Pesticides, lead, reservoirs of infection

Opportunity structures
Schools, jobs, justice
Determinants of health

- Societal determinants of context
- Social determinants of health (contexts)
- Individual behaviors
Determinants of health

Determine the range of observed contexts

Societal determinants of context

Social determinants of health (contexts)

Individual behaviors
Determinants of health

Determine the range of observed contexts

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

Determine the distribution of different populations into those contexts

Include capitalism, racism, and other systems of power

Societal determinants of context

Social determinants of health (contexts)

Individual behaviors
Determinants of health

- Determine the range of observed contexts
- Determine the distribution of different populations into those contexts
- Include capitalism, racism, and other systems of power
- The social determinants of equity

Societal determinants of context

Social determinants of health (contexts)

Individual behaviors
Addressing the social determinants of health

- Involves the medical care and public health systems, but clearly extends beyond these.
- Requires collaboration with multiple sectors outside of health, including education, housing, labor, justice, transportation, agriculture, and environment.
Addressing the social determinants of equity

- Involves monitoring for inequities in exposures and opportunities, as well as for disparities in outcomes
- Involves examination of structures, policies, practices, norms, and values
- Requires intervention on societal structures and attention to systems of power
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.
Why racism?

- To eliminate racial disparities in health, need examine fundamental causes
  - “Race” is only a rough proxy for SES, culture, or genes
  - “Race” precisely measures the social classification of people in our “race”-conscious society

- Hypothesize racism as a fundamental cause of racial disparities in 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?

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

– Unfairly disadvantages some individuals and communities
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– Unfairly disadvantages some individuals and communities

– 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

Source: Jones CP, Phylon 2003
“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, Michigan, Mississippi, Nebraska, New Hampshire, New Mexico, North Carolina, Ohio, Rhode Island, South Carolina, Virginia, Washington, Wisconsin
<table>
<thead>
<tr>
<th>State</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
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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
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

- White: 58.3%
- Black: 43.7%
- Hispanic: 41.2%
- AIAN: 36.1%

Report excellent or very good health
General health status by socially-assigned "race", 2004 BRFSS

Report excellent or very good health

- White: 58.3%
- Black: 43.7%
- Hispanic: 41.2%
- AIAN: 36.1%
General health status by socially-assigned "race", 2004 BRFSS

Report fair or poor health
- White: 13.9%
- Black: 21.5%
- Hispanic: 20.9%
- AIAN: 22.1%

Report excellent or very good health
- White: 58.3%
- Black: 43.7%
- Hispanic: 41.2%
- AIAN: 36.1%
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”

<table>
<thead>
<tr>
<th>How self-identify</th>
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<tr>
<td>White 26,373</td>
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- White
- Black
- Hispanic
- AIAN
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General health status, by self-identified and socially-assigned "race", 2004

Report excellent or very good health

- Hispanic-Hispanic: 39.8%
- Hispanic-White: 53.7%
- White-White: 58.6%
General health status, by self-identified and socially-assigned "race", 2004

Test of $H_0$: That there is no difference in proportions reporting excellent or very good health

**Hispanic-Hispanic versus White-White**

$p < 0.0001$
General health status, by self-identified and socially-assigned "race", 2004

Test of $H_0$: That there is no difference in proportions reporting excellent or very good health

Hispanic-Hispanic versus Hispanic-White
$p = 0.0019$
General health status, by self-identified and socially-assigned "race", 2004

Test of $H_0$: That there is no difference in proportions reporting excellent or very good health

Hispanic-White versus White-White
$p = 0.1895$
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How usually classified by others
Report excellent or very good health

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

Test of $H_0$: That there is no difference in proportions reporting excellent or very good health

**AIAN-AIAN versus White-White**

$p < 0.0001$
General health status, by self-identified and socially-assigned "race", 2004

Test of $H_0$: That there is no difference in proportions reporting excellent or very good health

**AIAN-AIAN versus AIAN-White**

$p = 0.0122$
General health status, by self-identified and socially-assigned "race", 2004

Test of $H_0$: That there is no difference in proportions reporting excellent or very good health

**AIAN-White versus White-White**

$p = 0.3070$
General health status and “race”

- Being perceived as *White* is associated with better health
  - Even within non-*White* self-identified “race”/ethnic groups
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
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
General health status by education and "race", 2004 BRFSS

- **Graph 1:** Percent "excellent" or "very good" health status by education level and race, with lines showing the trend for non-black and black populations.

- **Graph 2:** Percent distribution of education levels for non-black and black populations, with bars indicating the percentage for each level.
General health status by education and "race", 2004 BRFSS
Key questions

- WHY is socially-assigned “race” associated with self-reported 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 one looks (“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

Source: Jones CP, *Phylon* 2003
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 SES and “race”
Personally-mediated racism

- Differential assumptions about the abilities, motives, and intents of others, by “race”
- 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

Who is the gardener?

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

Dangerous when
- Allied with one group
- Not concerned with equity
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”
- Social class
- Geography
- Nationality, language, and legal status
- Gender
- Sexual orientation

- These are risk markers, not risk factors
Health equity

Health equity is the realization by ALL people of the highest attainable level of health.

Source: National Partnership for Action, ongoing discussions, 2009
Achieving health equity

• Requires valuing all individuals and populations equally

Source: National Partnership for Action, ongoing discussions, 2009
Achieving health equity

- Requires valuing all individuals and populations equally, and
- Entails focused and ongoing societal efforts

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- Requires valuing all individuals and populations equally, and
- Entails focused and ongoing societal efforts
  - To eliminate health disparities

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- Requires valuing all individuals and populations equally, and
- Entails focused and ongoing societal efforts
  - To eliminate health disparities
  - By assuring the conditions for optimal health for all groups

Source: National Partnership for Action, ongoing discussions, 2009
Achieving health equity

• Requires valuing all individuals and populations equally, and

• Entails focused and ongoing societal efforts
  – To eliminate health disparities
  – By assuring the conditions for optimal health for all groups,
  – Particularly for those who have experienced historical or contemporary injustices or socioeconomic disadvantage.

Source: National Partnership for Action, ongoing discussions, 2009
Our goal: To expand the conversation

Health services
Our goal: To expand the conversation

Health services

Social determinants of health
Our goal: To expand the conversation

Health services

Social determinants of health

Social determinants of equity

Our tasks

• Put racism on the agenda
  – Name racism as a force determining the distribution of 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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cdj9@cdc.gov
• California Newsreel: *Unnatural Causes: Is Inequality Making Us Sick?*
  http://www.unnaturalcauses.org/

• World Health Organization: Commission on Social Determinants of Health
  http://www.who.int/social_determinants/en/
Resources

- CityMatCH: Undoing Racism Action Group
  http://www.citymatch.org/UR.php

- National League of Cities: Reducing Racism and Achieving Racial Justice
  http://www.nlc.org/resources_forCities/programs__services/382.aspx
Resources

• UNESCO: International Coalition of Cities Against Racism
  http://www.unesco.org/shs/citiesagainstracism

• United Nations: World Conference Against Racism, Racial Discrimination, Xenophobia, and Related Intolerance
  http://www.un.org/WCAR/
Resources

- United Nations: Committee to Eliminate Racial Discrimination
  http://www2.ohchr.org/english/bodies/cerd/

  **USA CERD report:**
  http://www2.ohchr.org/english/bodies/cerd/docs/AdvanceVersion/cerd_c_usa6.doc

  **NGO shadow reports:**
  http://www2.ohchr.org/english/bodies/cerd/cerds72-ngos-usa.htm
Resources

• CDC Racism and Health Workgroup
  rahw@cdc.gov

  Communications and Dissemination
  Education and Development
  Global Matters
  Liaison and Partnership
  Organizational Excellence
  Policy and Legislation
  Science and Publications
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