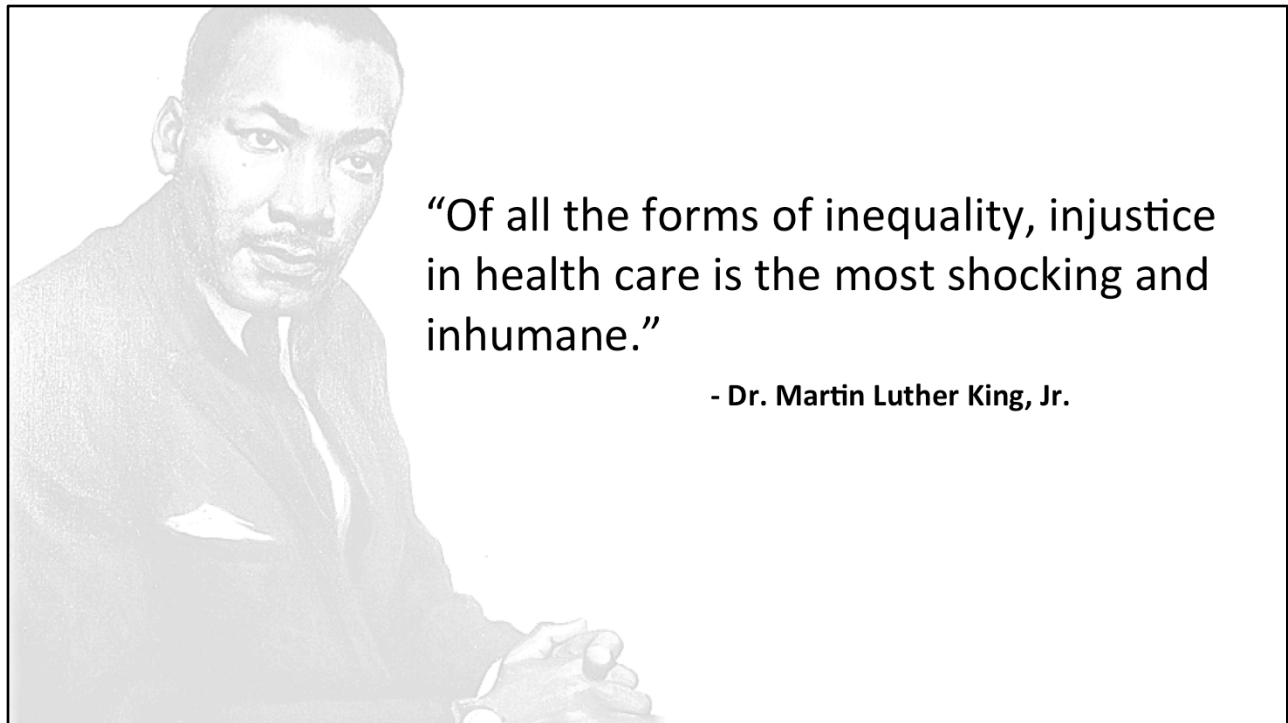


Contributing to Health Equity



Script: The Michigan Public Health Training Center welcomes you to this module, Contributing to Health Equity. After completing the previous modules, you should have a better understanding of the field of public health, the functions of a board of health, and how public health is financed. Now let's look more closely at the populations your board of health serves.



Script: Dr. Martin Luther King, Jr. once said, “Of all the forms of inequality, injustice in health care is the most shocking and inhumane.”

Module Objectives

- Define the concept of health equity
- Describe the social determinants of health
- Identify strategies for addressing causes of health inequity

Script: This module explores the concept of health equity, a driving force behind the essential services provided by public health agencies and an important aspect of the governance function of continuous improvement. You will also learn what the social determinants of health are and how they relate to health equity and health disparities. Finally, you will identify strategies for addressing causes of health inequity. This knowledge will help your board of health to make equitable decisions for your community.

Define Health Equity



Script: Let's take a look at what is meant by the term "health equity."



Script: Health equity is when the entire population is given the opportunity to reach their full health potential. Access to quality education and neighborhoods that are designed for social interaction and physical activity are examples of these kinds of opportunities. Health *inequities*, then, have been defined as the unfair and avoidable differences in health that occur within and between populations. So, how can health equity be achieved? The short answer is by addressing health disparities. These are measurable differences in the health outcomes of two or more populations. Differences may be seen when comparing groups by race, gender, socioeconomic status, geography, or other factors.

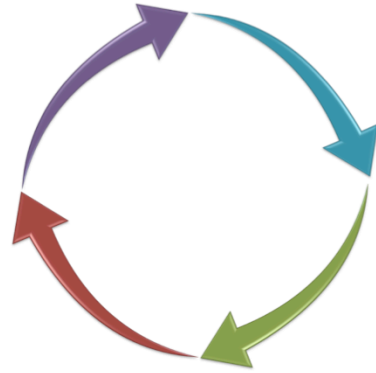
In the United States in 2013...

- Higher rates of infant mortality in South and Midwest
- Heart disease was the leading cause of death in the U.S.
 - Non-Hispanic African-American adults had a 50% greater chance of dying from heart disease or stroke before age 75

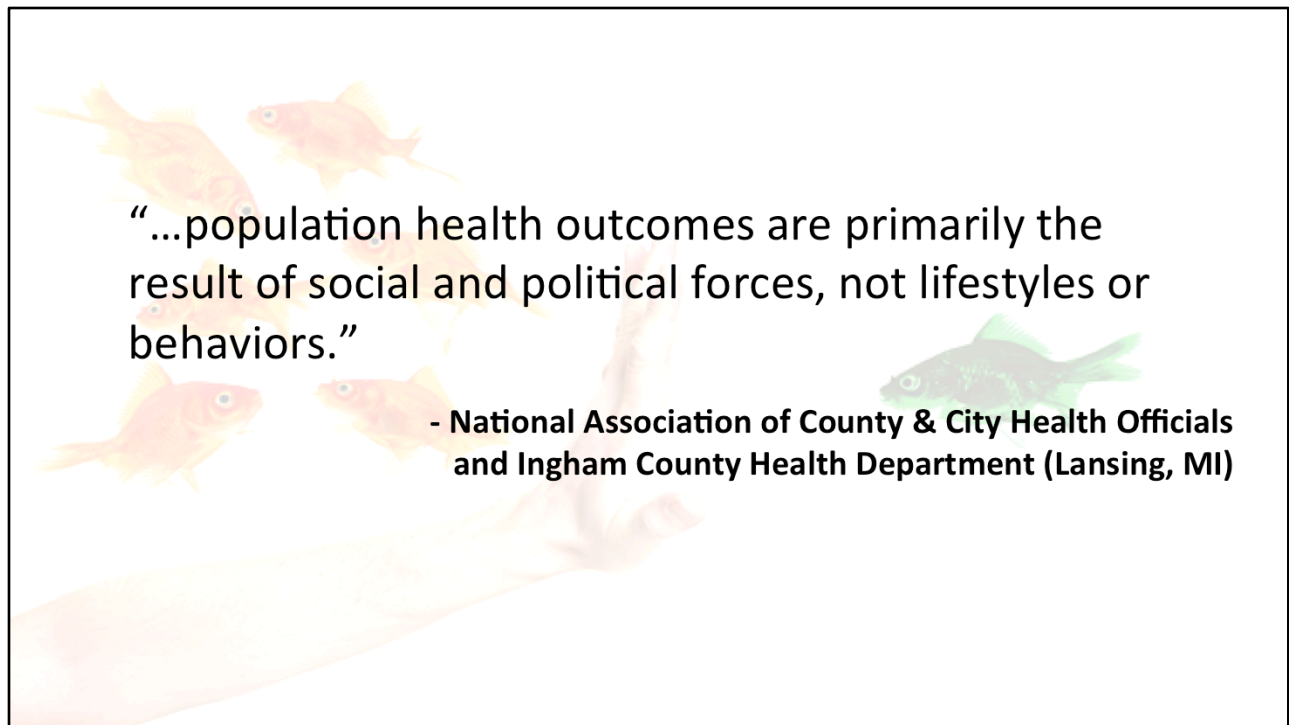
Script: For example, in 2013, there were higher rates of infant mortality in the Southern and Midwestern parts of the United States compared to other regions. Another example is that in 2013, heart disease was the leading cause of death in the United States, but non-Hispanic African-American adults had at least a 50% greater chance of dying from heart disease or stroke before age 75 than non-Hispanic white adults.

Continuous Improvement

- Identify health disparities
- Identify factors causing health disparities

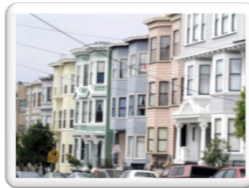


Script: You will recall that two components of the continuous improvement function of boards of health are to improve community health and in doing so, establish measurable outcomes for population health. Identifying the health disparities most affecting your community and the factors causing them is an important place to start these efforts.



Script: So, what causes these differences in health? These disparities are influenced by policies, institutions, and practices that shape the distribution of social advantage over time. In other words, "population health outcomes are primarily the result of social and political forces, not lifestyles or behaviors." This idea is central to not only determining health inequities and disparities, but also to explaining the social determinants of health and why they are so crucial to population health

Social Determinants of Health



Script: The social determinants of health are the circumstances in which people are born, age, grow up, love, and work. These social, cultural, and environmental conditions might include factors ranging from a person's social network to the quality of their housing and neighborhood to local policies affecting their access to transportation. Social determinants of health are shaped at the local, state, national, and global level by the distribution of money, power, and resources.



Script: Health is especially influenced by place. Look in your community. Do you have clean air and water or polluted environmental conditions? Do all children have clean parks to play in or safe places to walk or ride bikes? In the U.S., it is becoming increasingly apparent that where you live is one of the most important factors in determining your health.



Script: Do all children have clean parks to play in or safe places to walk or ride bikes? In the U.S., it is becoming increasingly apparent that where you live is one of the most important factors in determining your health.



Script: It affects how long you live and how good you feel. Where you live can also shape your weight, cholesterol level, or risk for heart disease. It is easy to see that that low-income neighborhoods and communities of color are most often afflicted by the worst conditions. It is these areas that also have the highest levels of many health problems. Importantly, just as social factors can cause health disparities, decisions made by society can improve health equity.

Strategies for Addressing Causes of Health Inequity



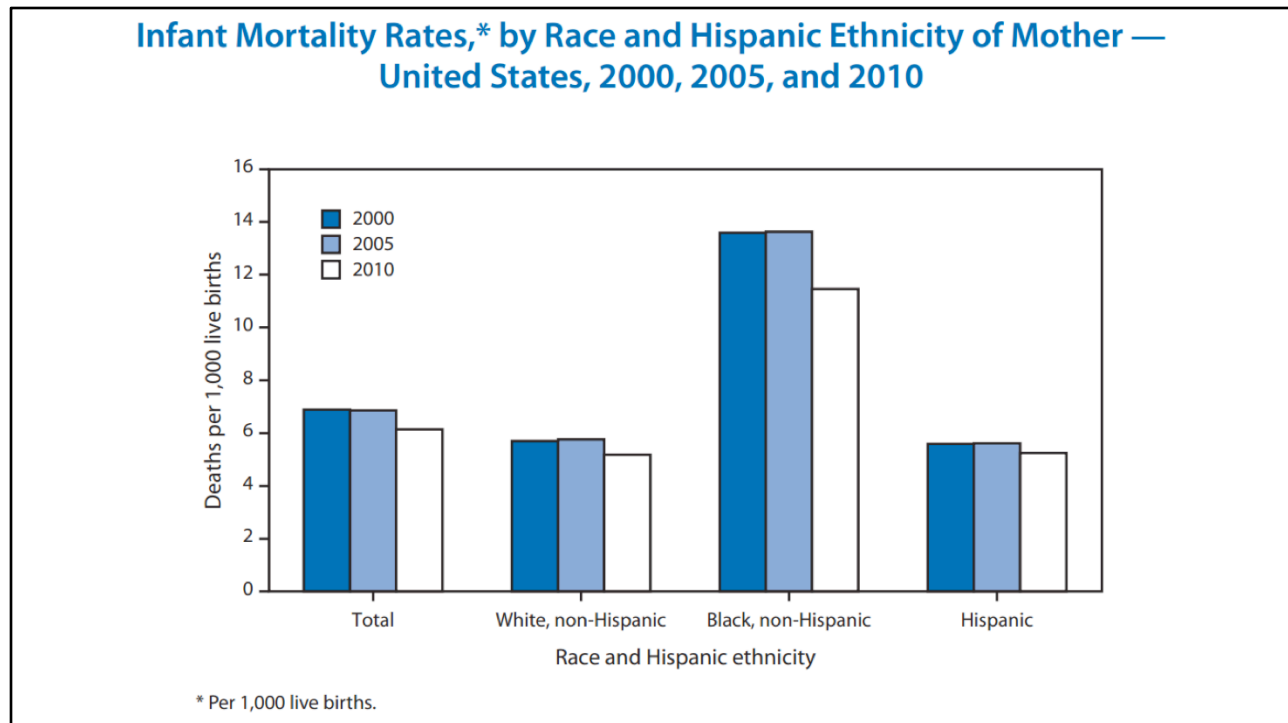
Script: There are several steps that a board of health can take in conjunction with its health department to work towards health equity and the elimination of health disparities in its community.

1st Step: Improve Data Collection, Systems, and Accessibility

- Be aware of and understand vulnerable groups in the community
- Identify how health is distributed



Script: One first step is to improve data collection, systems, and accessibility. The board of health and its public health partners first need to be aware of and understand which groups in the community are the most vulnerable. In the previous module, you learned about data sources that can provide information about the health of your county or state. Those same sources can help the board of health identify how health is distributed within your community.



Script: In reviewing community health data, boards of health can look for differences in the incidence of disease between groups. For example, is one racial group disproportionately burdened by infant mortality than another? What are the patterns of those differences over time? What is the trajectory of health for your community and for specific groups in your population? For example, the graph you see on the screen shows the difference in infant mortality rates based on race. After identifying the groups most at-risk for poor health outcomes, the board of health can work with state and local public health agencies to pinpoint which disparities can be corrected using available resources and which may be resolved over time. This information may be outlined in existing community health assessment and health improvement action plans

2nd Step: Strengthen Capacity to Improve Inequities

- Form cross-sector partnerships
- Make funding decisions to support programs addressing health equity

Script: A second step to addressing health equity is to strengthen government and community capacity and partnerships to improve racial, ethnic, and other health inequities. Identifying and acting upon causes of health inequity in your community will require efforts beyond your board of health and health department. Reaching your community's health equity goals means partnerships and collaborations with other public health and non-public health agencies, public and private stakeholders, and consumers. This also relates to the governance function of resource stewardship, as funding decisions may be made to support the capacity of these partners to work toward shared goals.

3rd Step: Implement Evidence-Based Community Interventions

Work with health department to:

- Select proven strategies
- Make the best possible use of resources

Script: A third step is to implement evidence-based community interventions. The board of health is accountable for working with the health department to select and invest in strategies that have been proven to be effective. Evidence-based public health practice ensures we make the best possible use of resources on interventions that work to improve outcomes, whether the resources are time, people, or funding. Resources must also be provided to further evaluate the effectiveness of programs.

Additional Resources:

- World Health Organization Commission on Social Determinants of Health
- Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health
- Tackling Health Inequities through Public Health Practice: A Handbook for Action
- The Community Toolbox

Script: There are many useful resources for model practices such as those from the World Health Organization, the Centers for Disease Control and Prevention, the National Association of County & City Health Officials, and the University of Kansas. These and other suggestions can be found in the resources section of this course

4th Step: Ensure Equitable Access to Quality Care



Script: A fourth step is to ensure equitable access to quality healthcare in your community. Universal access to health insurance coverage is a critical requirement for health equity. However, insurance coverage does not ensure optimal healthcare. Other supportive measures include development of a culturally competent, diverse workforce to support a racially and ethnically diverse patient population. It is also important that the board of health supports its health department in assessing and assuring access to comprehensive services in the community beyond medical care. Boards of health can support linkages between partnering organizations to reduce the fragmentation or redundancy of resources and services offered in a community as well as to address gaps in service delivery and access to care.

5th Step: Strengthen Community Engagement and Capacity

- Solicit community input
- Share information broadly

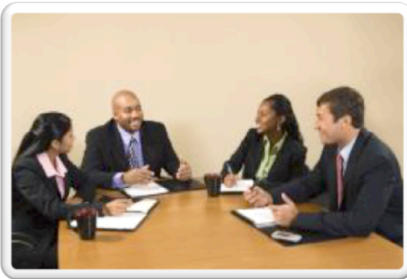


Script: A fifth action step for health equity is to strengthen community engagement and capacity. Boards of health have the ability to make space for the community in decision-making through activities such as time for public comment at board meetings. Other ways to solicit community input are through town hall meetings or surveys to ensure that the work of the health department and the board is in line with community interests. As allowed by your board's structure, recruiting diverse board members from across sectors will also bring new and important perspectives to the table. Lastly, boards of health can also support the health department in broadly sharing information using multiple methods of communication that will reach the population regardless of a person's access to technology. In these ways, the board of health can support equity by encouraging inclusion in setting public health priorities. By providing your community with the necessary resources and opportunities for their voices to be heard, you enable your community to create change.

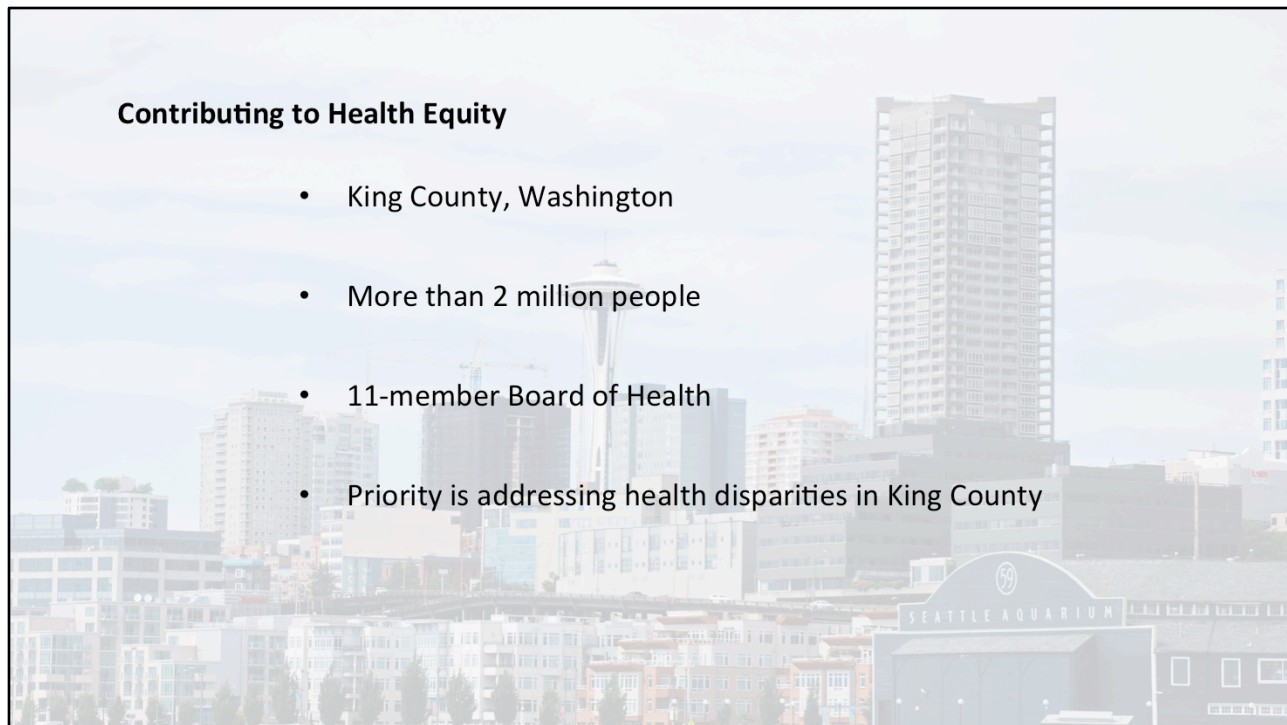
- 
- **1st Step:** Improve data collection, systems, and accessibility
 - **2nd Step:** Strengthen capacity and partnerships to improve racial and ethnic health inequities
 - **3rd Step:** Implement evidence-based community interventions
 - **4th Step:** Ensure equitable access to quality healthcare
 - **5th Step:** Strengthen community engagement and capacity

Script: The five steps for building health equity you see on the screen summarize the strategies we just explored. These were based on recommendations from the Michigan Department of Community Health's 2010 *Michigan Health Equity Roadmap*.

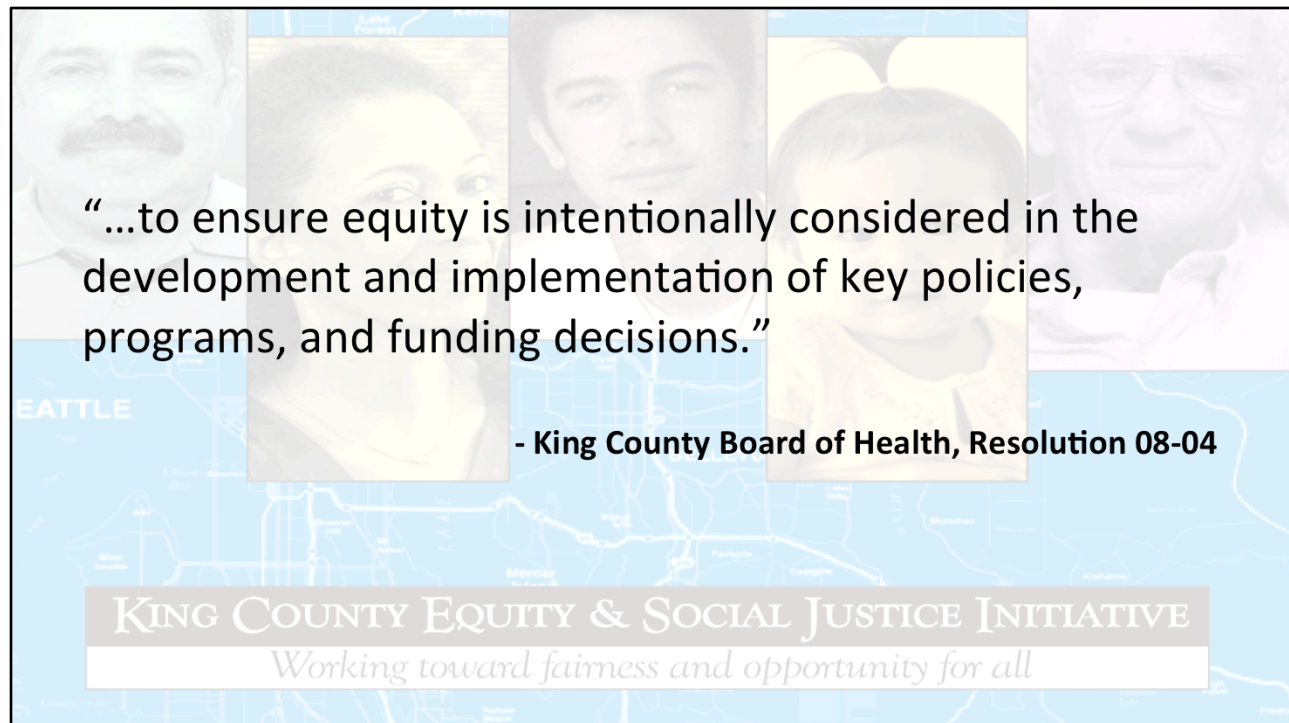
Effective Board of Health Example



Script: Now that we have explored all of the module objectives, let's look at an example of what an effective board of health can do to work towards health equity in its community. The following example is just one of many possible examples from various settings across the country of a board of health success.



Script: King County, where Seattle is located, is the most populated county in Washington with more than 2 million people. The King County Board of Health is an 11-member board responsible for setting county-wide public health policy and enacting and enforcing local public health regulations. Since 2006, the King County Board of Health has made addressing health disparities in the county a priority and a focus of its work, as evidenced by several resolutions passed by the board.



Script: For example, beginning in 2006, the board of health was briefed by the health department, Public Health - Seattle & King County, on health disparities present in the population and existing and potential efforts to address them. When King County launched the Equity and Social Justice Initiative, the board passed Resolution 08-04 effective April 23, 2008, supporting the interdisciplinary initiative. In the resolution, the board of health asked the department to prepare a decision-making tool for the board to review that could be used, "...to ensure equity is intentionally considered in the development and implementation of key policies, programs and funding decisions."

Contributing to Health Equity

Resolution 10-08

- Healthy Eating and Active Living Subcommittee findings
- Address leading causes of preventable death and illness
- Land use and transportation planning



Script: Another example, from September 17, 2010, is the King County Board of Health’s passing Resolution 10-08. This resolution approved and adopted a set of nine guidelines established by the board’s Healthy Eating and Active Living Subcommittee to address leading causes of preventable death and illness (or in other words, the social determinants of health) with a focus on factors related to land use and transportation. For example, one guideline is that “residents in all communities in King County are protected from exposure to harmful environmental agents and infectious diseases.” The guidelines also includes key strategies to support them, such as management of standing water to prevent transmission of infectious disease, in this case.



Contributing to Health Equity

- King County Equity & Social Justice Initiative
- 2010 Board of Health Guidelines: Planning for Healthy Communities

Script: By passing the two resolutions discussed here and several others like them, the King County Board of Health continues to contribute to health equity in its community. While King County is a large setting, boards of health in small, rural areas will find there are similar steps they can take to address the social determinants of health in their specific communities. Please see the supplemental information for this module for suggested resources.

Contributing to Health Equity

- Define the concept of health equity
- Describe the social determinants of health
- Identify strategies for addressing causes of health inequity

Script: You have now completed this module, Contributing to Health Equity. We explored the concept of health equity as it relates to the governance function of continuous improvement. We learned about the social determinants of health, and identified strategies to begin to address health disparities. Please continue on to the next video in the series.

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 - Phyllis Meadows, PhD, MSN, RN, University of Michigan School of Public Health

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This Course is in Memory of Marie Fallon

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