

# **social determinants of health | of equity**

**Camara Phyllis Jones, MD, MPH, PhD**

**Plenary Address**

**Second Annual Lung Cancer Conference**

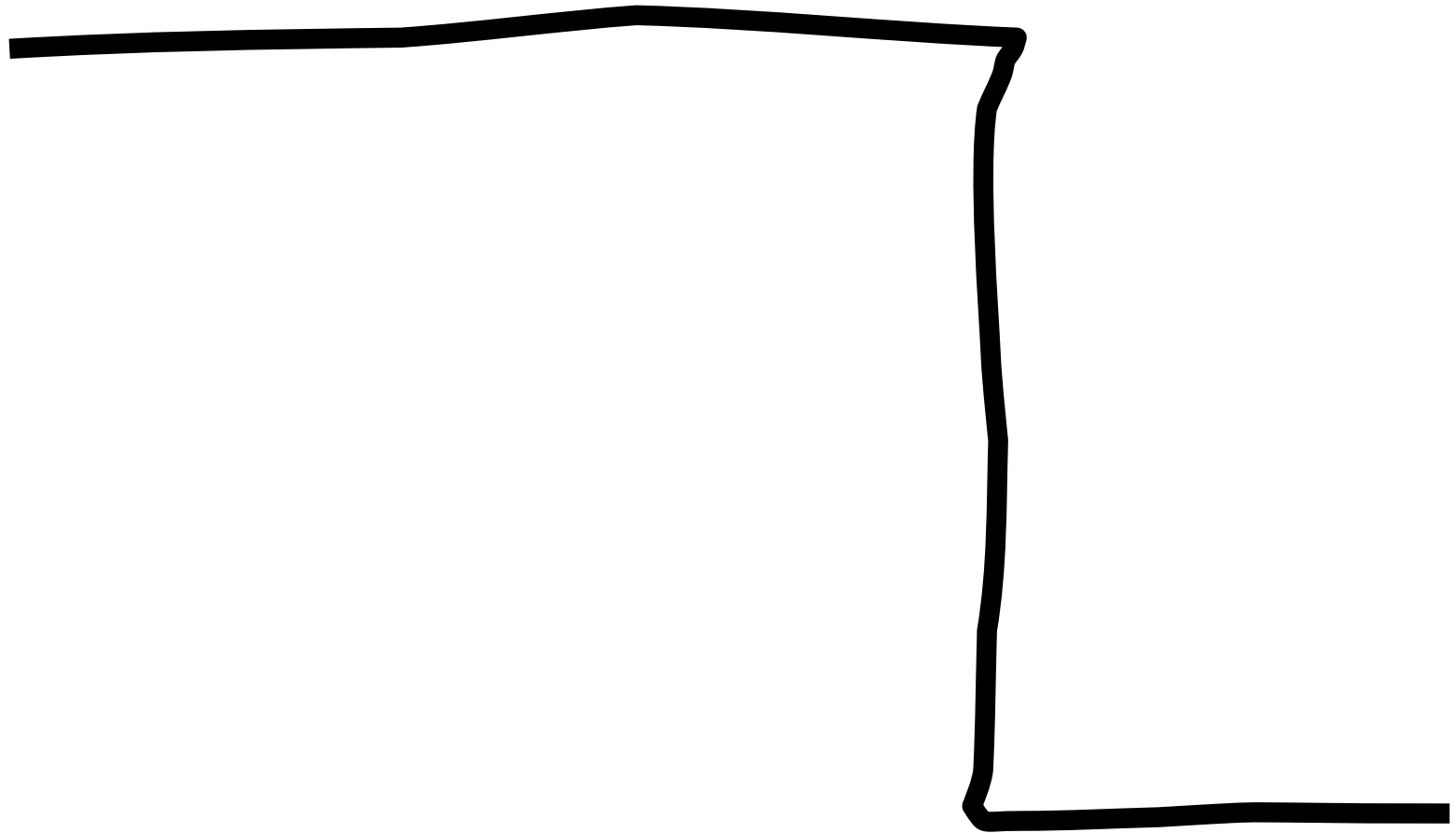
Mountains of Hope

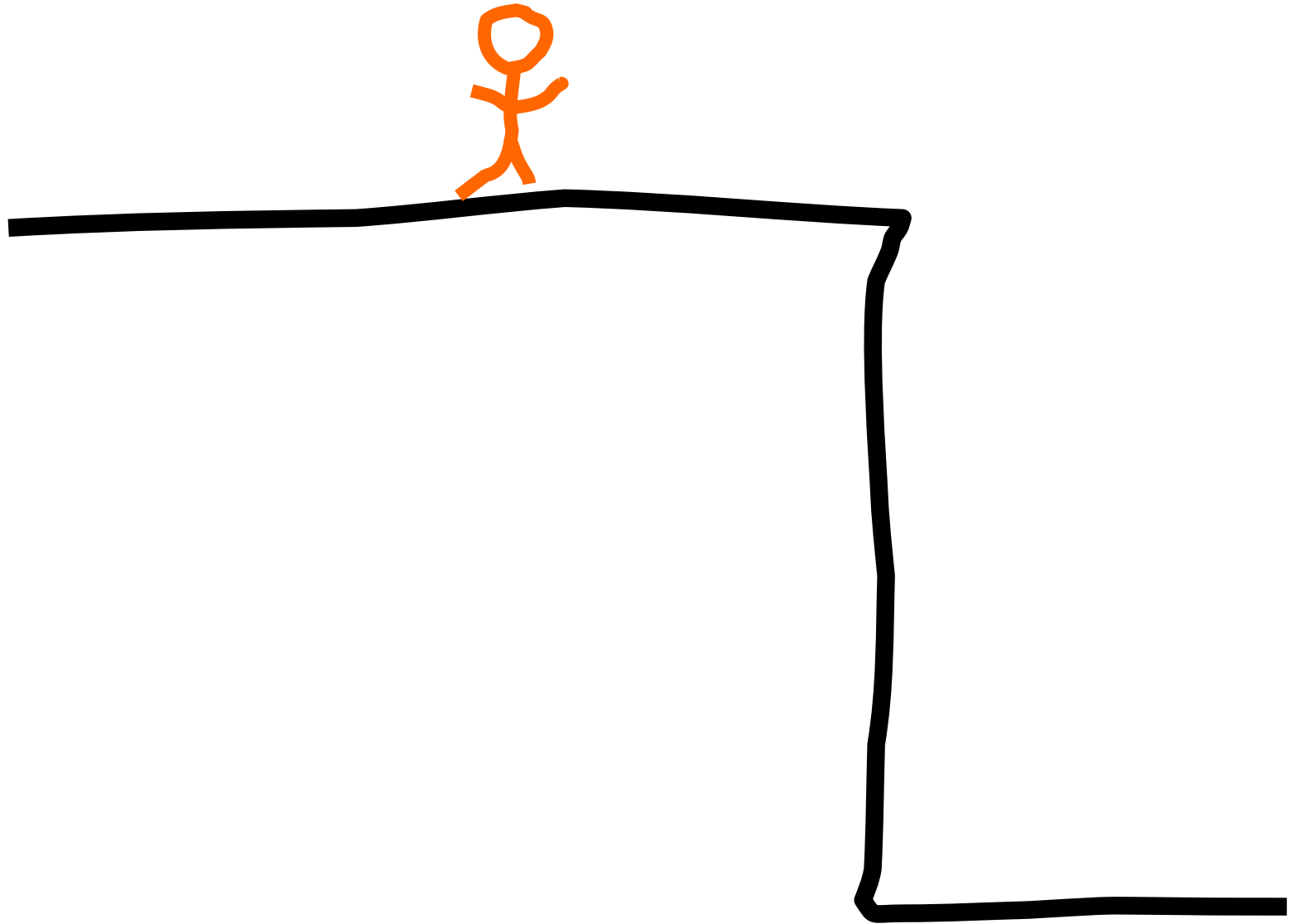
West Virginia Cancer Coalition

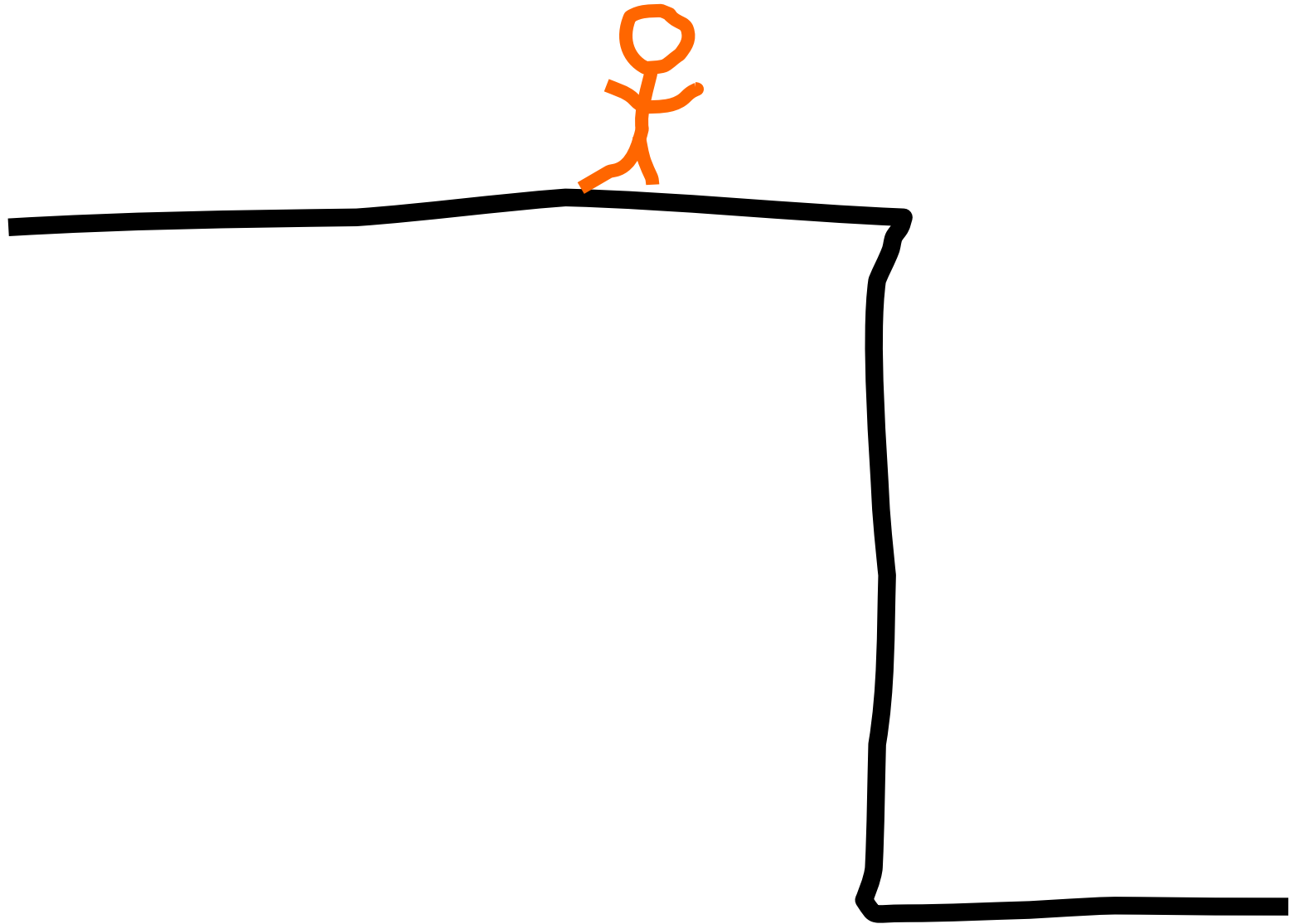
*Morgantown, West Virginia*

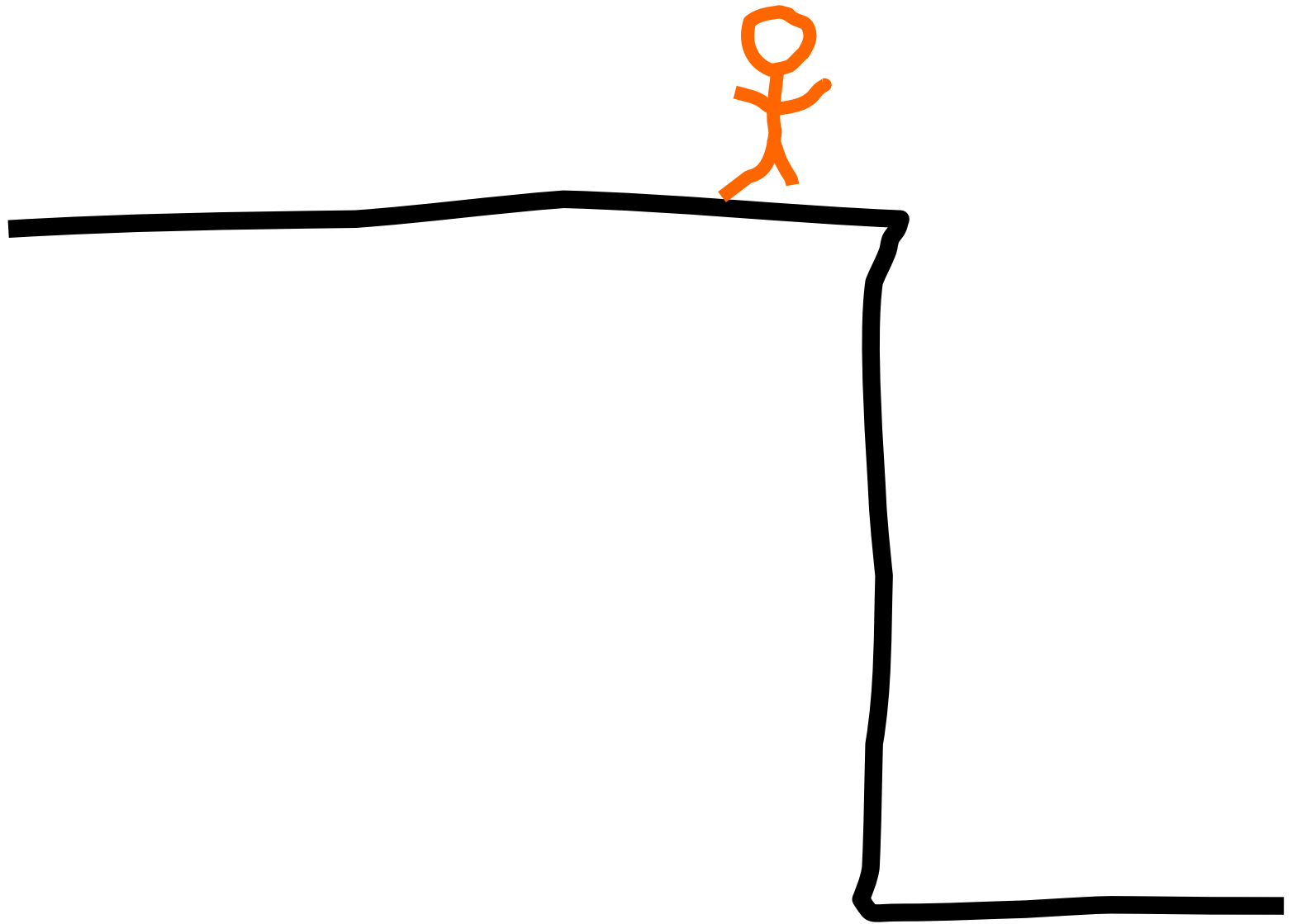
*November 1, 2018*

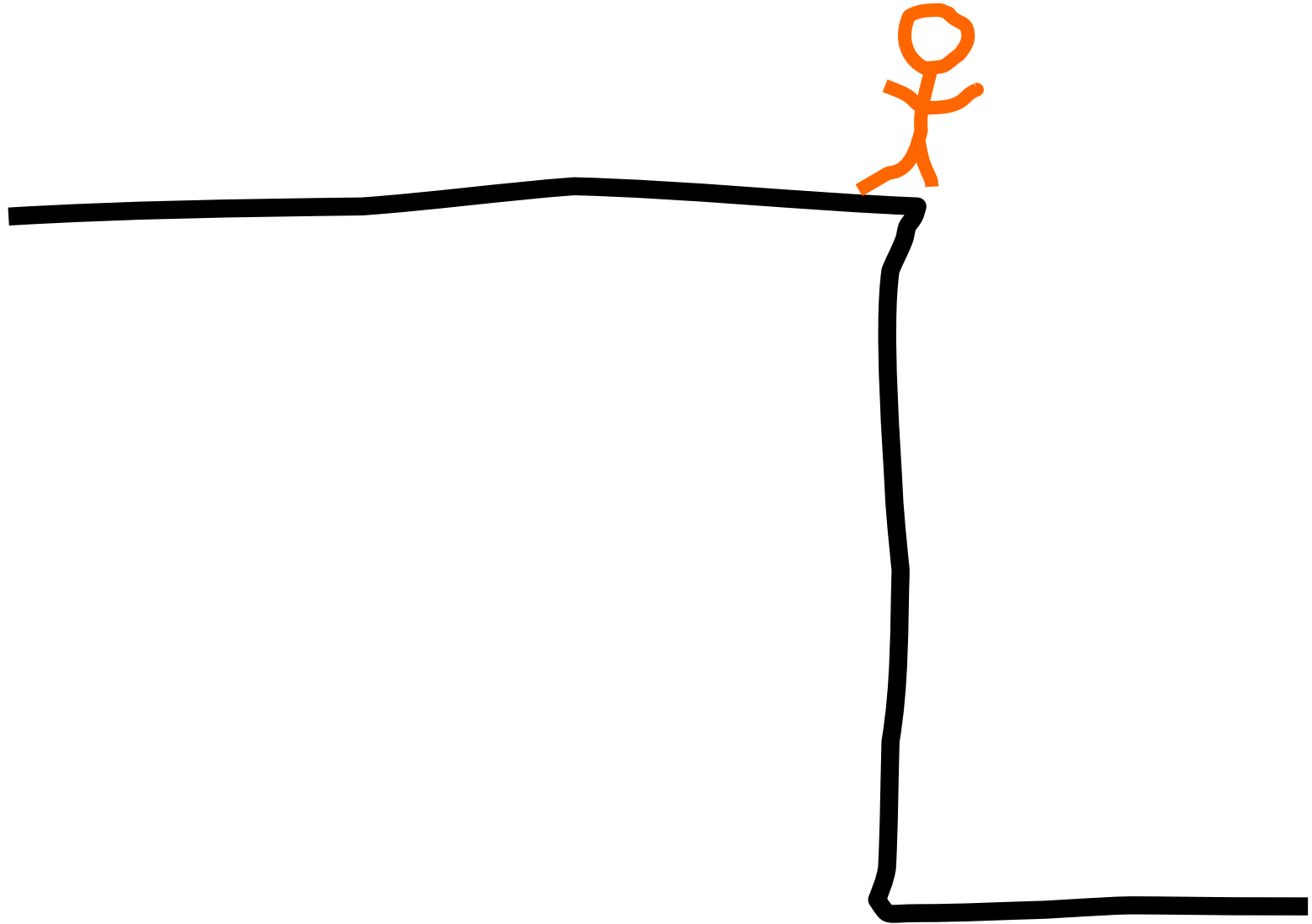
# Levels of health intervention

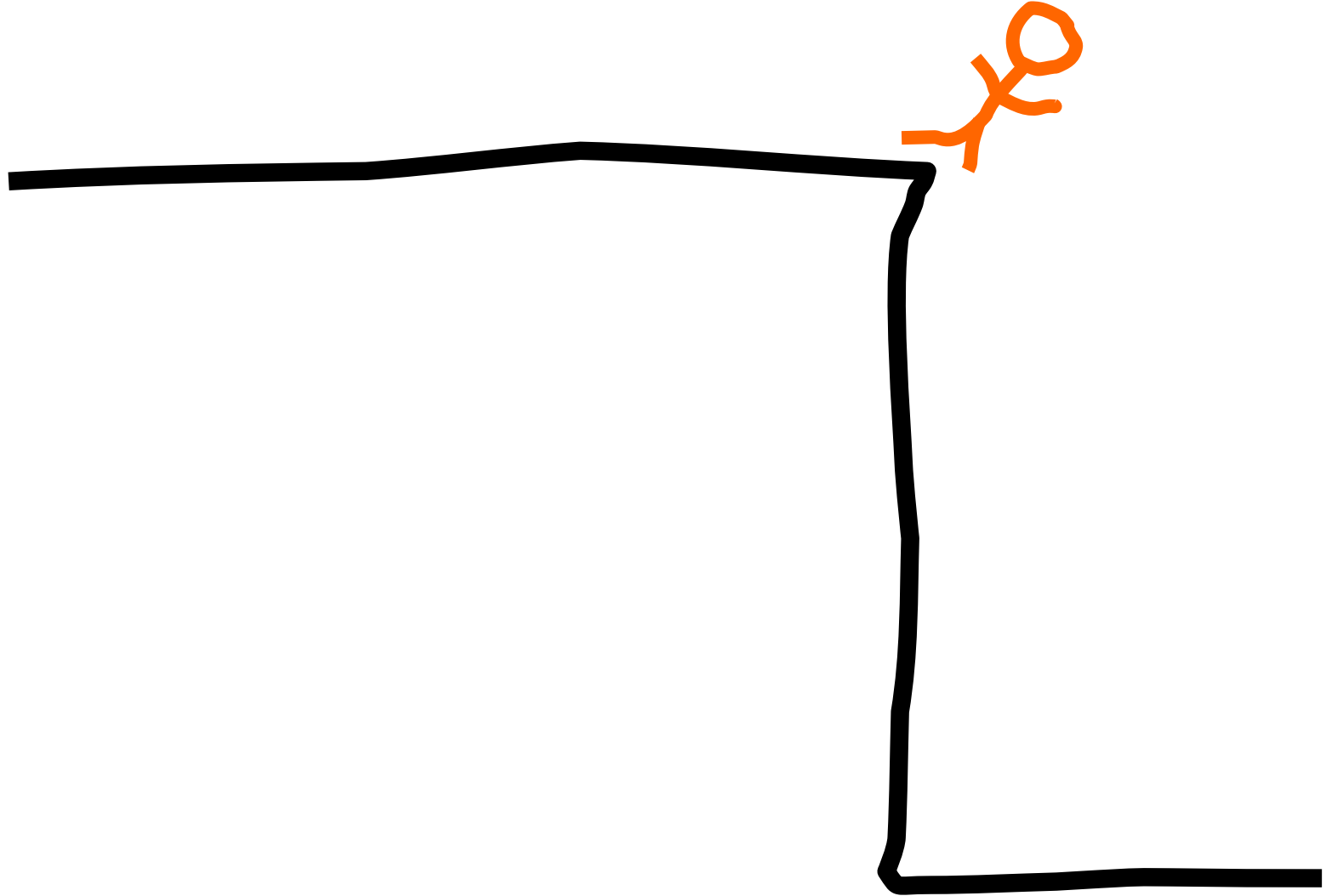


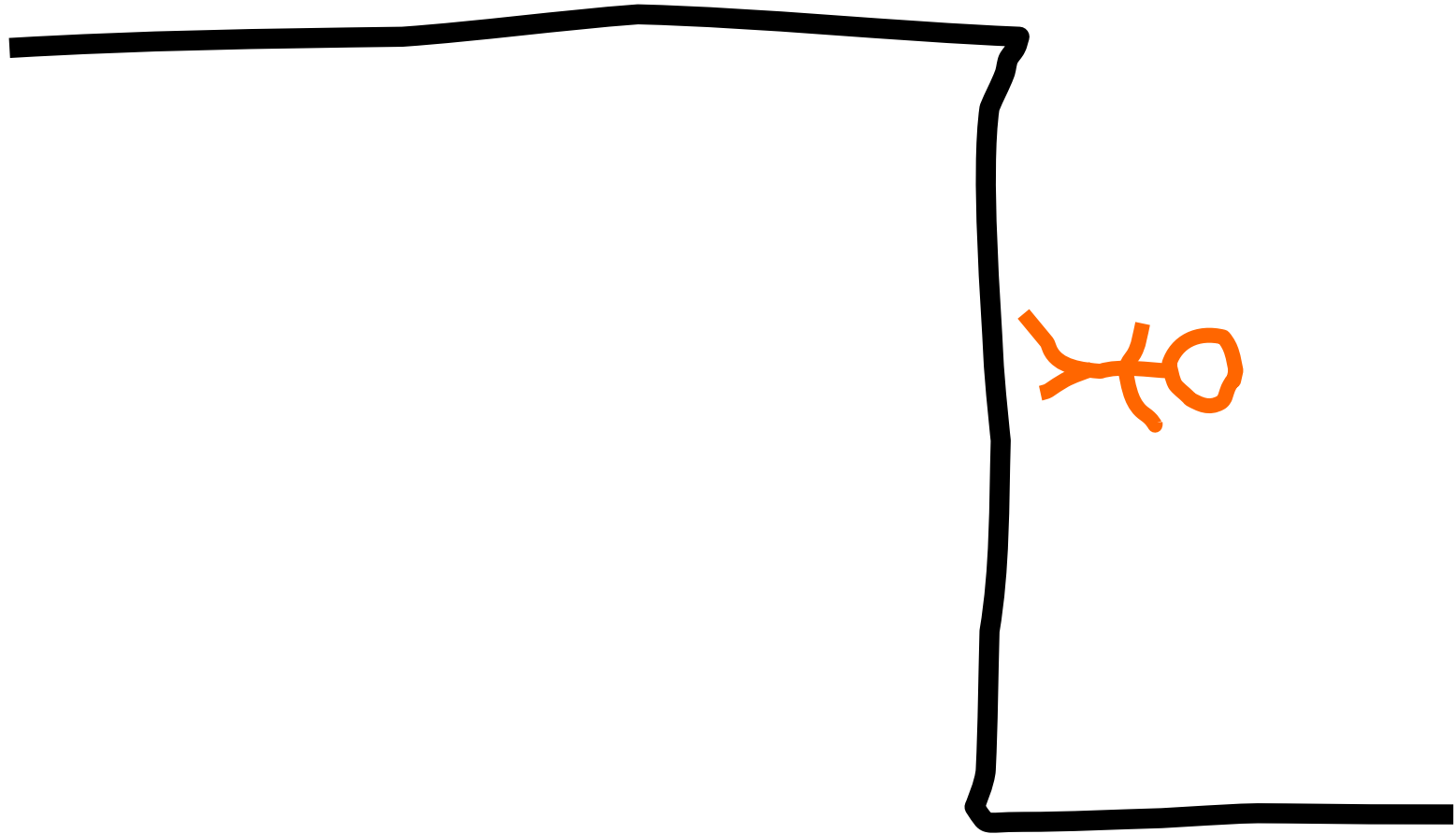




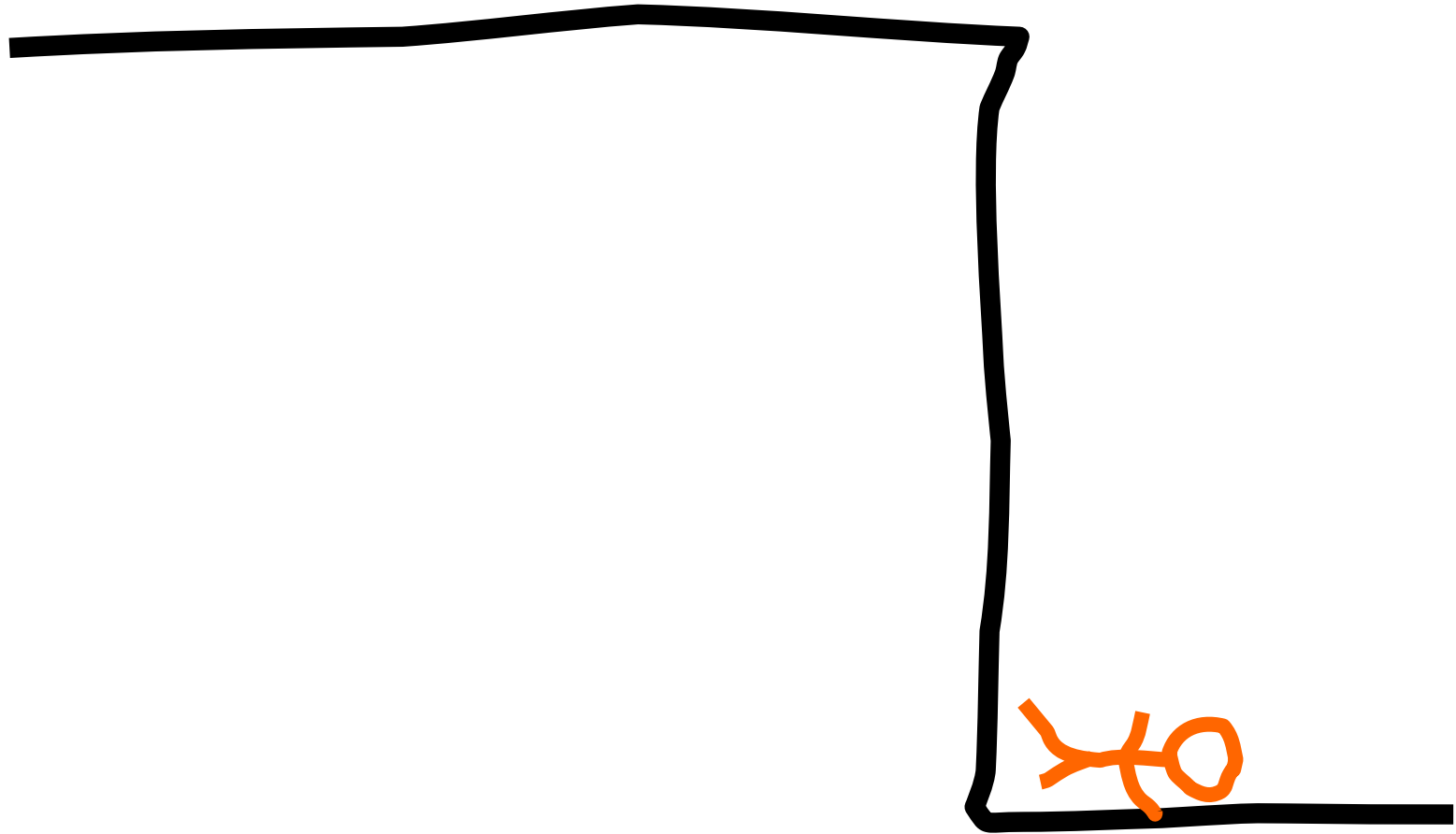


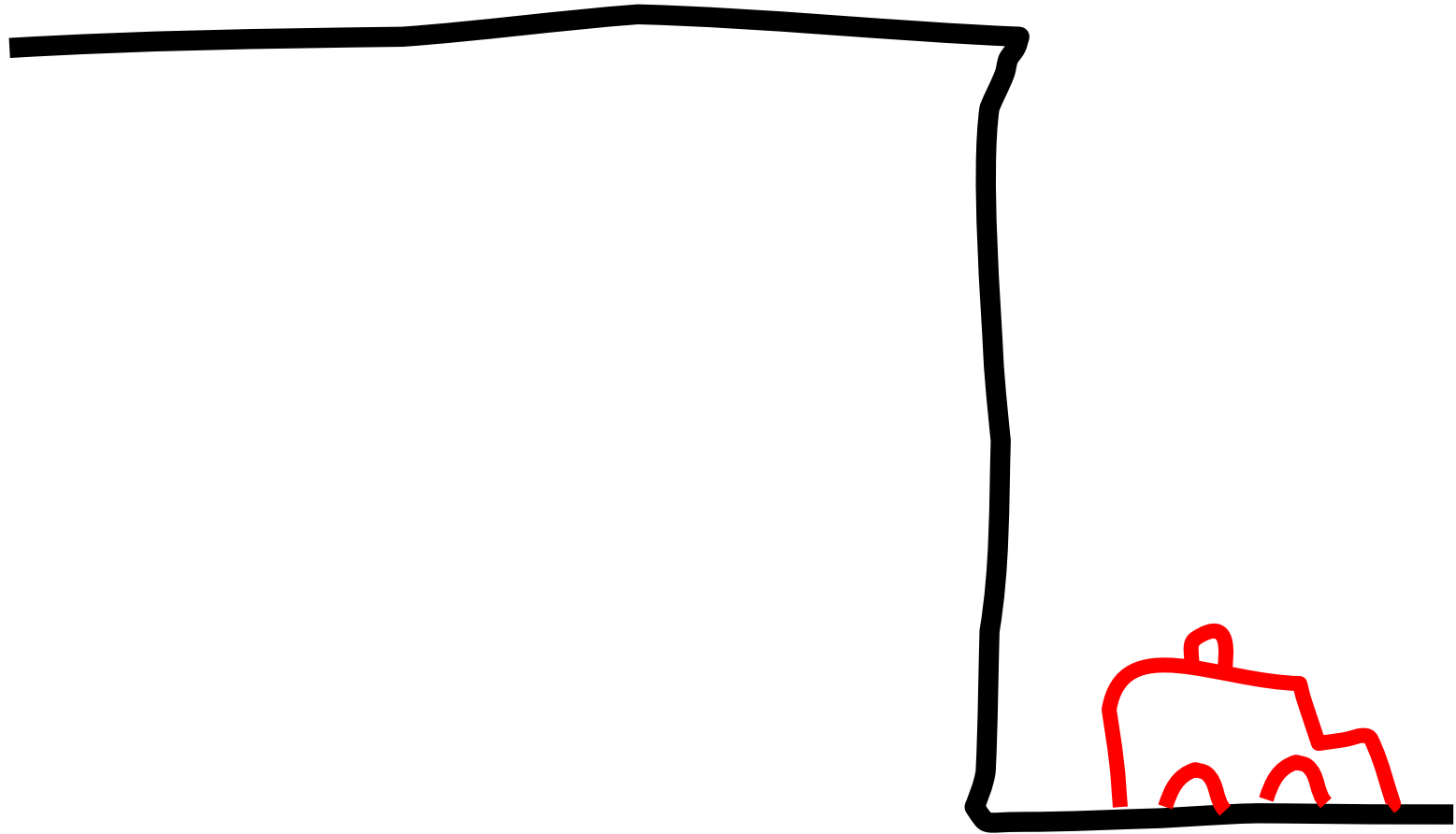


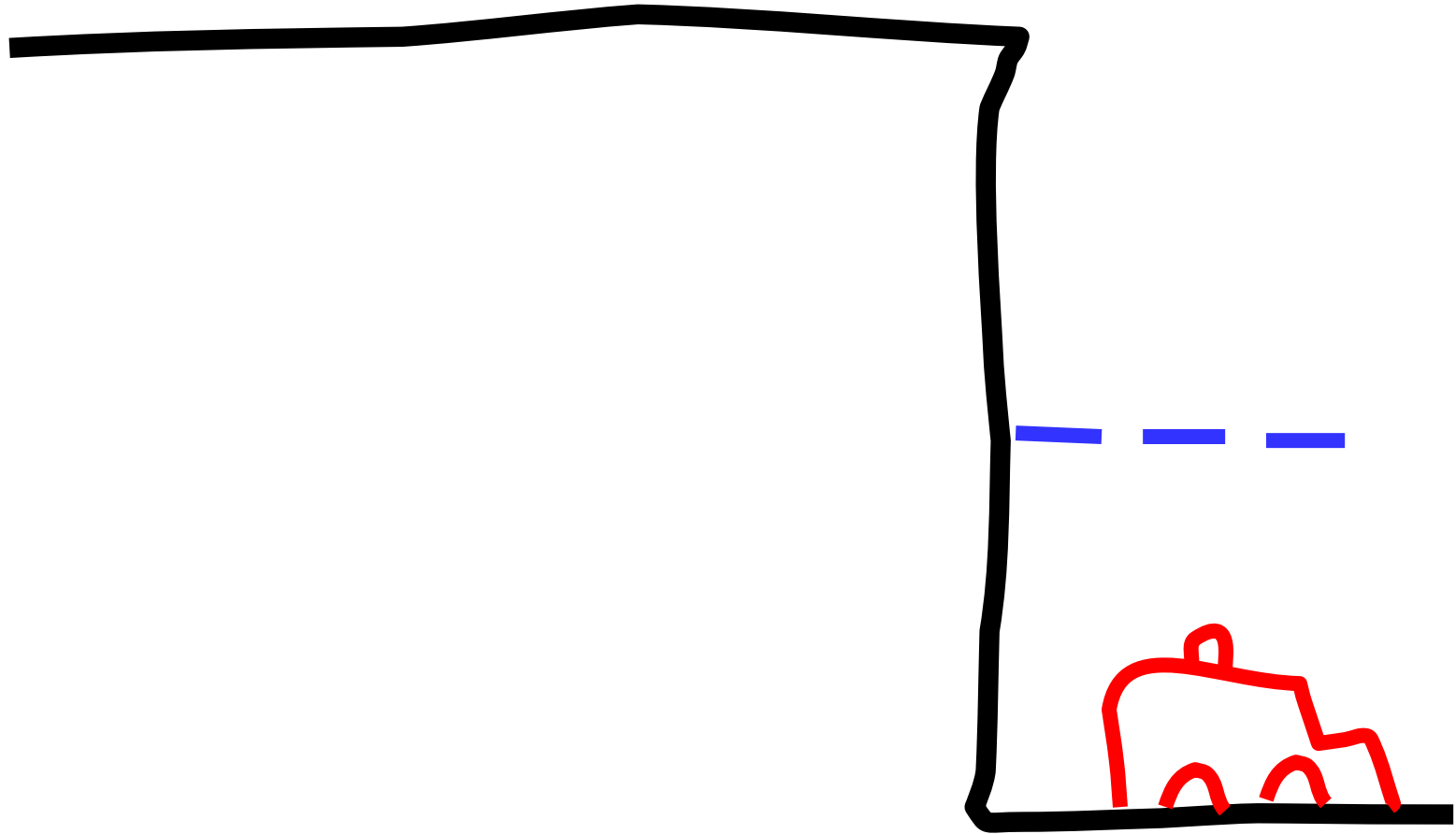


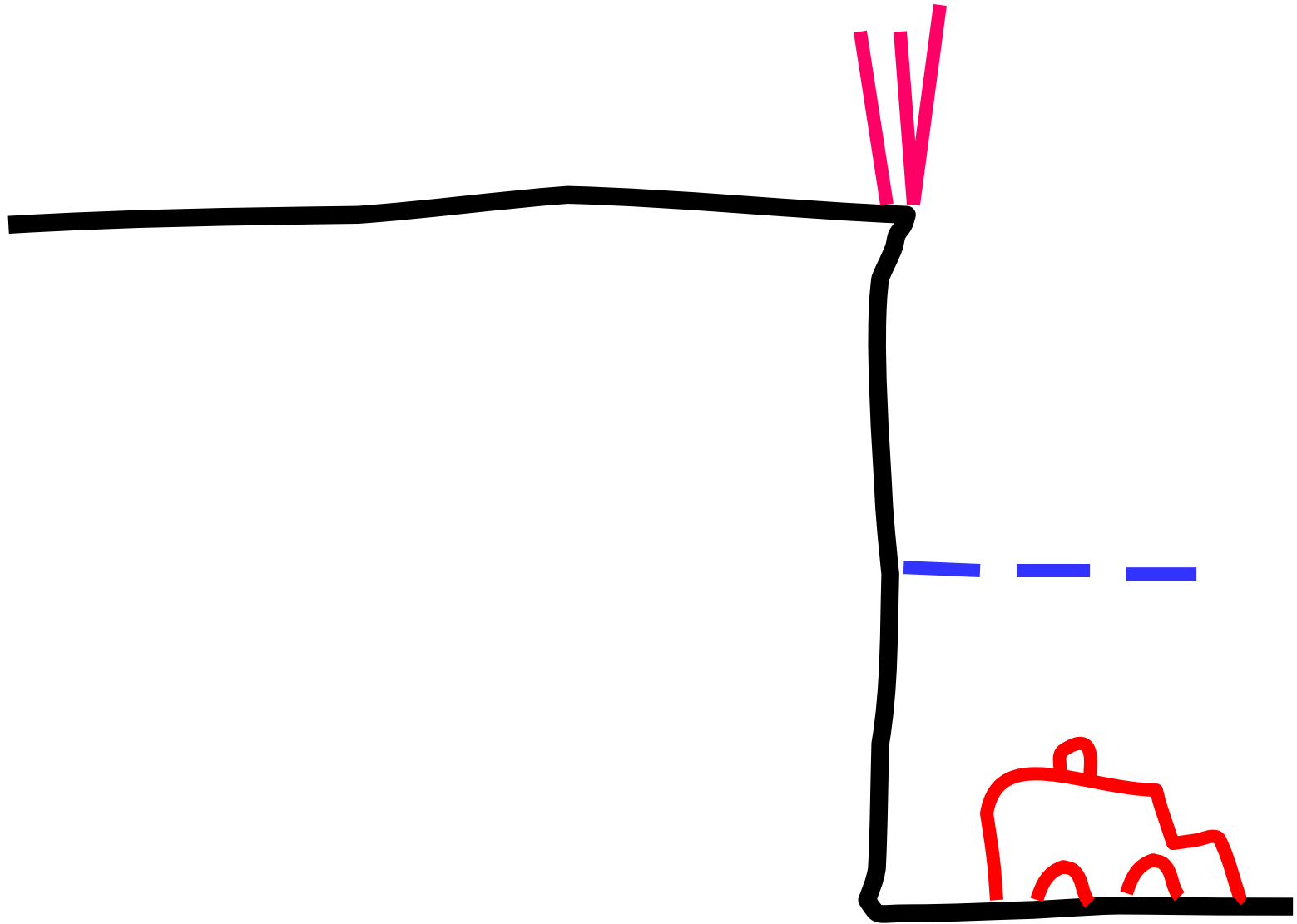


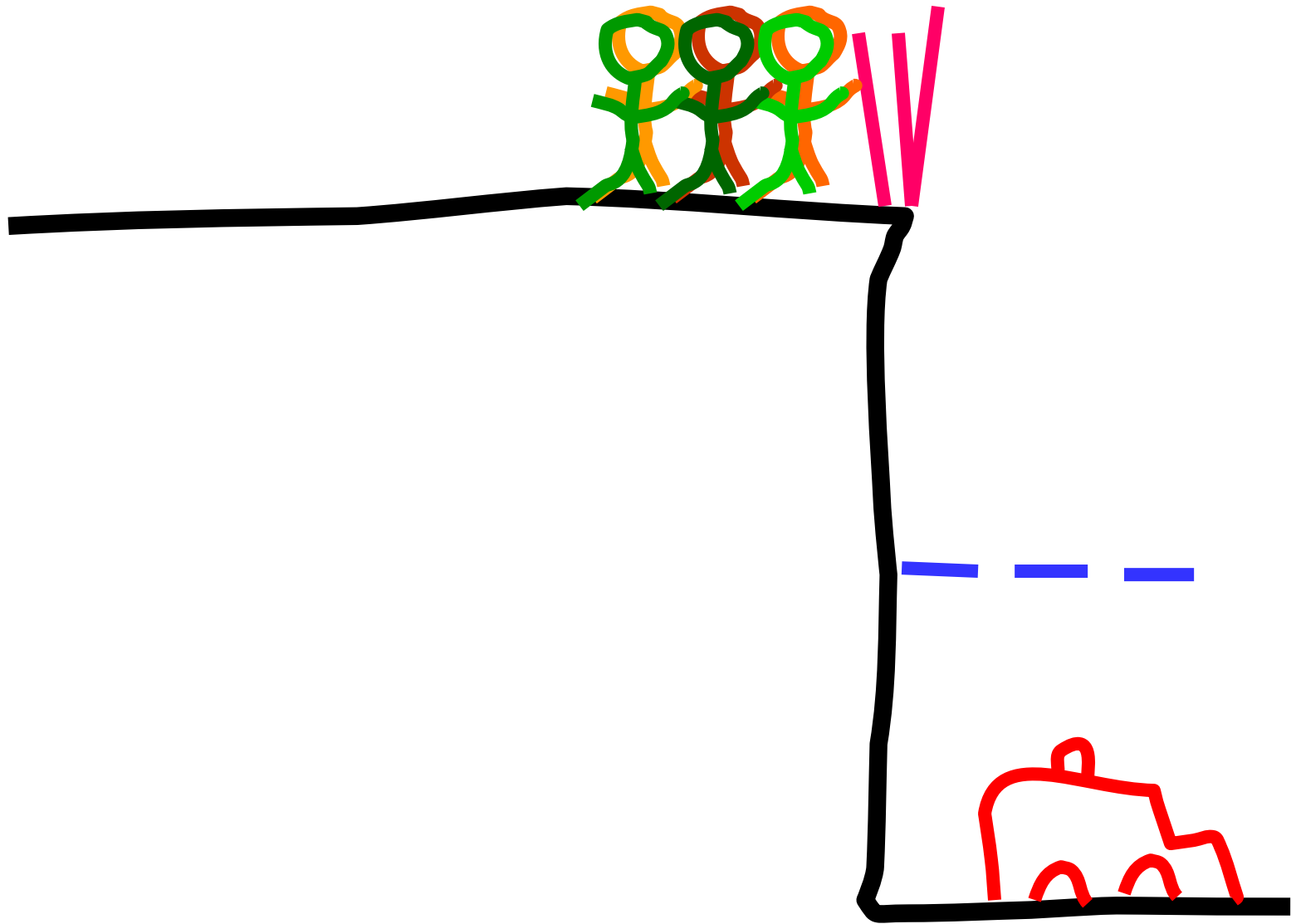


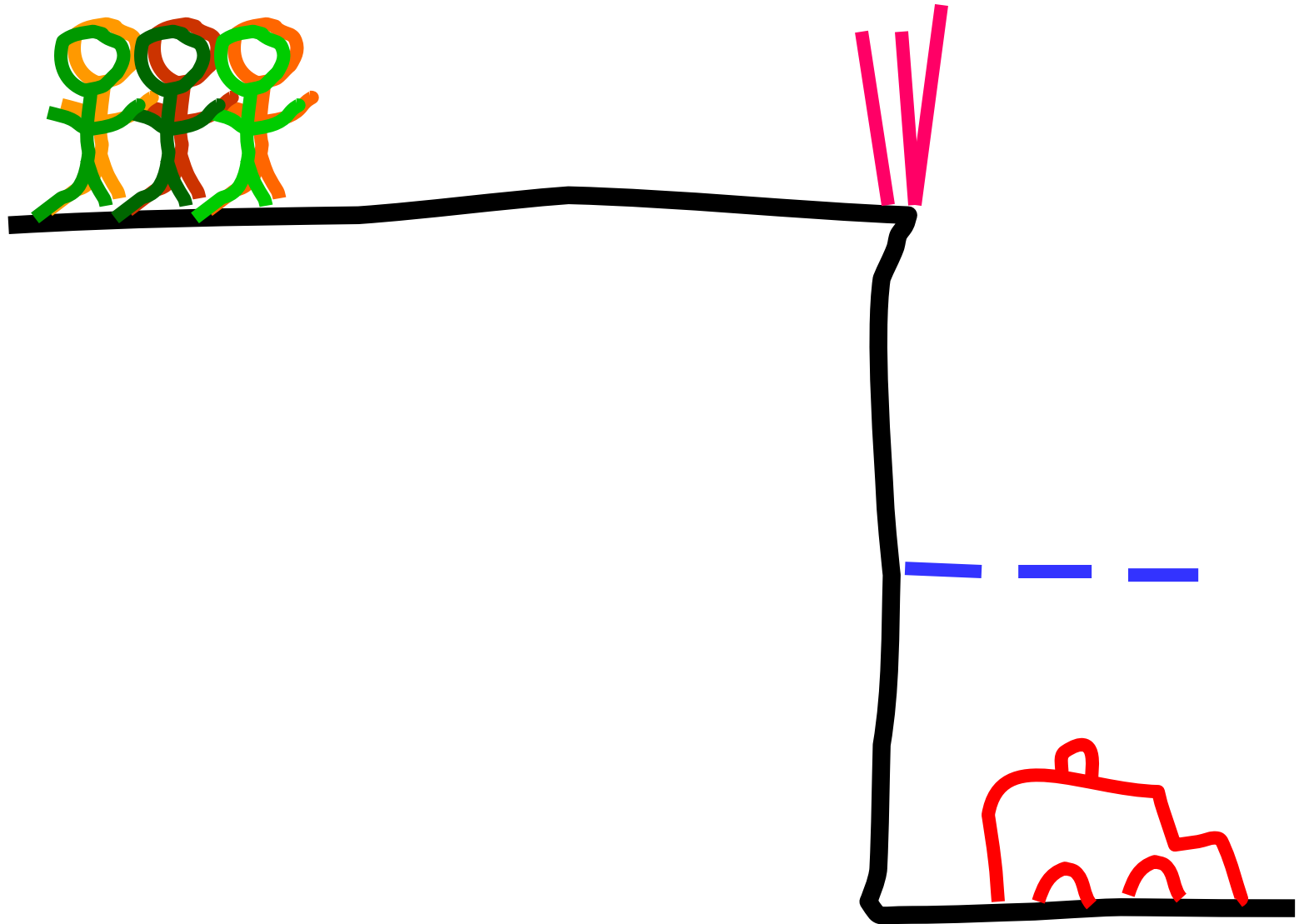


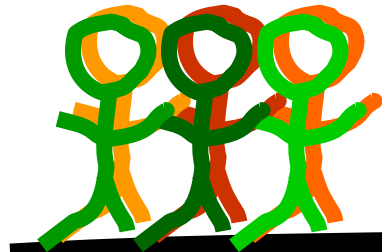












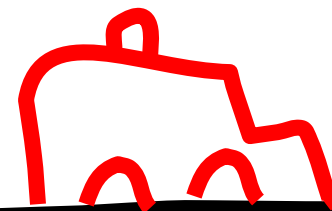
Addressing the  
social determinants of health



Primary prevention



Safety net programs and  
secondary prevention



Acute medical care and  
tertiary prevention

## But how do disparities arise?

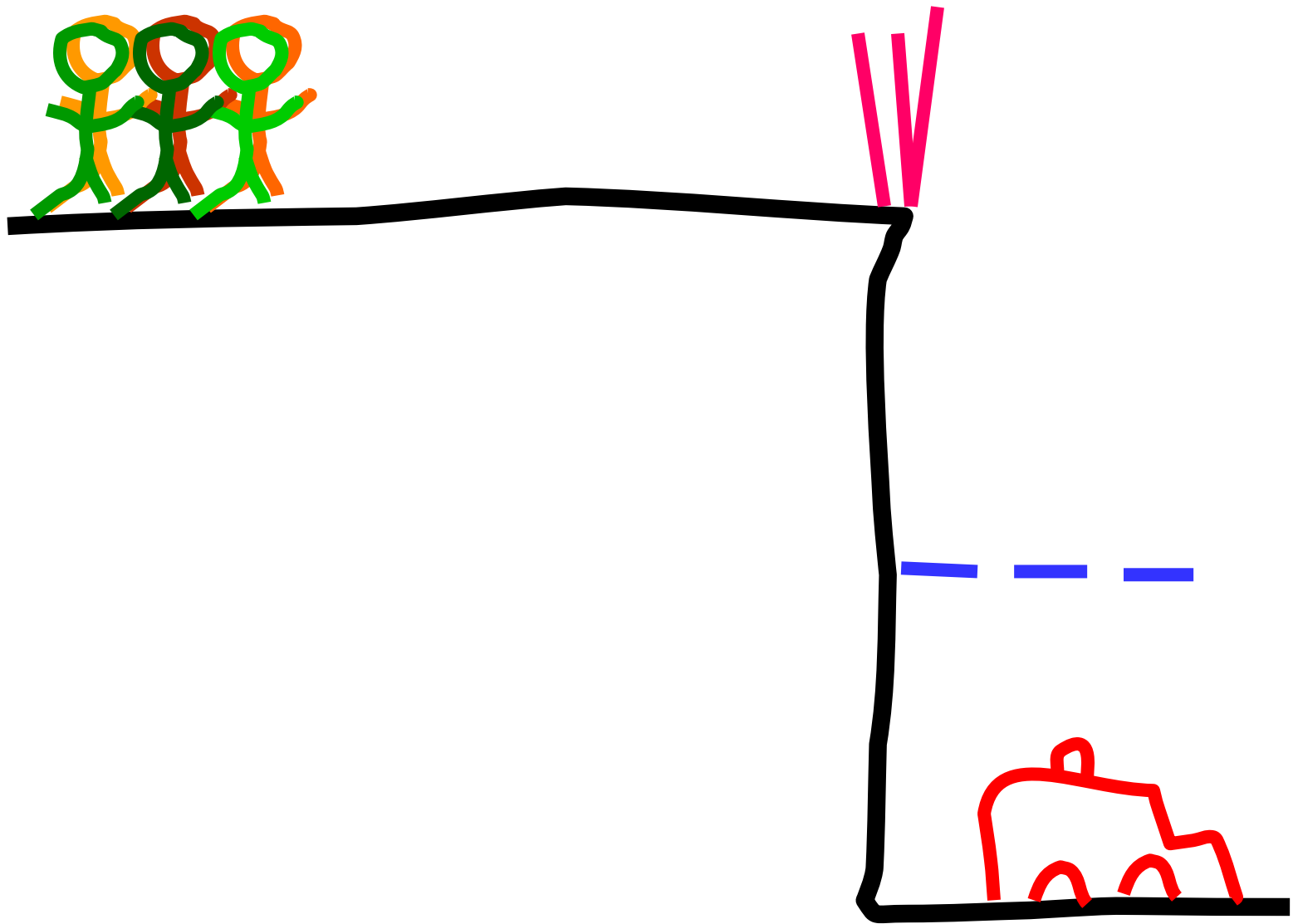
- ❑ Differences in the quality of care received within the health care system
- ❑ Differences in access to health care, including preventive and curative services
- ❑ Differences in life opportunities, exposures, and stresses that result in differences in underlying health status

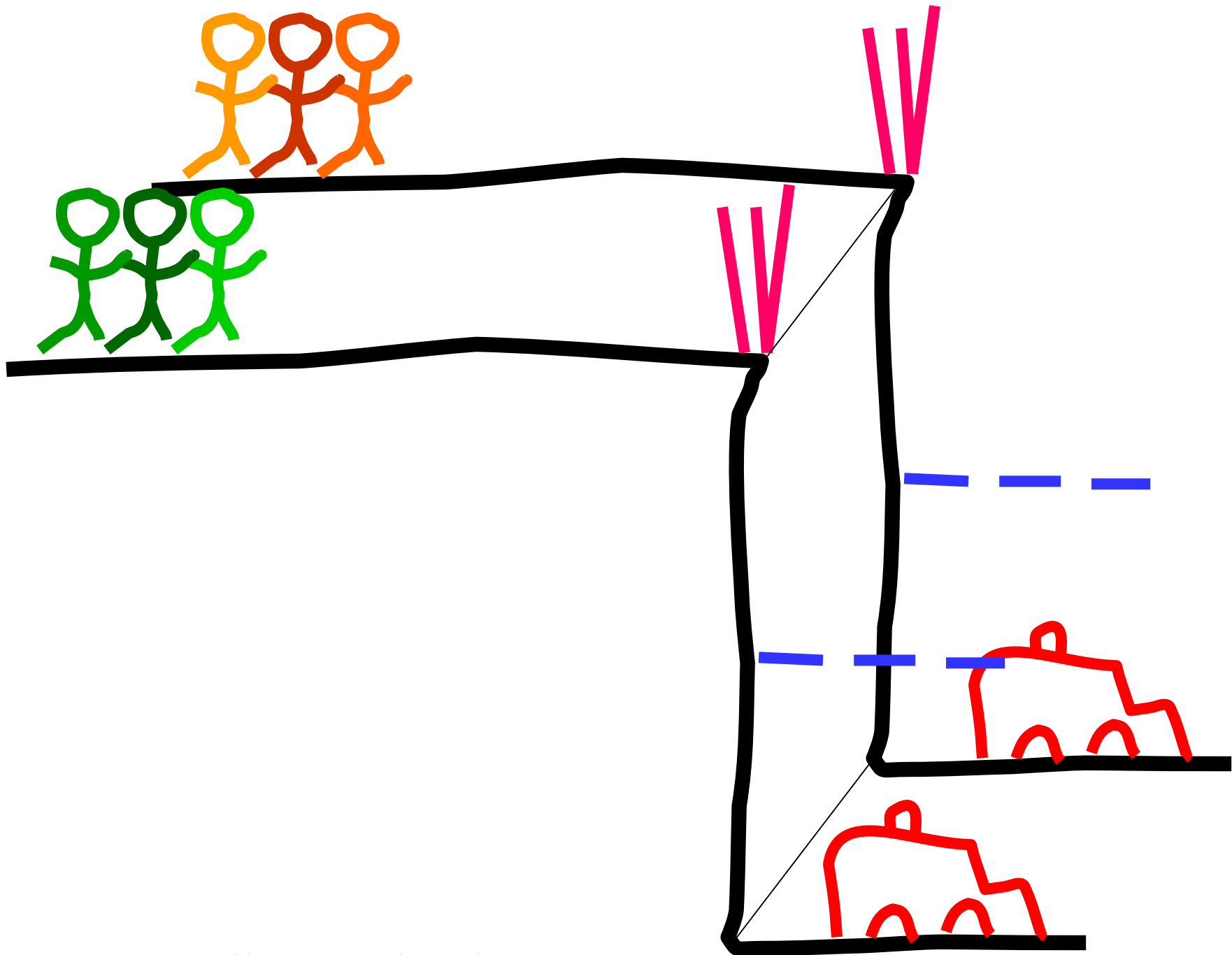
Phelan JC, Link BG, Tehranifar P. Social Conditions as Fundamental Causes of Health Inequalities. *J Health Soc Behav* 2010;51(S):S28-S40.

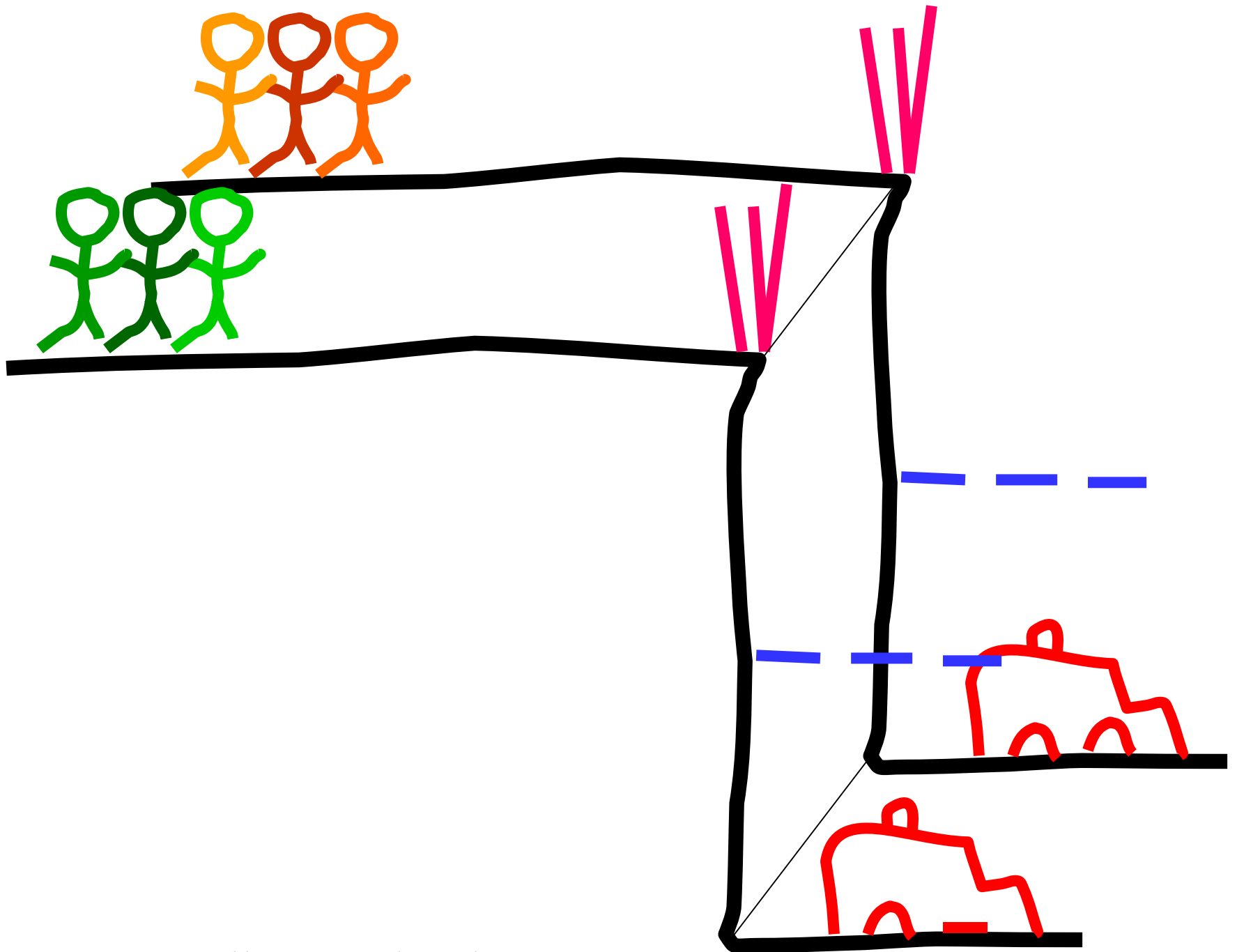
Byrd WM, Clayton LA. *An American Health Dilemma: Race, Medicine, and Health Care in the United States, 1900-2000*. New York, NY: Routledge, 2002.

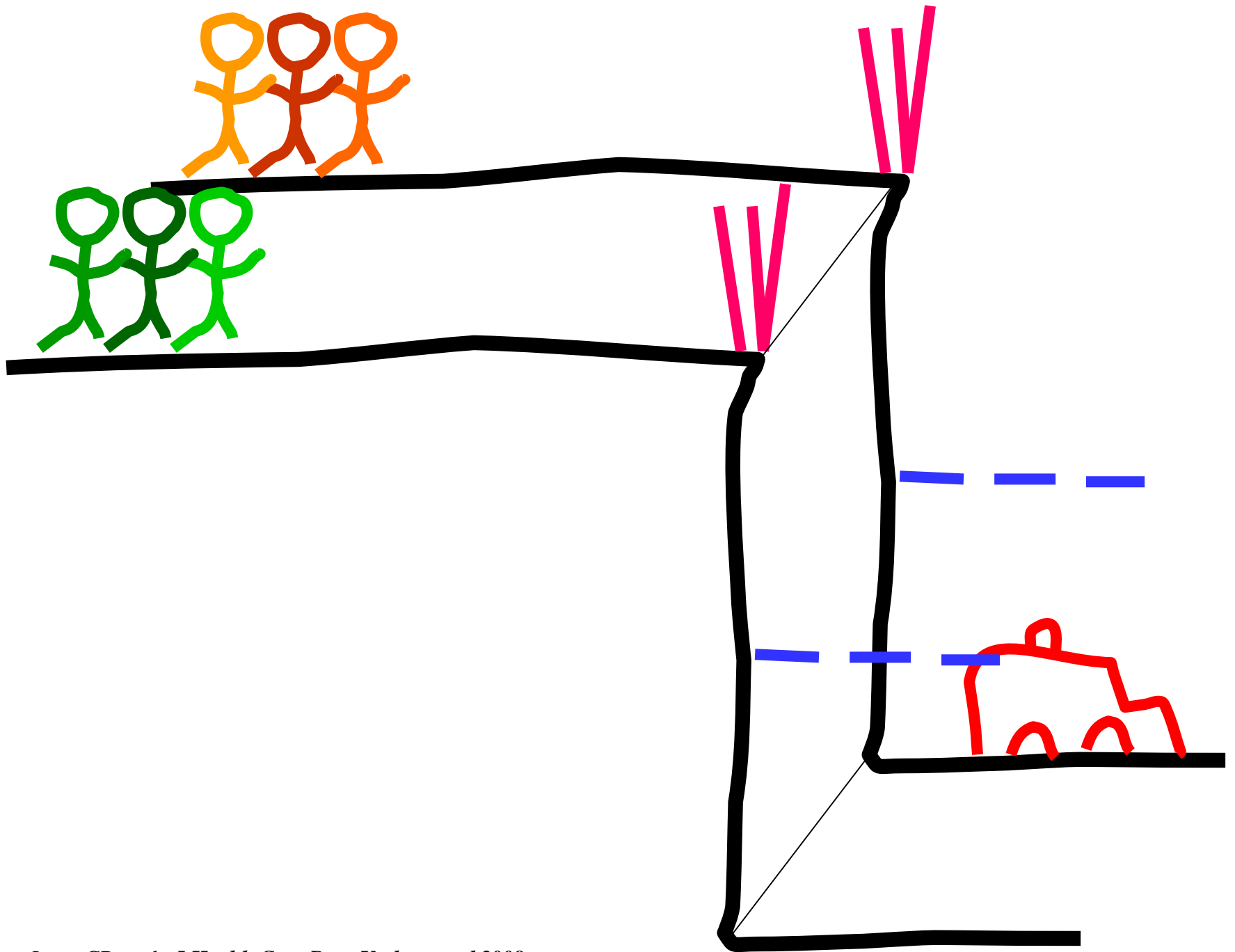
Smedley BD, Stith AY, Nelson AR (editors). *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*. Washington, DC: The National Academies Press, 2002.

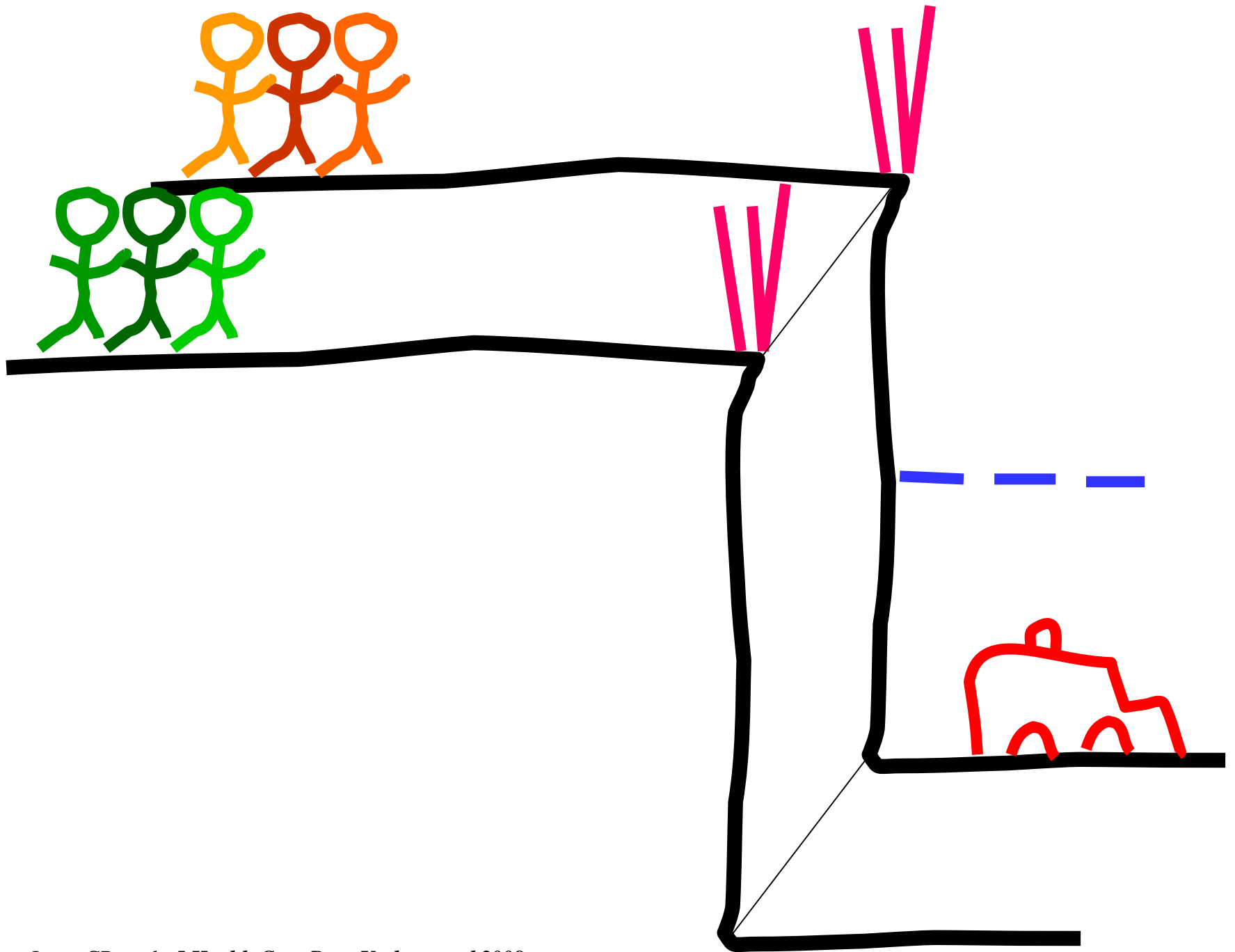


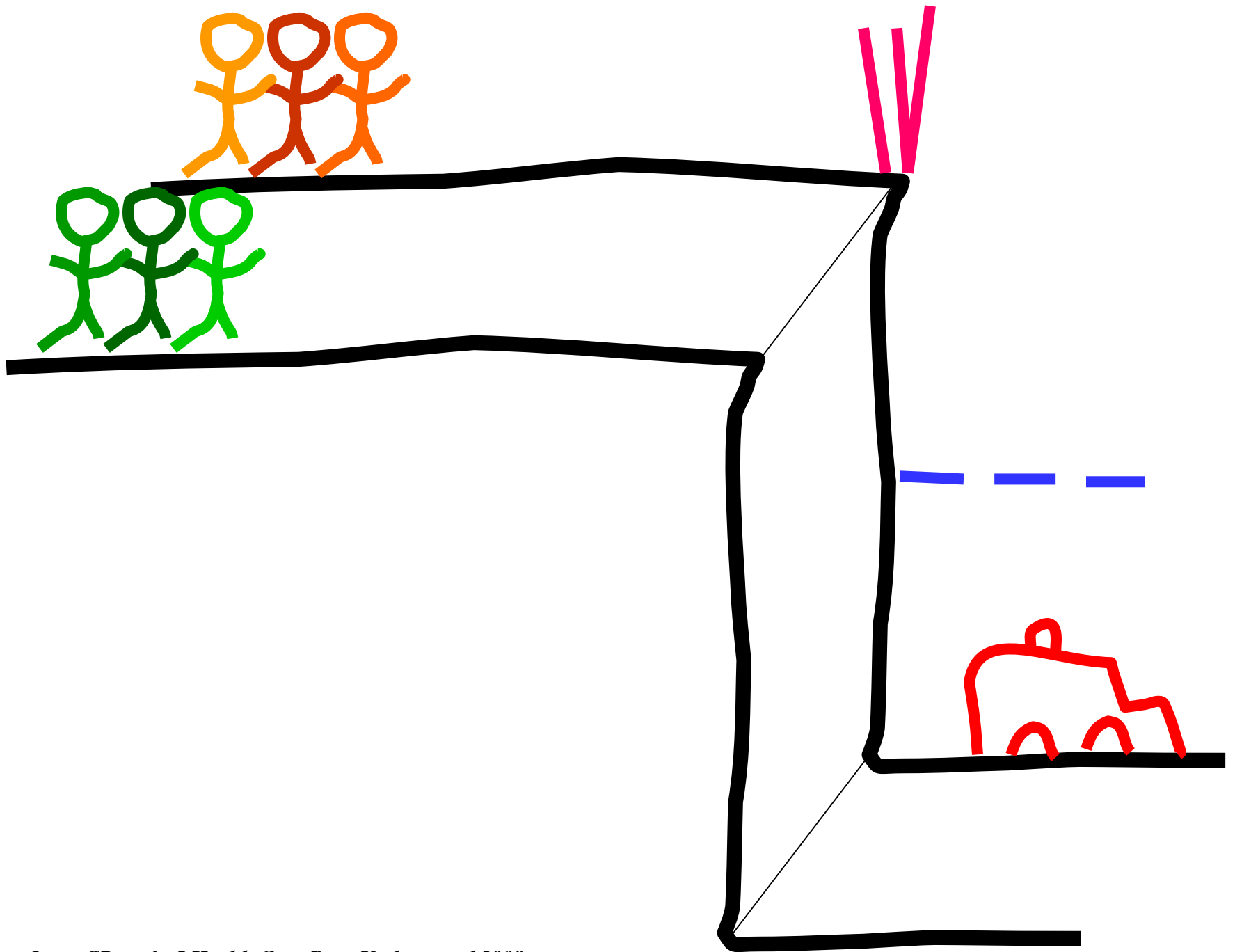


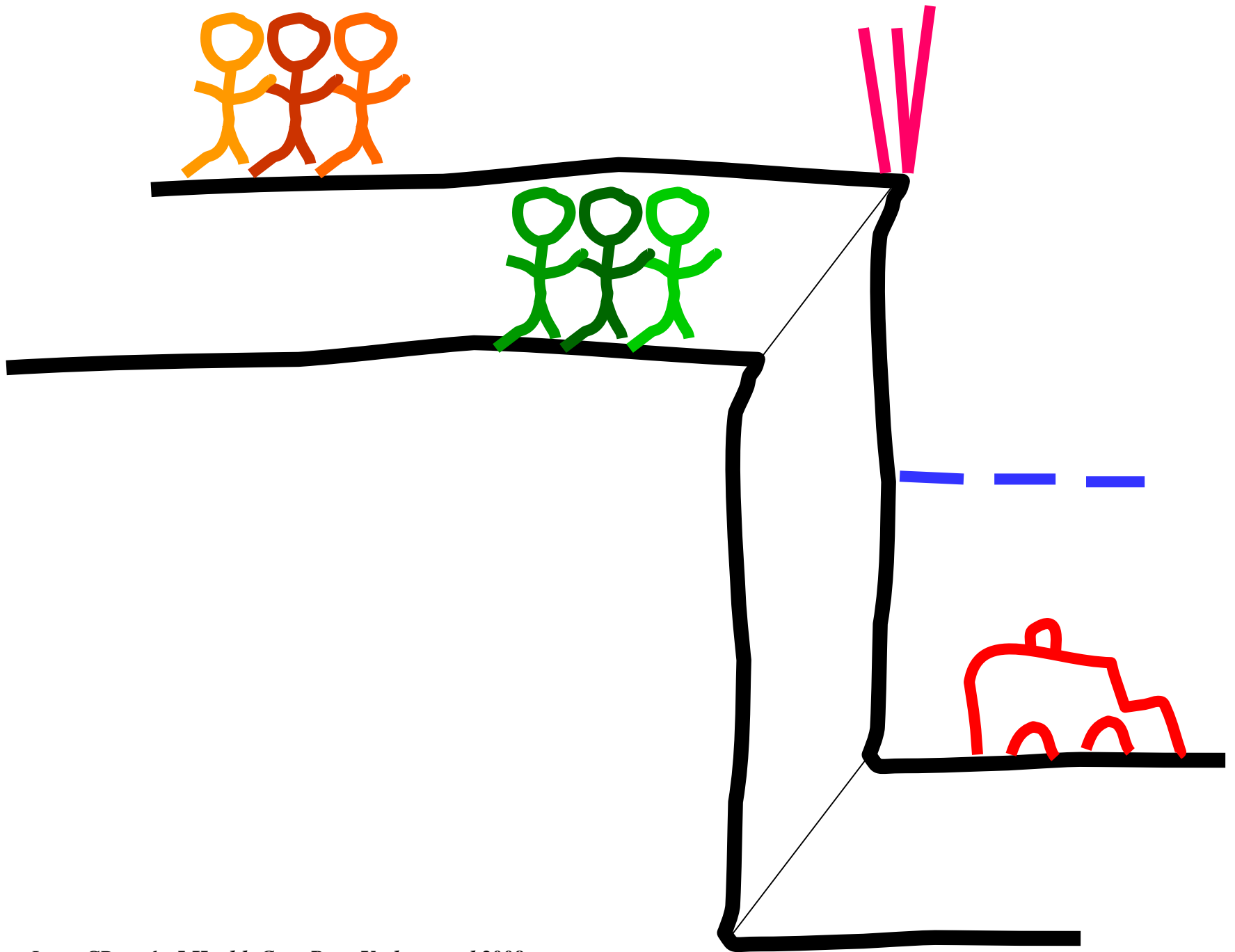


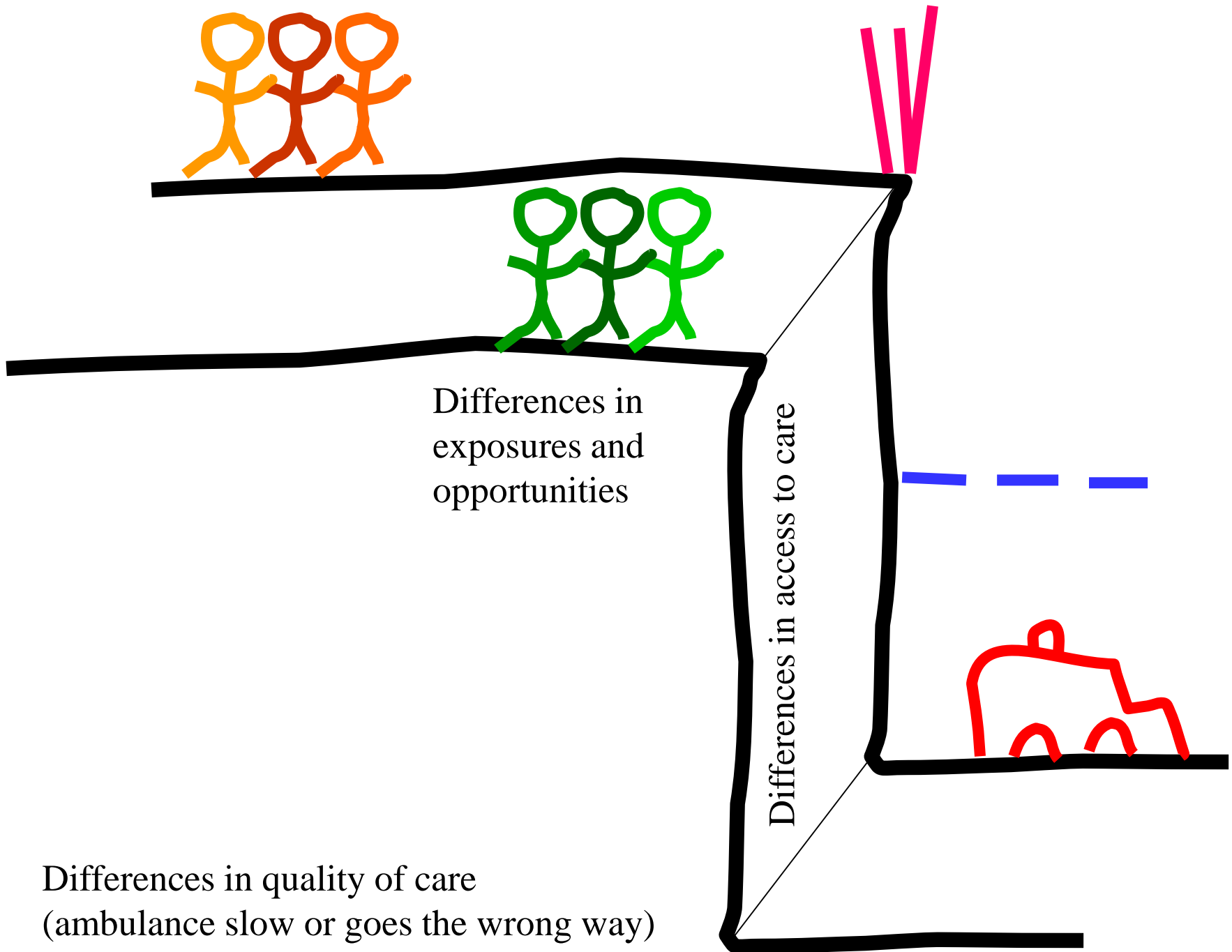




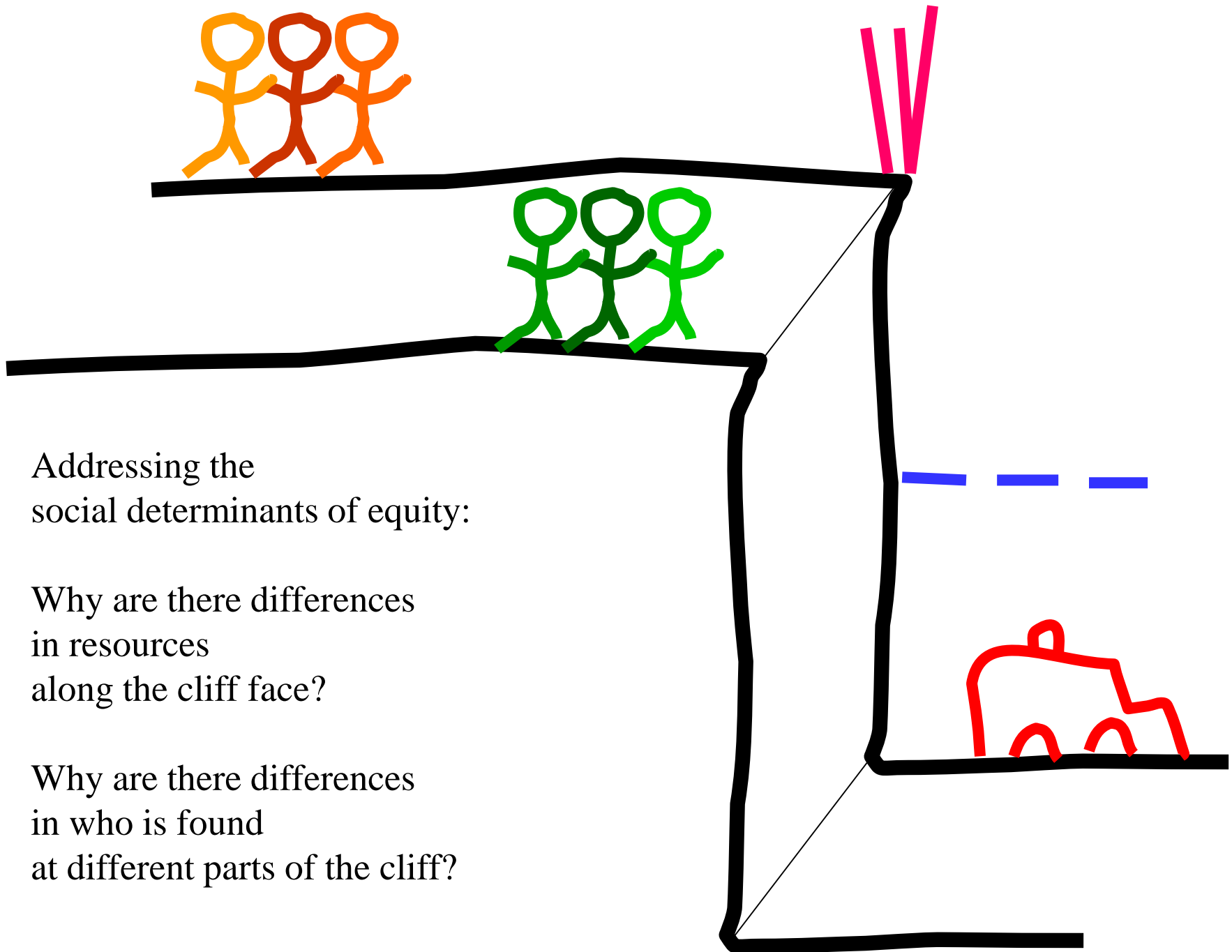












Addressing the  
social determinants of equity:

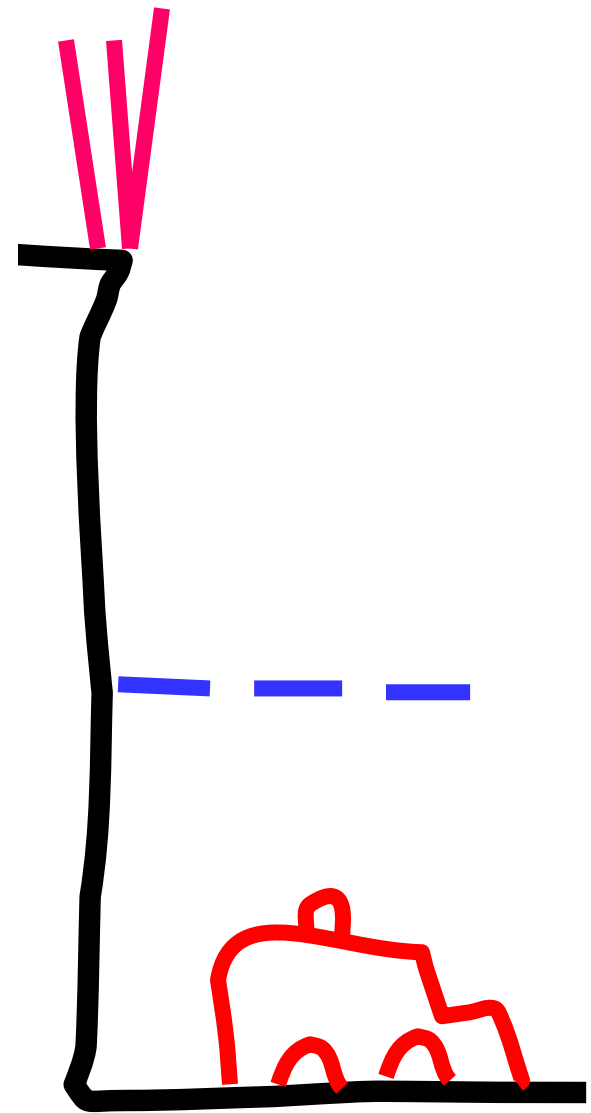
Why are there differences  
in resources  
along the cliff face?

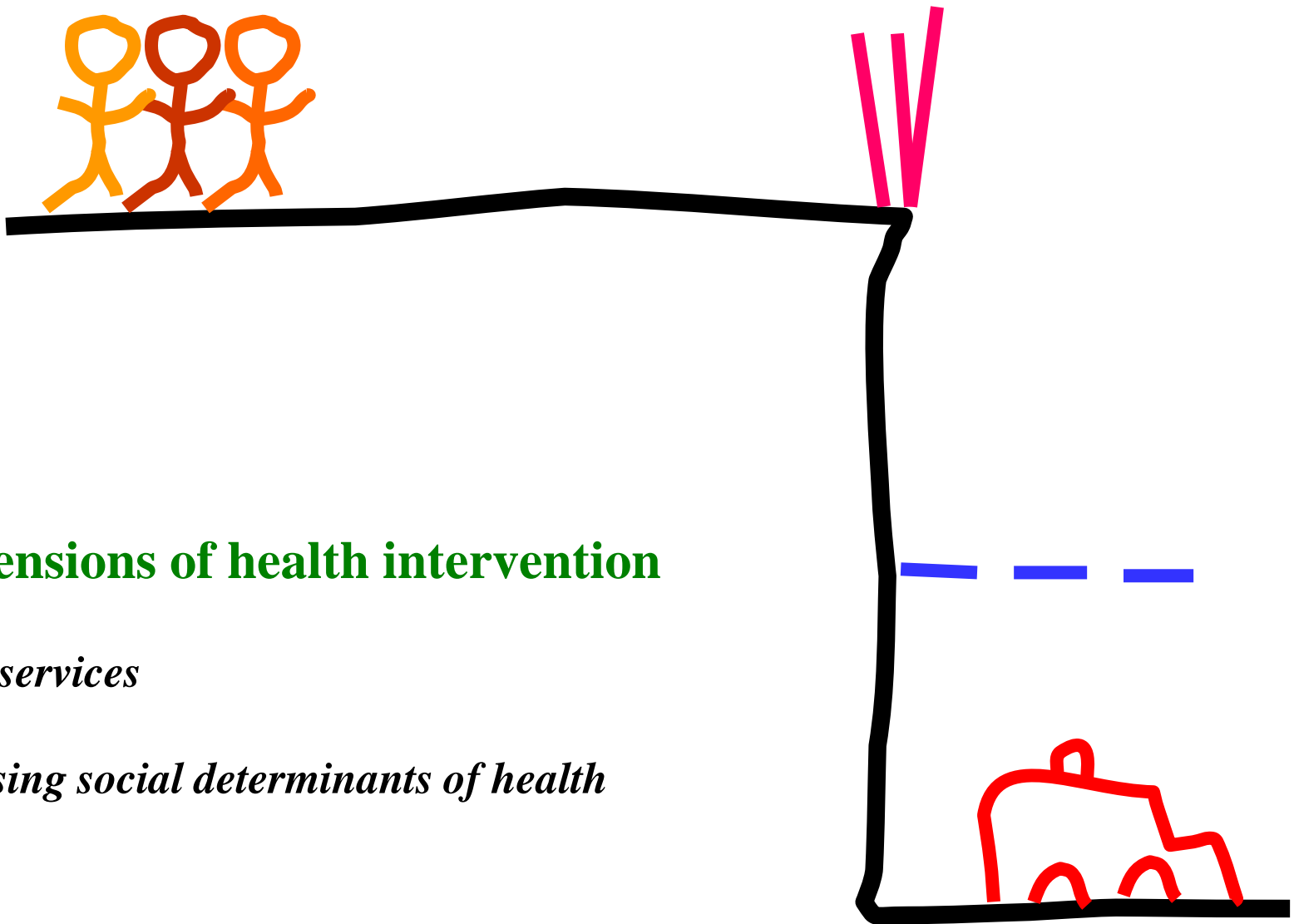
Why are there differences  
in who is found  
at different parts of the cliff?

## **3 dimensions of health intervention**

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*Health services*

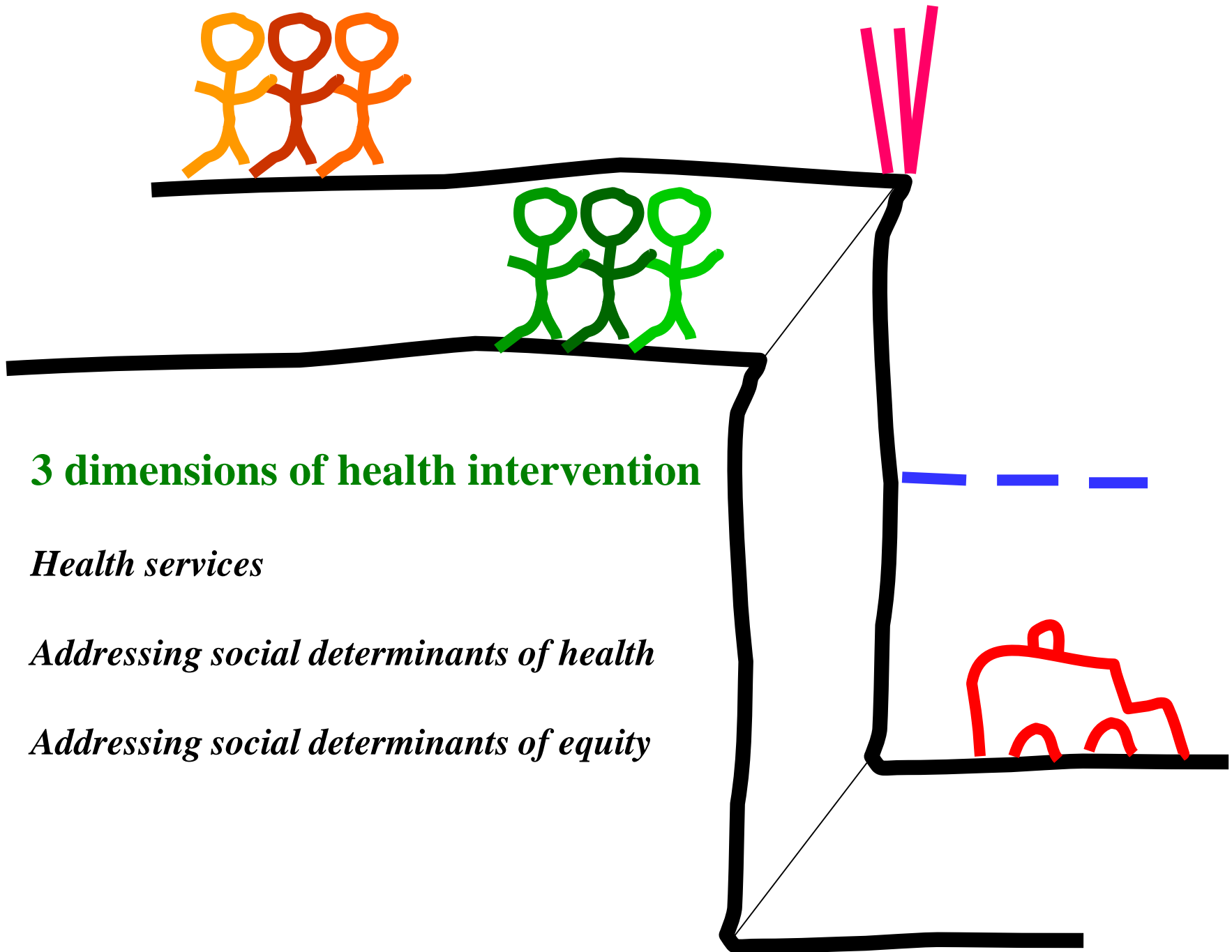


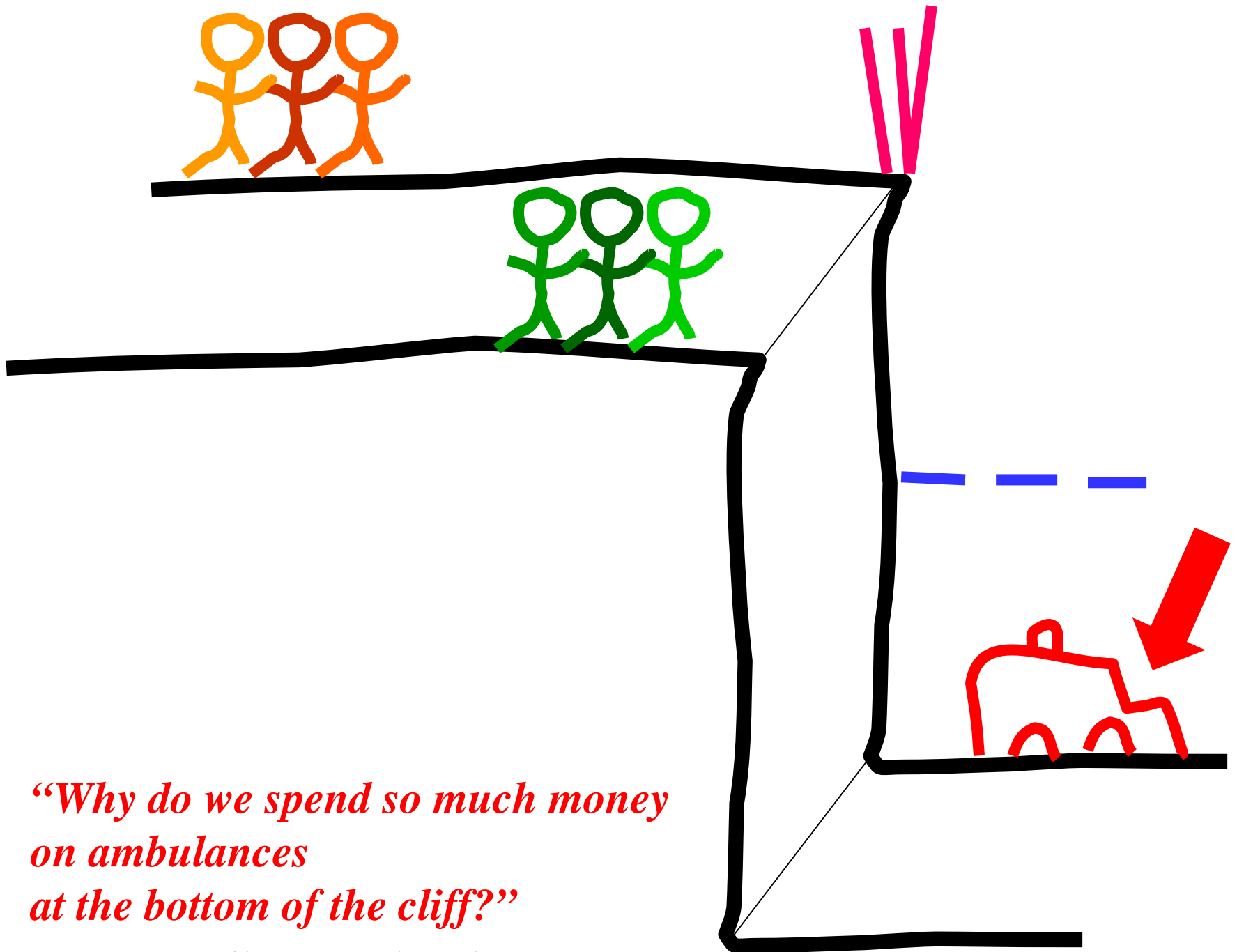


### 3 dimensions of health intervention

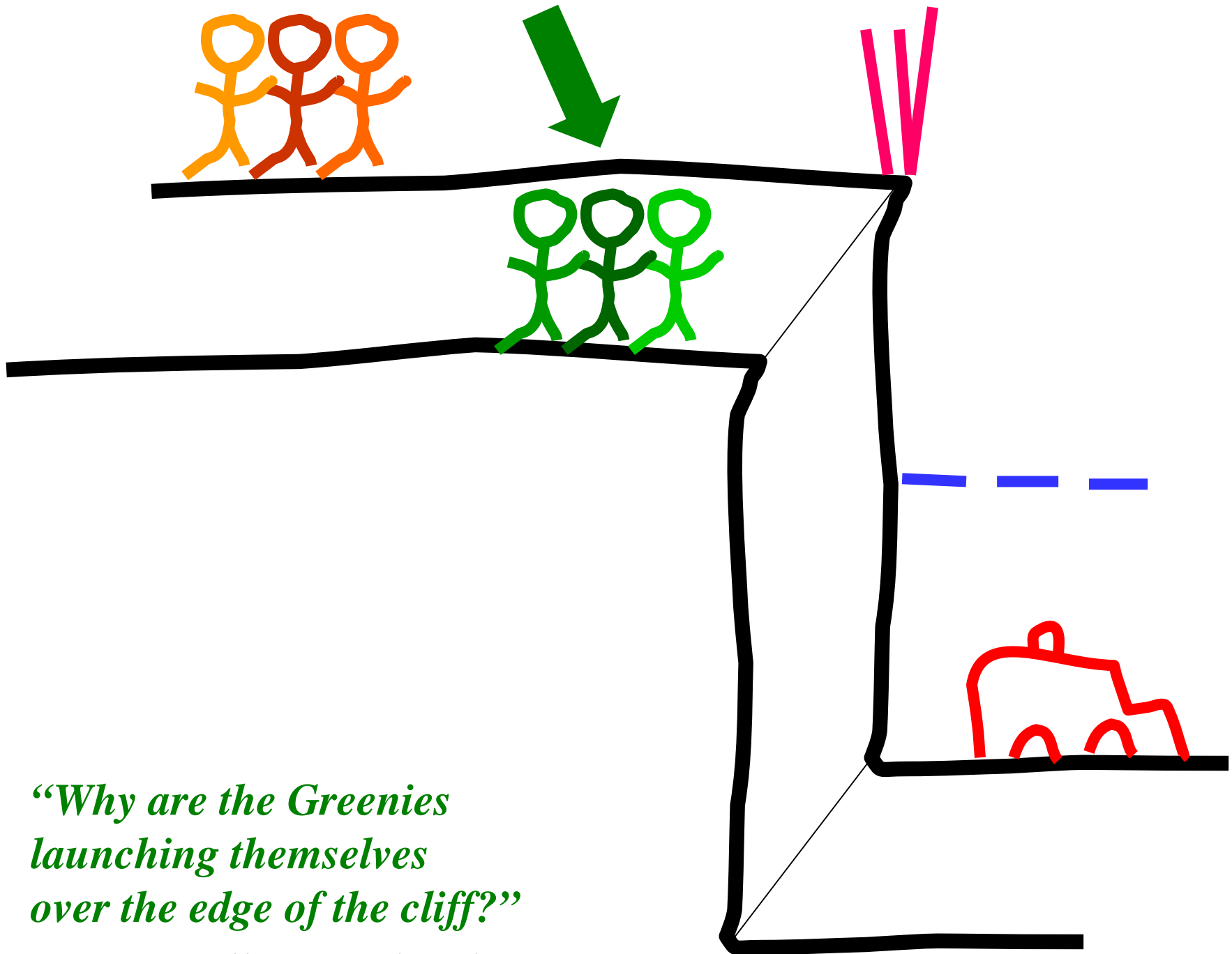
*Health services*

*Addressing social determinants of health*

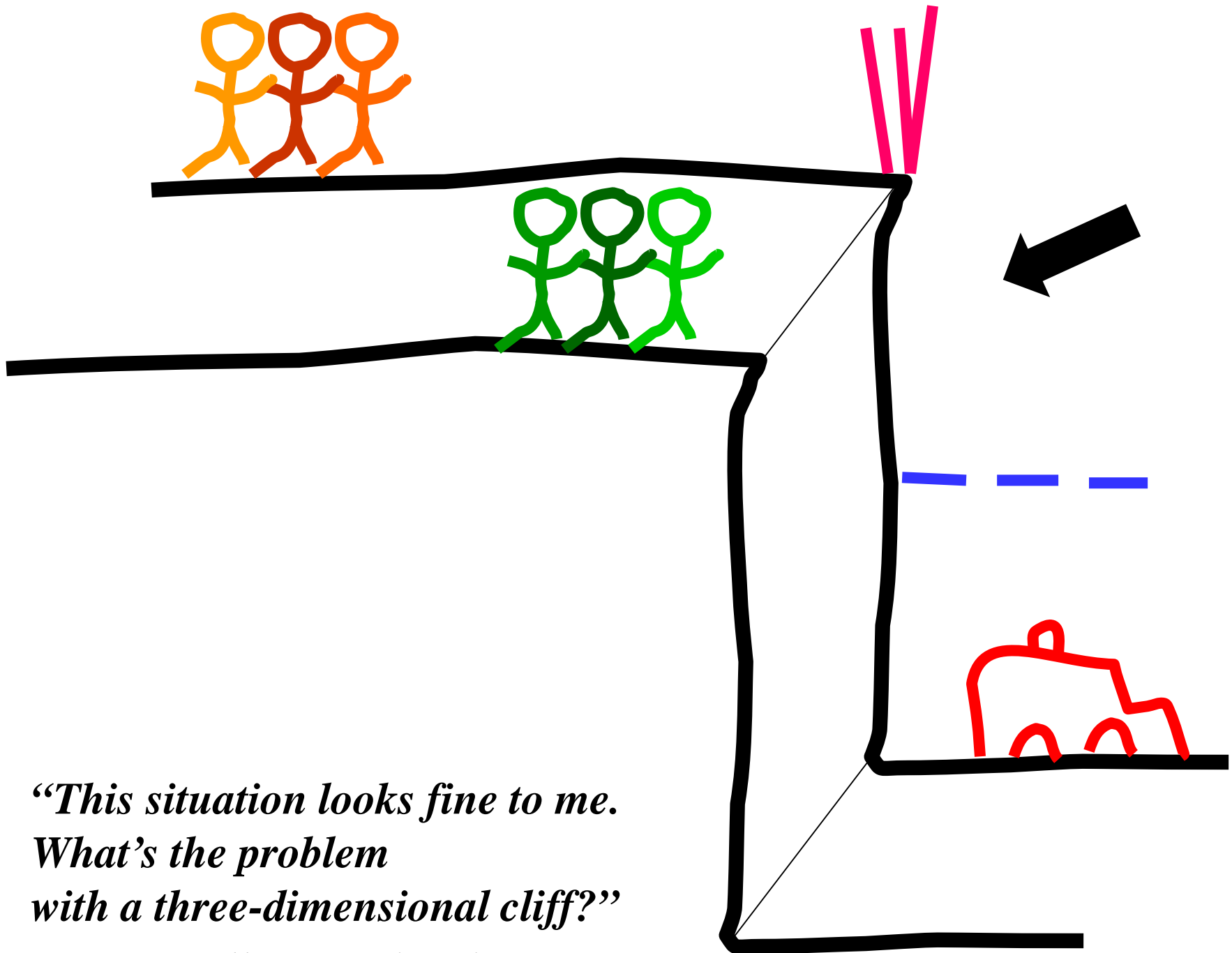




*“Why do we spend so much money  
on ambulances  
at the bottom of the cliff?”*



*“Why are the Greenies  
launching themselves  
over the edge of the cliff?”*



*“This situation looks fine to me.  
What’s the problem  
with a three-dimensional cliff?”*



# What is racism?

**A system**

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**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 one looks (which is what we call “race”)**

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- 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

## **What is *[inequity]*?**

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

## What is *[inequity]*?

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## Many axes of inequity

- ❑ **“Race”**
- ❑ **Gender**
- ❑ **Ethnicity and indigenous status**

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- ❑ **Religion**
- ❑ **Incarceration history**

**These are risk MARKERS**

## What is 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**

# Operationalizing health equity

*“Health equity” is assurance of the conditions for optimal health for all people*

- Make long-term investments in communities
- Address the contexts of people’s lives (the social determinants of health)
- Address the factors determining the range and distribution of those contexts (the social determinants of equity)
  - Structures
  - Policies
  - Practices
  - Norms
  - Values

# Operationalizing health equity

## *Achieving health equity requires*

*Valuing all individuals and populations equally*

*Recognizing and rectifying historical injustices*

*Providing resources according to need*

- Bring unrepresented voices to the table by expanding Boards of Directors and creating strong Community Advisory Boards
- Research the history of each “problem” to be solved for insights into solutions
- Agree on metrics of need and be unafraid to make sustained “unbalanced” investments



# Operationalizing health equity

*Health disparities will be eliminated when health equity is achieved*

- Invest in opportunities
- Measure impacts on opportunities
- Patiently await impacts on outcomes in a generation

**Camara Phyllis Jones, MD, MPH, PhD**

**Past President**

**American Public Health Association**

**Senior Fellow**

Satcher Health Leadership Institute and  
Cardiovascular Research Institute

**Adjunct Associate Professor**

Department of Community Health and Preventive Medicine  
**Morehouse School of Medicine**

**cpjones@msm.edu**

(404) 756-5216

(404) 374-3198 mobile