



CONCEPT PAPER #1

SOCIAL DETERMINANTS OF HEALTH AND INEQUITY

"There must exist a paradigm, a practical model for social change that includes an understanding of ways to transform consciousness that are linked to efforts to transform structures." - Bell Hooks

Connection to the Lens

At its inception, the Equity and Empowerment Lens (E & E Lens) was envisioned as a tool to help leaders and organizations examine the conditions under which equity grows or diminishes and take action to rectify the inequities that result from policies, procedures, and practices that benefit some while disadvantaging others. Understanding the social determinants of health is key to an effective Lens application process. In our day-to-day work, it may not be immediately apparent how various social determinants intersect with our programs and policies. A few Lens questions prompt us to think beyond conventional boundaries and institutional silos by asking us to consider developing new and innovative partnerships or strengthening current relationships with nonprofits and community partners. An example might include a health clinic developing a partnership with a nearby high school to tackle high rates of teen pregnancy, or a housing agency partnering with an economic justice organization to promote just and sustainable employment for its clients.

Background and Basics

The vision of the Multnomah County Health Department is "healthy people in healthy communities." But what is a healthy community? What conditions create healthy communities? Community members and those who work in communities have always understood that people who have peace, shelter, employment, access to education, and other basic needs tend to be healthier. Now, a large and expanding body of literature documents the health impacts of environmental, social, political, educational, and economic conditions, which together are referred to as the social determinants of health (SDOH). By improving each condition, and by working cross-sector on joint actions and goals, we can improve the livability of the community as a whole. When livability is improved for all, the community becomes healthier and we move a step closer to achieving health equity.

(Important note: for the purpose of this document, "health" is synonymous with positive outcomes in any sector.)

What are Social Determinants of Health?

According to the World Health Organization (WHO), social determinants of health are the conditions in which people are born, grow, live, work and age, the health care system being one of several. The social determinants are largely responsible for inequities, which are unfair, avoidable, and systemic differences in population outcomes. The social conditions (referred to as social determinants) resulting in inequities are shaped by (1) the distribution of money and other resources, and (2) the presence of fair/just decision-making processes leading to meaningful engagement of communities most affected by inequities. These social determinants are greatly influenced by policy choices at local, national, and global levels.

A report issued by the Robert Wood Johnson Foundation (2010) provides a compelling explanation of why we must pay close attention to these factors:

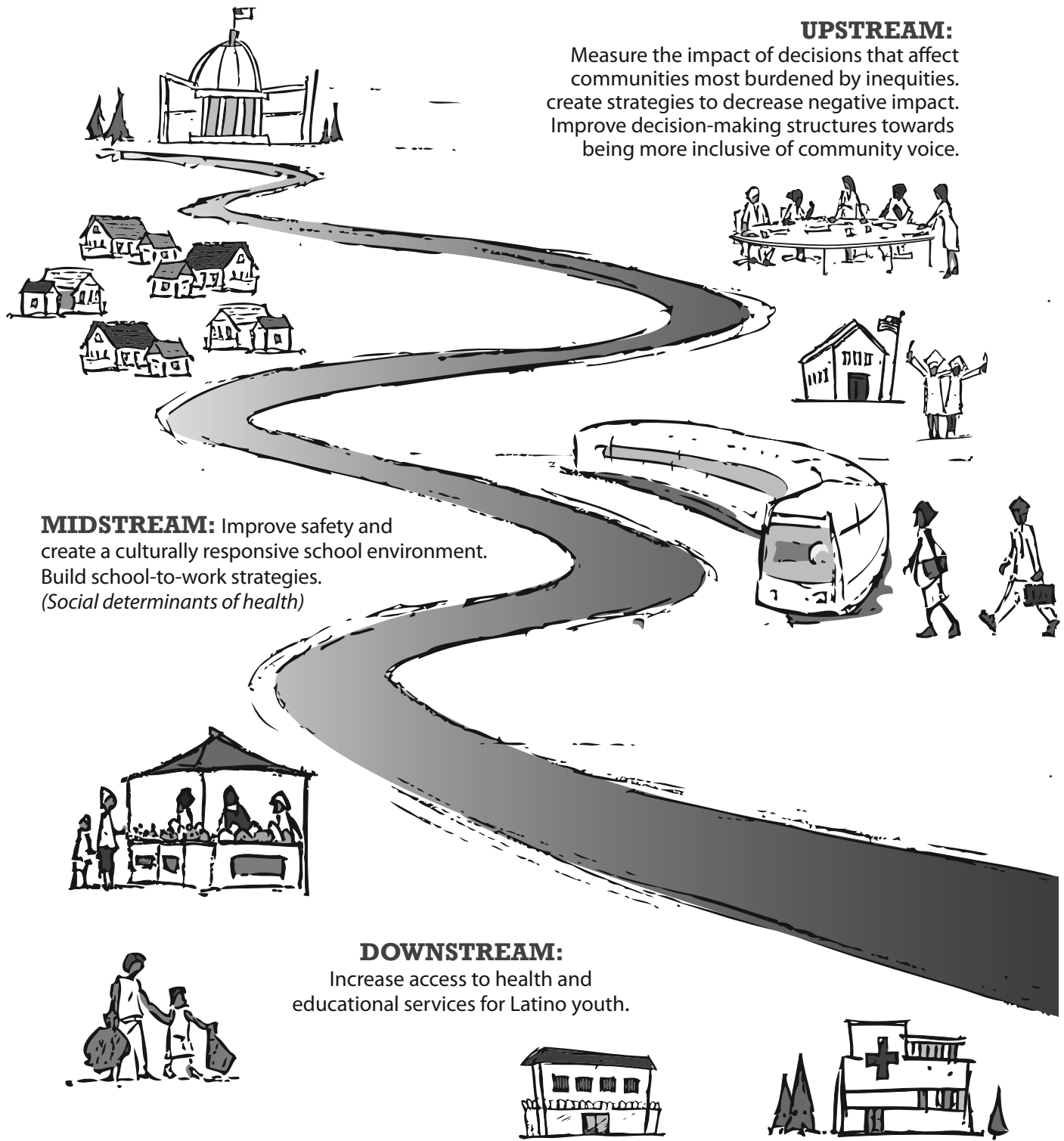
America leads the world in medical research and medical care, and for all we spend on health care, we should be the healthiest people on Earth. Yet on some of the most important indicators . . . we're not even in the top 25. . . It's time for America to lead again on health, and that means taking three steps. The first is to ensure that everyone can afford to see a doctor when they're sick. The second is to build preventative care . . . into every health care plan and make it available to people who otherwise won't go or can't go in for it. . . The third is to stop thinking of health as something we get at the doctor's office but instead as something that starts in our families, in our schools and workplaces, in our playgrounds and parks, and in the air we breathe and in the water we drink. The more you see the problem of health this way, the more opportunities you have to improve it.

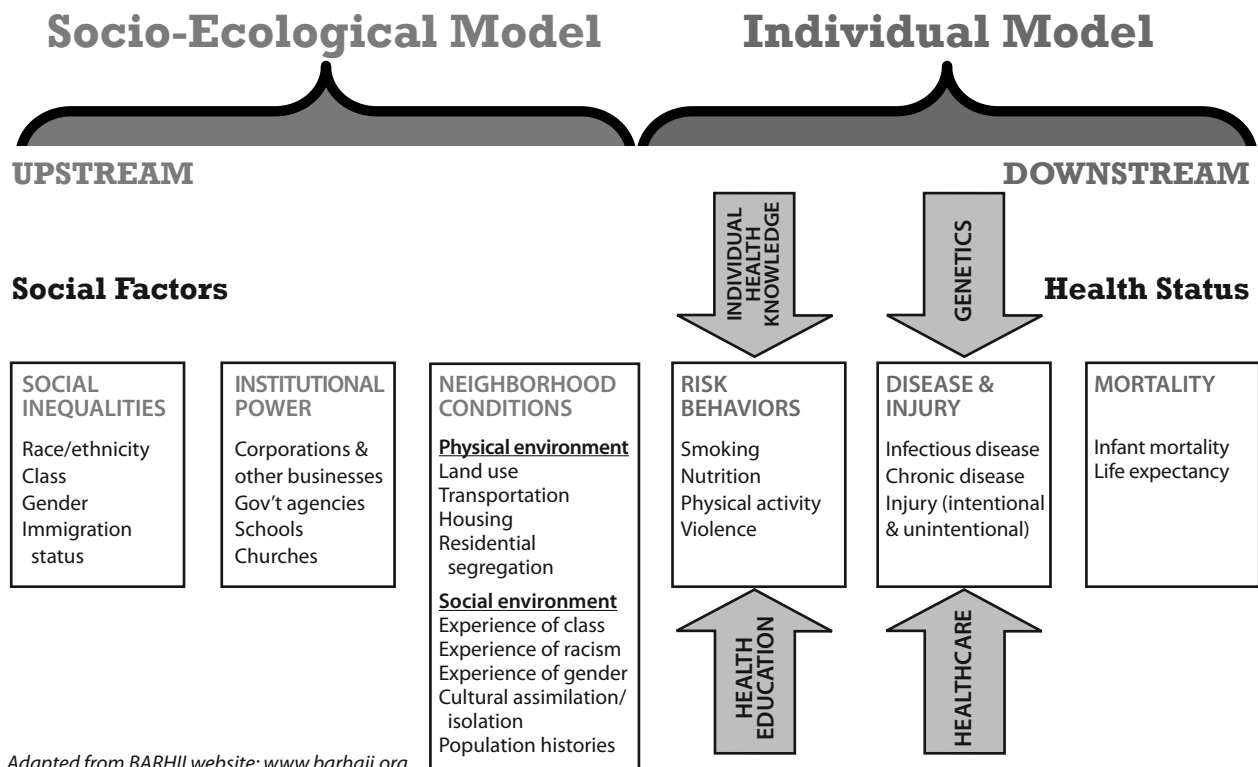
Taking these words to heart, we have adapted the following graphic from Bay Area Regional Health Inequities Initiative (BARHII) to depict how external, social factors (such as housing, institutional power, and racism, to name a few) and individual-related factors (in this example, risk behaviors, disease, and injury) work together to bring about positive or negative population health. Until recently, we have tended to focus on solutions and strategies that only target individual behaviors, as seen in the "risk behaviors" and "disease and injury" categories. However, in order to significantly improve outcomes at the population level and ultimately to eliminate root causes of inequities, we must recognize the external factors that also contribute to inequities experienced by populations and communities. These include neighborhood conditions, education, the role of institutional power in upholding unjust structures, processes, and decision-making, and how and why root causes exist in the first place. (see Concept Paper on *Hierarchy and Root Causes*)

The socio-ecological model also connects health status to sustainability, climate health and equity (see Concept Paper on *Sustainability, Climate Health and Equity*), by examining how our social and economic sustainability exists within the resources and limitations of environmental sustainability. What affects our natural environment (clean air, food, and water) will greatly affect our social and economic environment. For instance, food shortages that result from increasing number of droughts due the climate change can result in higher prices in the markets, making it harder for low-income populations to access healthy, nutritious food.

SOCIAL DETERMINANTS FRAMEWORK

The following graphic illustrates another way to visualize the continuum of upstream, midstream, and downstream actions needed to eliminate the root causes of inequities, with a few sample strategies provided.





Below we describe a number of social determinants that contribute to inequities. Following each is a brief, non-exhaustive list of questions to help frame each factor and suggest how to apply the principles of equity and empowerment within each area. You will notice that we have included questions about staff and organizational development in addition to questions about community members and clients. To make transformative change, it is important to work both internally and externally.

Socioeconomic Status

- Can families in the neighborhood afford basic needs? If not, how could this affect the conditions you/your organization are tracking (health indicators, educational benchmarks, homeownership, etc.)?
- How do your organizational processes exclude people based on socioeconomic status? What can you/your organization do to identify and eliminate barriers to just and fair decision-making and planning processes?

Wealth and Income Development

- Are economically sustainable jobs available for all communities, specifically communities of color, immigrants, and refugees? How can they prepare for better access to these jobs?
- Are green jobs available to all communities, specifically communities of color, immigrants, and refugees? How can they prepare for an access these jobs?
- How does your organization prioritize economic justice, in such area as workforce development, contracting and providing greater opportunities for income development for all?

Education

- Are all community members with whom you work able to obtain high quality education as children, as adults, and as elders? If not, why?
- What organizational, local, state, and federal policies, processes, and procedures assist communities in obtaining high quality education? What gaps still exist?
- How can you, your colleagues, and your organization help ensure that schools and places of learning provide culturally responsive education?

Housing

- Can people of color, immigrants and refugees, and people living on low-income find housing in safe neighborhoods?
- How do policies protect (or not protect) renters from health hazards such as lead exposure and mold?
- What opportunities for quality home ownership exist for any population regardless of race/ethnicity and income?

Early Childhood Development

- Where do young children have the chance to learn and play in a safe environment? Where do they not, and why?
- How do children experience the negative effects of racial and other inequities in the community? According to what indicators?
- How can you / your organization support or sponsor community-capacity building efforts within the area of early childhood that are culturally specific and culturally responsive?

Transportation

- Do all people in the neighborhood have adequate access to public transportation?
- What transportation challenges do people face based upon income inequities? How do these challenges affect access to health care?
- How can current and new modes of public transportation better incorporate the voices of communities of color, immigrants, and refugees?

Access to Health Care

- Who has access to health services in the community? Who does not have access? Why or why not? What can be done to increase coverage for all residents to ensure health as a human right?
- How are health care organizations providing culturally responsive treatment and prevention services?
- How do health care organizations build capacity in communities to serve their own health needs?

Physical Environment/Land Use

- Is the physical environment safe for children?
- How do empty lots/abandoned areas in the neighborhood pose a threat to safety?

- Where geographically are certain populations more exposed to environmental toxins and pollution than others? What can be done to reduce such toxins and pollutants?
- What aspects of your program or project contribute to environmental pollution (transfer of resources and supplies, location in areas not conducive to public transit and multimodal forms of transport, etc.)? How can you mediate the negative impacts.

Respect and Dignity

- How does your organization demonstrate respect for community members and promote deeper respect throughout the larger community?
- How do you know the community members with whom you work feel that they are respected in your organization and in the larger community?
- How does your organization demonstrate respect and value for staff who identify as members of communities most affected by inequities (paying particular attention to communities of color, immigrants, and refugees)
- How do you know they feel respected and valued in your department or organization?
- What policies, procedures, and practices in your organization protect the cultural values and ways of being that people from different communities bring?

Empowerment

- What barriers do empowerment exist in your organization or community?
- What strategies do you currently use to overpower staff and communities you work with?
- How do community members participate actively, as a community, in the broader society? Which community members participate, and why?
- What social and economic conditions change as a result of community action?
- How does your organization build community capacity to have agency over their lives?

Social Support/Social Networks

- How do community members provide support for their families and communities?
- How do high levels of stress affect community abilities to support each other?
- What robust, culturally specific networks support community members to lead healthy and fulfilling lives? How do these networks influence larger systems?

Public safety

- Do all neighborhoods have safe streets, yards, and buildings? Why or why not?
- How do unsafe neighborhoods negatively impact the overall health and success of community members you serve or staff working in your organization?
- Are children and teens exposed to violence in the neighborhoods? What are the demographics across income, race / ethnicity, age, gender, etc., of these children and teens?
- How do community members, most affected by inequities, relate to public safety officials?

Food Access, Safety and Security

- Do all communities have access to healthy and culturally specific food choices?

- What grocery stores exist in the neighborhood? Do communities of color, immigrants, and refugees have access to culturally specific stores and markets in their neighborhoods?
- Where is the distribution of local farmers markets? Of stores selling mostly processed and unhealthy foods? How does that correlate to the demographics in the area?

Access to Culturally-Responsive Activities and Services

- How can your organization actively value cultural heritage and integrate diverse cultural paradigms into organizational planning and decision-making?
- What safe places exist where culturally focused activities can take place?
- How are elders encouraged to pass on the knowledge and stories that are part of their heritage to the children of the community?

Race and Ethnicity

- What organizational processes exclude people based on racial and ethnic background? What might be some of the barriers to inclusion and meaningful engagement for these populations?
- Where is participation and involvement of communities of color, immigrants, and refugees working in your systems? How can your organization strengthen these processes?
- In regards to the other social determinants, how is your organization (1) tracking data based on race and ethnicity demographics; (2) making that data accessible to employees and staff; and (3) making decisions based upon that data.
- Where is our organization promoting culturally responsive policies and structures?

Recommendations for Lens Implementation and Application from an Social Determinant of Health Perspective

- Develop partnerships with programs doing equity work within other social sectors than the one(s) you work with currently. When working with individuals one-on-one or in small groups, it is sometimes challenging to consider how to integrate issues such as educational success, income development, and transportation. Perhaps your organization can develop a partnership with an organization working on one of these issues. Consider organizing a public forum highlighting the issue you are working with (for instance, overrepresentation in the community justice system), and integrate leaders from education or health who are also partnering with your organization.
- Ensure that messaging to people you serve is holistic and recognizes both the social and the individual influence on positive community outcomes. Population health clearly depends on both social and individual factors. Reflect on the messages you send to the people you serve. Is too much emphasis placed on the role of the individual in population health? Is it the other way around? Strive to communicate a balance and implement solutions accordingly.

- Prioritize and fund programs and partnership-building efforts that support cross-jurisdictional approaches. Organizations often prioritize direct services and individually based efforts to the detriment of successful partnership-building and collaborative strategies to eliminate duplication, share best practices and social technologies, and serve families and individuals in more holistic ways.

Individual Reflection Questions

- Think about your own experience and assets within housing, education, and other social determinants of health. How have such experiences and assets influenced the level of power you have or don't have in your organization or community?
- As you meet with community members you are working with or serve, consider how challenges or opportunities in other social determinant areas you are not directly working with might impact their situation. For instance, if you are working on improving library access for various communities you serve, what other social determinant areas (income/wealth development, education, transportation, etc.) could affect people's access? How does this knowledge move you to provide services differently or collaborate with external partners differently?

