Moving Toward Health Equity in Michigan: An Overview
Objectives

• To discuss the terms “health disparities”, “health inequities”, “health equity” and “social determinants of health.”

• To explore how social factors contribute to the health of racial/ethnic minority communities in Michigan.

• To understand inequities and how they impact health in Michigan.
Health Disparities

Measured health differences between two populations, regardless of the underlying reasons for the differences.
Number of infant deaths per 1,000 live births, 2007-2009

- African American: 15.5
- American Indian: 8.8
- Arab American: 7.5
- Asian American: 4.2
- Hispanic/Latino: 9.5
- White: 5.6
### Number of infant death per 1000 live births

<table>
<thead>
<tr>
<th>African American Infants Michigan; Born in 2007-2009</th>
<th>White Infants Michigan; Born in 2007-2009</th>
<th>Health Disparity</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.5</td>
<td>5.6</td>
<td>9.9</td>
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</table>
Health Inequities

Differences in health across population groups that are systemic, unnecessary and avoidable, and are therefore considered unfair and unjust.
Number of infant deaths per 1,000 live births, 2007-2009

- African American: 15.5
- American Indian: 8.8
- Arab American: 7.5
- Asian American: 4.2
- Hispanic/Latino: 9.5
- White: 5.6

- Stress
- Unemployment
- Healthcare Access
Health Equity

Fair, just distribution of social resources and opportunities needed to achieve well-being.
What factors impact health?

- Genetics: 20%
- Access to quality healthcare: 20%
- Human behavior: 40%
- Social / Physical Environment: 20%

[Pie chart showing the distribution of factors impacting health]
The average life expectancy for African American men is less than for White men.

<table>
<thead>
<tr>
<th>African American Men Michigan; Born in 2008</th>
<th>White Men Michigan; Born in 2008</th>
<th>Health Disparity</th>
</tr>
</thead>
<tbody>
<tr>
<td>69</td>
<td>76</td>
<td>7 Years</td>
</tr>
</tbody>
</table>
The same is true for women:

<table>
<thead>
<tr>
<th></th>
<th>African American Women Michigan; Born in 2008</th>
<th>White Women Michigan; Born in 2008</th>
<th>Health Disparity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>76</td>
<td>81</td>
<td>5 Years</td>
</tr>
</tbody>
</table>
How do these disparities arise?
Health behaviors do have an impact on health, but there are many other factors that also influence life expectancy outcomes.
Smoking rates are not very different by race/ethnicity

Percent of population that currently smokes

Michigan BRFS, 2007-2009, Michigan Department of Community Health

Data unavailable for groups not listed
All groups get similar amounts of exercise

Percent of population that does not get enough physical activity

Michigan BRFS, 2007-2009, Michigan Department of Community Health
Data unavailable for groups not listed
Age-adjusted prevalence estimates of inadequate fruit/vegetable consumption by race/ethnicity (Michigan BRFS, 2007-2009)

Michigan BRFS, 2007-2009, Michigan Department of Community Health

Data unavailable for groups not listed
Yet, there are large differences in survival.

Age-adjusted all-cause mortality rates

Vital Records and Health Statistics Section, 1999-2007, MDCH
Some people would rationalize that disparities are only due to healthcare access...
Culture and Healthcare Access
Percent of Michiganders reporting they could not pay to see a doctor at some point in past year

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whites</td>
<td>11%</td>
</tr>
<tr>
<td>Asian Americans</td>
<td>14%</td>
</tr>
<tr>
<td>Hispanic/Latinos</td>
<td>17%</td>
</tr>
<tr>
<td>African Americans</td>
<td>18%</td>
</tr>
<tr>
<td>Arab Americans</td>
<td>22%</td>
</tr>
<tr>
<td>American Indian/Alaskan Natives</td>
<td>23%</td>
</tr>
</tbody>
</table>

Michigan Department of Community Health
Michiganders reporting no health care coverage

- Asian Americans: 1 of 10
- Hispanic/Latinos: 1.5 of 10
- Whites: 1.5 of 10
- Arab Americans: 1.5 of 10
- African Americans: 2 of 10
- American Indian/Alaskan Natives: 2 of 10

Michigan Department of Community Health
Access to healthcare does not explain all disparities.
Low Birth Weight (LBW) Births by Race and Prenatal Care

% LBW

Inadequate | Intermediate | Adequate

Prenatal Care

Black | White

2008 Michigan Resident Birth File, Vital Records & Health Statistics Section, MDCH
Low Birth Weight (LBW) Births by Race and Prenatal Care

- Black:W:O Ratio
- % LBW

2008 Michigan Resident Birth File, Vital Records & Health Statistics Section, MDCH
• Healthcare
• Nutrition
• Behavior

HEALTH OUTCOMES
Determinants of Health

Social Inequality
- Discrimination by race, ethnicity, gender or class

Economic Factors
- Income, education, employment, wealth

Social & Physical Environments
- Social Cohesion, political influence, residential segregation, violence, housing, built environment, air quality, transportation

Healthcare
- Healthcare access and quality, insurance coverage, cultural/linguistic competence in healthcare

Individual Factors
- Health Behaviors
- Human Biology

Adapted from Determinants of Health Diagram by Denise Carty University of Michigan School of Public Health
Social Determinants of Health

Social, economic and environmental factors that contribute to overall health of individuals and communities.
Social Determinants of Health

“Causes of causes”: Fundamental causes

Social Determinants:
- Discrimination
- Income
- Education
- Housing
- Employment
- Race-based segregation
- Environment
- Violence/Crime

Access to:
- Care
- Information
- Resources

Exposure to:
- Stress
- Opportunity
- Choice

• Healthcare
• Nutrition
• Behavior

HEALTH OUTCOMES
“Moving Upstream”

Keep people from falling in up here

Instead of pulling them out down here
Social Determinants in Michigan
Educational Inequity:
“People with more education are likely to live longer, to experience better health outcomes, and to practice health-promoting behaviors such as exercising regularly, refraining from smoking, and obtaining timely health care check-ups and screenings.”- Robert Wood Johnson Foundation.
Percentage of U.S. adults with more than basic health literacy

- White: 72%
- Asian: 70%
- American Indian: 52%
- African American: 43%
- Hispanic: 35%

2003 National Assessment of Adult Literacy
U.S. Department of Education, National Center for Education Statistics
9% of people in Michigan do not speak English at home.
Percent of Michigan populations with a College Degree

- American Indian: 13%
- Hispanic/Latino: 14%
- African American: 14%
- White: 26%
- Asian: 63%

U.S. Census Bureau, American Community Survey 2006-2008
High school graduation rates by race and ethnicity

Graduation Rates in Michigan

<table>
<thead>
<tr>
<th>Race</th>
<th>Rate in 20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian American</td>
<td>17 in 20</td>
</tr>
<tr>
<td>White</td>
<td>16 in 20</td>
</tr>
<tr>
<td>American Indian</td>
<td>13 in 20</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>12 in 20</td>
</tr>
<tr>
<td>African American</td>
<td>11 in 20</td>
</tr>
</tbody>
</table>

Center for Educational Performance and Information, 2009
Percentage of Michigan high school students who can read at the high school level

- Asian: 64%
- White: 59%
- American Indian: 40%
- Hispanic/Latino: 36%
- African American: 26%


Vital Records and Health Statistics Section, MDCH

- Under 12 years: 15.6
- 12 years: 17.3
- 13-15 years: 15.1
- 16 years and over: 14.5

- Black:White Ratio

Vital Records and Health Statistics Section, MDCH
What else?
Health Behaviors

Access to health care

Income or Education

Genetics

These are all factors, but what is the root cause?
ROOT ANALYSIS ACTIVITY

Discuss the factors associated with a particular health issue.

What root causes are the cause of these factors? ( Causes of the cause)

Goal: To understand the social determinants of health and how these structural factors impact health.
Race
What Race Is Not

• Race is not biological: Race is a social concept and has no biological basis.

• Race is not genetic: You cannot determine a person’s race by examining their genes. A person’s race is determined by the society they live in.

• Race is not an indication of similar DNA: People who look very different (skin color, hair texture, eye shape, etc.) can have DNA that is more similar than two people who have similar skin color, hair texture, etc.

The fact that we know what “race” we are says more about our society than it does our biology.

—N. Krieger & M. Bassett 1986
Race Is...
A way of classifying of people based on outward appearance or looks.

Racism Is...
Assigning value, status, and access to people based on how they look, where they come from, and their cultural norms.

This has resulted in some groups having different and better opportunities than others.
Levels of Racism

- **Personal**
  - Conscious or unconscious feelings of bias and prejudice on an individual level.

- **Interpersonal**
  - Actions by an individual, towards others, that are biased and prejudiced.

- **Institutional**
  - Practice and policies within institutions of power (i.e. “political, economic, educational, social, and historical”) that allow discrimination and inequities. (Batts, 2002.)

- **Cultural**
  - “When the standards of appropriate action, thought, and expression of a particular group are perceived either overtly or subtly as negative or less than.” (Batts, 2002.)
“My Oldest brother would throw his rice ball in the gutter before he got to school. He decided that he would rather go hungry than be different.”

Japanese Internment
Looters or Survivors?

A young man walks through chest deep flood water after looting a grocery store in New Orleans on Tuesday, Aug. 30, 2005. Flood waters continue to rise in New Orleans after Hurricane Katrina did extensive damage when...
Go Back To Where You Came From!

Since 9/11……
There has been a significant increase in discrimination, racial targeting and profiling of Arab/Chaldeans.
In Michigan, complaints about abuse and racial profiling by Immigration and Customs Enforcement (ICE) are on the rise.
“Kill the Indian, Save the Man”

During 1880-1902, between 20,000 and 30,000 Native American children were forced to live in reform boarding schools. This practice continued until the 1930s and in some cases even later.
How Do You Explain This?

- The U.S. Department of Housing and Urban Development (HUD) estimates there are more than 2 million incidents of housing discrimination each year. (Dept of Housing and Urban Development).

- A significantly higher number of minority students are placed into special education programs.

- Pregnant Hispanic, African American and Asian/Pacific Islander mothers are exposed to higher mean levels of air pollution and are twice as likely to live in the most polluted counties.

- Despite being equally qualified, African American and Hispanic women receive fewer interviews and job offers than white applicants.

- 20% of Asians, 19% of Hispanics and 14% of African Americans reported being treated with disrespect or being looked down upon during a patient-provider encounter.
Stress
Percent of Michigan adults who rarely or never received social/emotional support needed

Prevalence of not receiving support needed: % Adults in response to question “How often do you get the social and emotional support you need?”

Michigan BRFS, 2007-2009, Michigan Department of Community Health
Data unavailable for groups not listed
7% of Michigan adults reported that they were dissatisfied or very dissatisfied with life.

African Americans were more than twice as likely to report life dissatisfaction as Whites.
In Michigan, 20% of African Americans and Hispanic/Latinos reported being emotionally upset at least once a month due to how they were treated based on their race.
In Michigan, 17% of Hispanic/Latinos and 10% of African Americans reported physical anxiety symptoms at least **once a month** due to how they were treated based on their race.

Note: Symptoms included headaches, upset stomachs, tensing of muscles, or pounding hearts.
Prevalence of Michigan adults who felt that at work they were treated worse than some or all people of other races, by race/ethnicity

Prevalence: % Adults reporting experience at work over past 12 months

Michigan BRFS, 2006, Michigan Department of Community Health
Data unavailable for groups not listed
Percent of Michigan adults who felt that their health care experience was worse than that of some or all people of other races

- Overall: 6%
- African American: 17%
- Hispanic/Latino: 11%
- Other: 8%
- White: 3%

Percent adults reporting experience when seeking health care over past 12 months

Data unavailable for groups not listed
In 2009, 26% of African American Men in Michigan were unemployed. This is nearly twice the rate for White Men (15%).

![Graph showing 2009 Unemployment Rates for Men in Michigan]

Local Area Unemployment Statistics, U.S. Dept. of Labor, 2009
Food Access
Food Desert

“An area in the United States with limited access to affordable and nutritious food, particularly such an area composed of predominantly lower income neighborhoods and communities.”

-Food, Conservation, and Energy Act of 2008
Michigan Food Deserts*, 2006

- Food Desert (by census tract)
The United States Department of Agriculture (USDA) defines a food desert as a low-income census tract where a substantial number or share of residents has low access to a supermarket or large grocery store.
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Source: Nielsen, 2011
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Source: Nielsen, 2011
To Summarize
How Social Injustice Becomes Embodied in Differential Disease and Mortality Rates

Social Structure

Class
Institutional Racism
Gender Discrimination & Exploitation

Power and Wealth Imbalance (Absence of Democracy & Political Influence)

Globalization: Demolition of Financial Markets
Limited Social Welfare State

Labor Market Inequities
Lack of Access to Quality Education
Lack of Access to Productive Resources & Social Goods
Social Exclusion

Social Determinants of Inequities in Health

Historical Legacy

Exposure Pathway

Psychosocial Stress/Unhealthy Behaviors

Inequity in the Distribution of Disease, Illness and Wellbeing

Richard Hofrichter, National Association of City and County Health Officials

Root Causes
Social Determinants of Health
Health Inequities
How Social Injustice Becomes Embodied in Differential Disease and Mortality Rates

Social Structure

Class

Institutional Racism

Gender Discrimination & Exploitation

Power and Wealth Imbalance
(Absence of Democracy & Political Influence)
A Health Equity Framework

- Class, Racism, Gender Discrimination and Exploitation
- Education
- Job Opportunity
- Socioeconomic Status
- Environmental Exposure
- Health Behaviors
- Access to Health Services
- Safe and Affordable Housing
- Reducing violence

Adapted from “The Role of Racism and Health Inequity” Meghan Patterson, MPH & Nashira Baril MPH
Framework created by the Boston Public Health Commission
Tips for Staying Healthy: A Lifestyle Approach

1. Don’t smoke. If you do stop
2. Eat a balanced diet, include fruit/vegetables
3. Keep physically active
4. If you drink, do so in moderation
5. Cover up in the sun and protect your children
6. Practice safe sex
7. Participate in appropriate health screening
8. Drive defensively; don’t drink and drive.
10. Maintain social ties
Tips for Staying Healthy: A Social Determinants Perspective

1. Don’t be poor. If you can stop. If you can’t, try not to be poor for too long.
2. Don’t have poor parents.
3. Don’t live in a poor neighborhood.
4. Own a car- but use only for weekend outings. Walk to work.
5. Practice not losing your job and don’t become unemployed.
6. Don’t be illiterate.
7. Avoid social isolation.
8. Try not to be apart of a socially marginalized group.
Tips for Achieving Health Equity: A Community Empowerment Approach

Recommendations from the *Michigan Health Equity Roadmap*:

- Improve race/ethnicity data collection/data systems/data accessibility.
- Strengthen the capacity of government and communities to develop and sustain effective partnerships and programs to improve racial/ethnic health inequities.
- Improve social determinants of racial/ethnic health inequities through public education and evidence-based community interventions.
- Ensure equitable access to quality healthcare.
- Strengthen community engagement, capacity, and empowerment.

What else?
For More Information

Health Disparities Reduction and Minority Health Section
Division of Health, Wellness, and Disease Control
Michigan Department of Community Health
313-456-4355
www.michigan.gov/minorityhealth

www.healthequitymi.com