Invest Health Phase I Web-Based Learning Groups: SOCIAL DETERMINANTS OF HEALTH

August 29, 2016
For Technical Assistance

If you have technical difficulties, call WebEx support at 1-866-229-3239 for assistance.

You may also submit questions using the Q&A feature on the right hand side of your screen. (Chat is disabled.)

• Please choose All Panelists from the “Send to” menu.
• Type your question and click Send.

Technical difficulties? Call 1-866-229-3239
Audio difficulties? Send us a question in the Q & A panel.
Gain new program knowledge regarding the Social Determinants of Health (SDoH), to include:

- Defining the SDoH and overarching factors
- Understanding how the SDoH interrelate with each other
- Learning about promising practices and creative solutions
1. Introduction (Karya Lustig)
2. Social Determinants of Health (Mildred Thompson)
3. Discussion (All, Facilitated by Karya Lustig)
4. Closing (Karya Lustig)
Mildred Thompson

- Health Equity Consultant and Former Senior Director at PolicyLink’s Center for Health Equity and Place

- Work focusing on healthy food access, improving the built environment, and the systemic integration of health equity

- Former Director of Community Health Services for Alameda County’s Public Health Department, Healthy Start, and San Antonio Neighborhood Health Center

- Member of the Health Disparities Subcommittee to the CDC Director’s Advisory Committee

- Degrees in nursing, psychology and social work
INVEST HEALTH
Strategies for Healthier Cities
A Project of the Robert Wood Johnson Foundation and Reinvestment Fund

Social Determinants of Health

Mildred Thompson
Health Equity Consultant

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What are the Social Determinants of Health?

“The Social Determinants of Health are the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries.”

- World Health Organization
Defining Social Determinants of Health

- Income
- Education
- Housing

Source: Unsplash
Defining Social Determinants of Health

- Neighborhood Conditions/Safety
- Transportation
- Food

Source: Unsplash
Defining Social Determinants of Health

- Recreation/Parks
- Access to Services
Communities of Opportunity

- Parks
- Grocery Stores
- Financial Institutions
- Better Performing Schools
- Good Public Transit

Good Health Status

Poor Health Status
Contributes to health disparities:
- Obesity
- Diabetes
- Asthma
- Increased injury

Low-Income Communities

- Fast Food Restaurants
- Liquor Stores
- Unsafe/Limited Parks
- Poor Performing Schools
- Toxic Waste Sites
- Limited Public Transportation
- Increased Crime
Contributors to Health

Length of Life (50%)
- Tobacco Use
- Diet & Exercise
- Alcohol & Drug Use
- Sexual Activity

Quality of Life (50%)
- Access to Care
- Quality of Care

Health Behaviors (30%)
- Clinical Care (20%)
  - Education
  - Employment
  - Income
  - Family & Social Support
  - Community Safety

Social & Economic Factors (40%)
- Physical Environment (10%)
  - Air & Water Quality
  - Housing & Transit

Source: 2016 County Health Rankings, Robert Wood Johnson Foundation

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Defining Social Determinants of Health

Overarching Factors

- Income
- Education
- Housing
- Neighborhood Conditions/Safety
- Transportation
- Food
- Recreation/Parks
- Access to Services

Power
Stress
Racism
Community Context Shapes Health: Racism

• Racial discrimination can literally ‘age’ the body and may contribute to the poorer health outcomes.

• The cumulative impact of racism results in lowered immune system, which leads to a greater risk for a poorer overall health status.

• A majority of black Americans report racial discrimination as a chronic stressor, which has a negative impact on health.

Source: RWJF Scholars Forum: Disparities, Resilience, and Building a Culture of Health, Amani M. Nuru-Jeter
The National Equity Atlas is a first-of-its-kind **data and policy tool** for community leaders and policymakers working to build an equitable economy.

The Atlas provides in-depth data, charts, and maps on **demographic change**, racial inclusion, and the economic benefits of equity for the largest 150 regions, all 50 states, the District of Columbia, and the United States.
Community Context Shapes Health: Demographic Shift

A New Generation Gap?
The Diverging Demographics of Seniors and Youth

Ages 65+

Ages 0 to 4

Percent People of Color by County

Sources: 2010 Census (Summary File 1), Census TIGER/Line, NHGIS, and ESRI.

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Community Context Creates Health Inequities

- Residents *Pay More* for food
- Average low-income community has *four times* as many *fast-food restaurants and convenience stores* as they do grocery stores and produce vendors
- *Quality* of foods are not equal in all communities
- *Transportation* barriers prevent many residents from access to supermarkets
- *Marketing* of unhealthy foods and beverages unfairly target communities of color both in schools and neighborhoods
Fight for $15:

- Started with a few hundred fast food workers in NYC, working for $15 an hour and union rights
- $15 now won in multiple cities, including Seattle as well as parts of New York State and California

Source: Buzzfeed
### Why Didn’t Higher Education Protect Hispanic and Black Wealth?

#### Median Family Income in 2013

<table>
<thead>
<tr>
<th></th>
<th>Four-Year College Graduates</th>
<th>Non-College Graduates</th>
<th>Median College Income as a Multiple of Median Non-College Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Families</td>
<td>$87,250</td>
<td>$36,523</td>
<td>2.4</td>
</tr>
<tr>
<td>White</td>
<td>$94,351</td>
<td>$41,474</td>
<td>2.3</td>
</tr>
<tr>
<td>Asian</td>
<td>$92,931</td>
<td>$32,668</td>
<td>2.8</td>
</tr>
<tr>
<td>Hispanic</td>
<td>$68,379</td>
<td>$30,436</td>
<td>2.2</td>
</tr>
<tr>
<td>Black</td>
<td>$52,147</td>
<td>$26,581</td>
<td>2.0</td>
</tr>
</tbody>
</table>

#### Median Family Net Worth in 2013

<table>
<thead>
<tr>
<th></th>
<th>Four-Year College Graduates</th>
<th>Non-College Graduates</th>
<th>Median College Net Worth as a Multiple of Median Non-College Net Worth</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Families</td>
<td>$273,586</td>
<td>$43,625</td>
<td>6.3</td>
</tr>
<tr>
<td>White</td>
<td>$359,928</td>
<td>$80,692</td>
<td>4.5</td>
</tr>
<tr>
<td>Asian</td>
<td>$250,637</td>
<td>$25,632</td>
<td>9.8</td>
</tr>
<tr>
<td>Hispanic</td>
<td>$49,606</td>
<td>$12,160</td>
<td>4.1</td>
</tr>
<tr>
<td>Black</td>
<td>$32,780</td>
<td>$9,006</td>
<td>3.6</td>
</tr>
</tbody>
</table>

SOURCE FOR BOTH TABLES: Survey of Consumer Finances
Political Context:

- ObamaCare/Prevention Funds

Source: Getty Images
Roles and Responsibilities

- Government
- Philanthropy
- Private Sector
- Community
- Multi-sectoral Partnerships
Promising Practices: Creative Solutions

Government:

• Institutionalizing Health Equity Project
  o Public health departments & academic institutions
  o Exploring promising practices, as well as structural barriers
  o Current learning/action network

Source: Unsplash
Promising Practices: Creative Solutions

Philanthropy:

- TCE: Building Health Communities
- RWJF: Culture of Health
Private Sector/Public-Private Partnerships: Fresh Food Financing
Promising Practices: Creative Solutions

Community: Just Cause: Causa Justa

FORECLOSURES MAKE US SICK!

Causa Justa :: Just Cause kicked off our Utilities On! campaign on Thursday, September 2nd at our Foreclosures Make Us Sick press conference and release of our report, Rebuilding Neighborhoods, Restoring Health, written in collaboration with the Alameda County Public Health Department. The report is the only of its kind to document the public health impact of foreclosure.

The press conference highlighted a key finding in our report: foreclosures have forced many tenants into unhealthy and substandard living conditions. We found that 43% of tenants in foreclosure worry about being forced out or evicted and that more than 30% of tenants in foreclosed properties report that they are living in unhealthy places with substandard conditions such as mold, rodents, and cockroaches.
More Actions Needed

- Measuring Impact
- Broader Community Engagement
- Sustainability: Funding, Framing and Champions
Thank you!

Contact Information:
Mildred Thompson
Health Equity Consultant
mildredwt@gmail.com

Source: Huffington Post
Dial-in Instructions

Please see the instructions below to link your online presence with the teleconference.

1. Click on the phone icon with the question mark at the bottom of the Participants panel to request to dial in. (See red circle in Figure 1.)

2. Choose “I will call in” from the pop-up dialogue box.

3. Then, use the three-step dial-in information (Figure 2) to join the teleconference. You should then see a phone icon (📞) next to your name.

4. Please mute the audio on your computer to avoid interference.
Participate in the Discussion

If you would like to contribute to the discussion, please

• **raise your hand** to be called on (and unmuted); or

• write to us using **Q&A**.

Please send typed comments/questions to **All Panelists** and hit **Send**.
Thank you!

www.investhealth.org

Upcoming Learning Group Webinars:
Community Development 101  9/8
Education and Training    9/9
Housing                   9/19
Transportation            9/20

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