

Achieving Health Equity

putting gun violence in context

Camara Phyllis Jones, MD, MPH, PhD

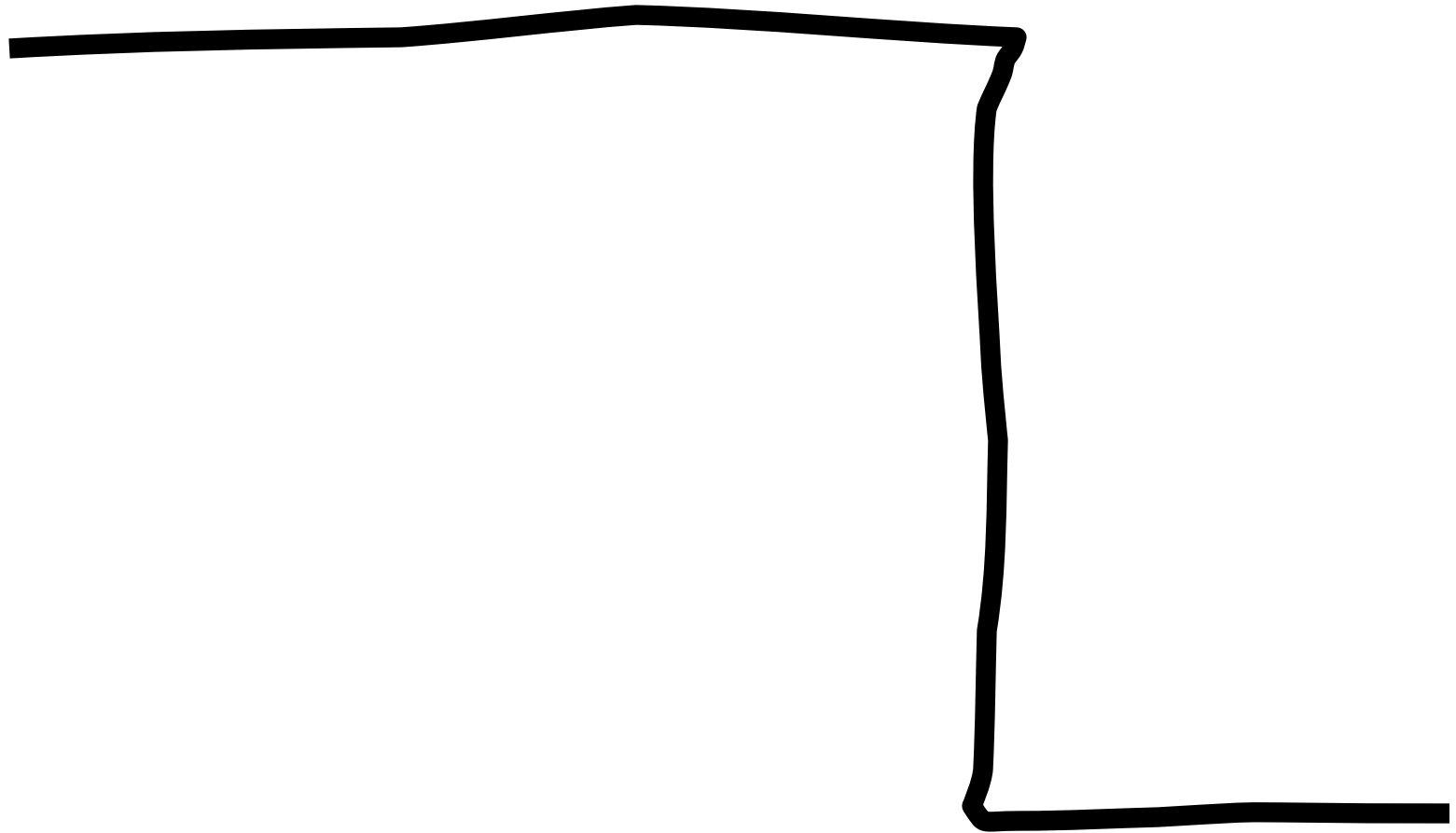
“Gun violence: What do we know? What can physicians do?”

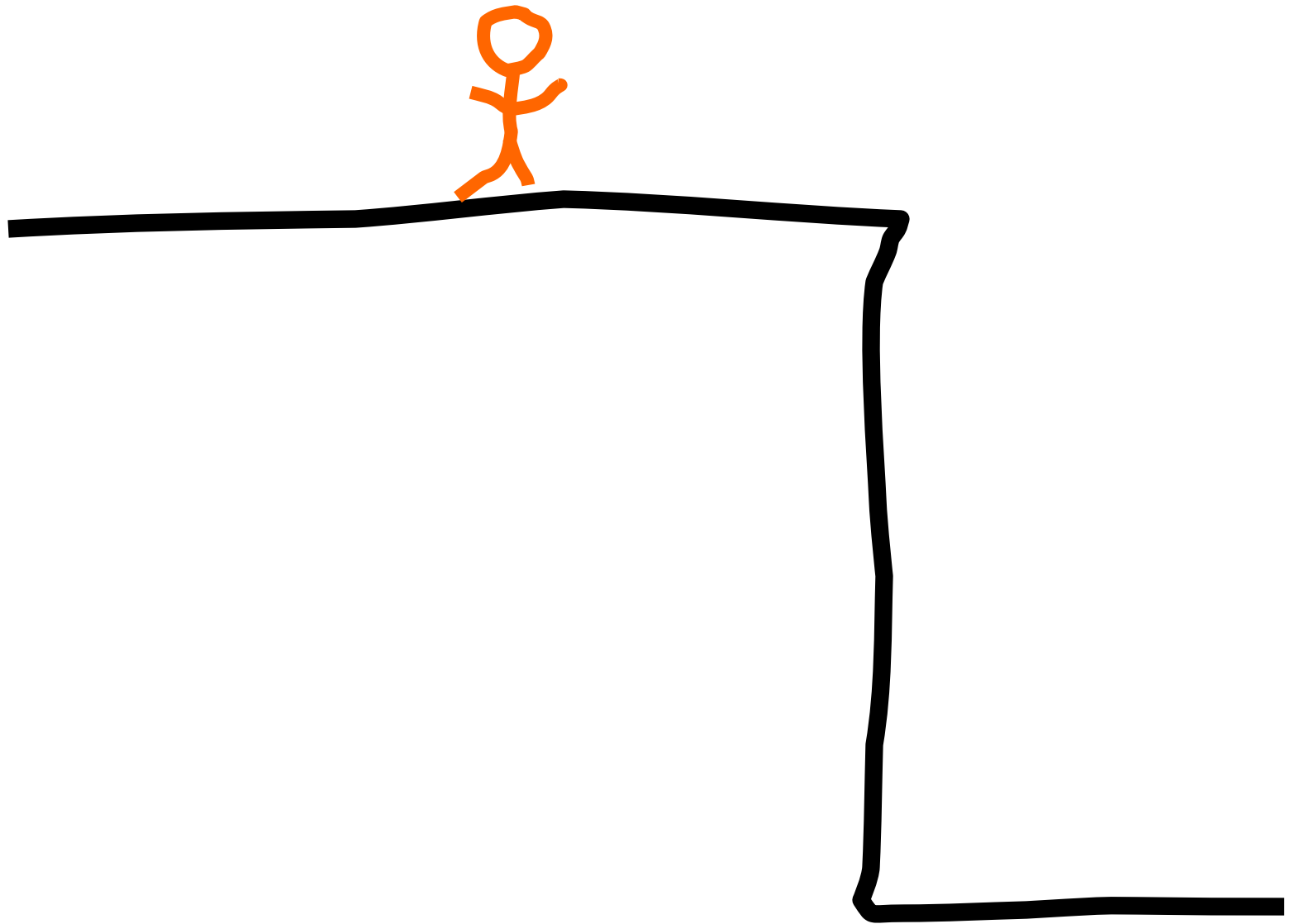
2016 AMA Interim Meeting

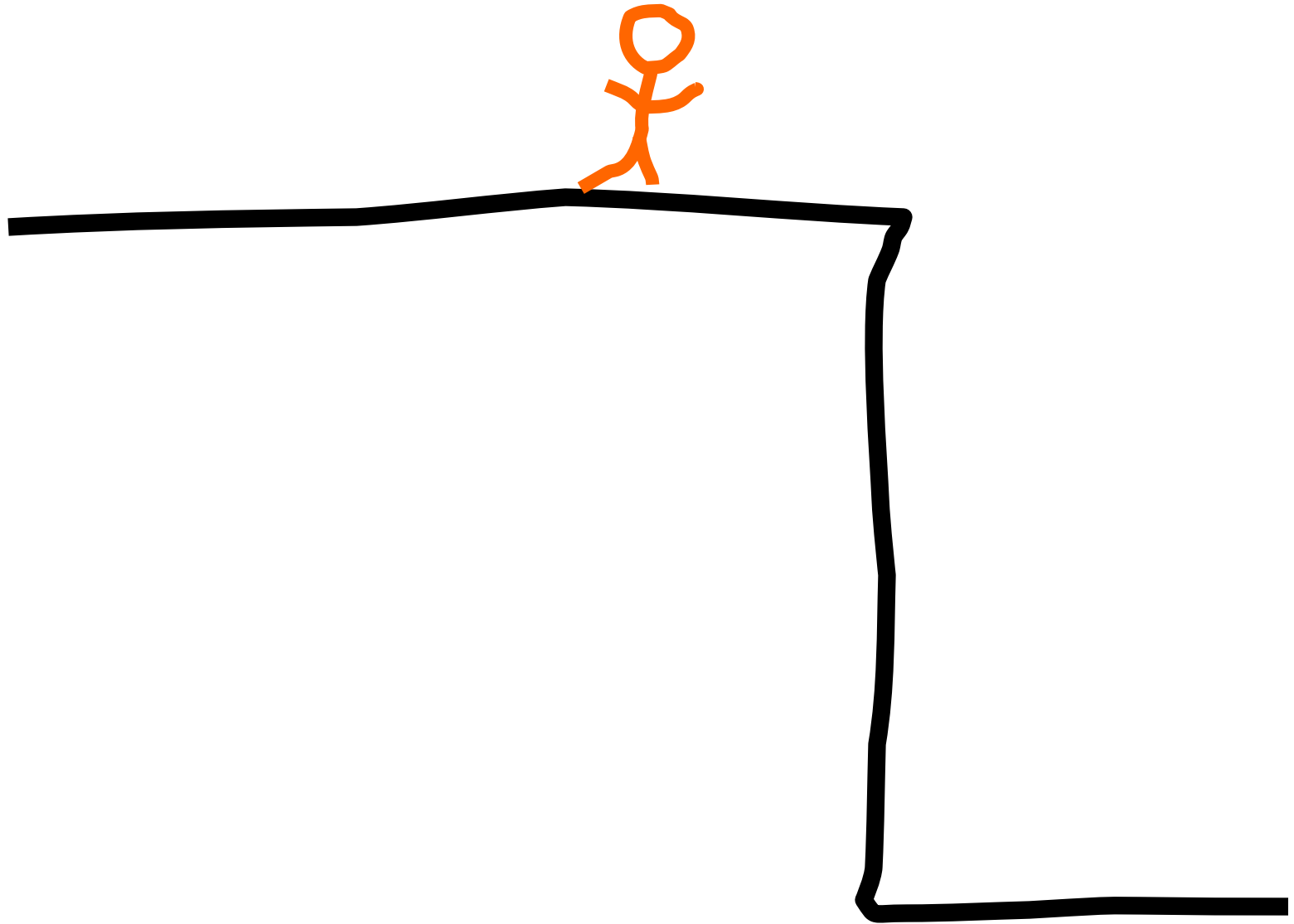
American Association of Public Health Physicians

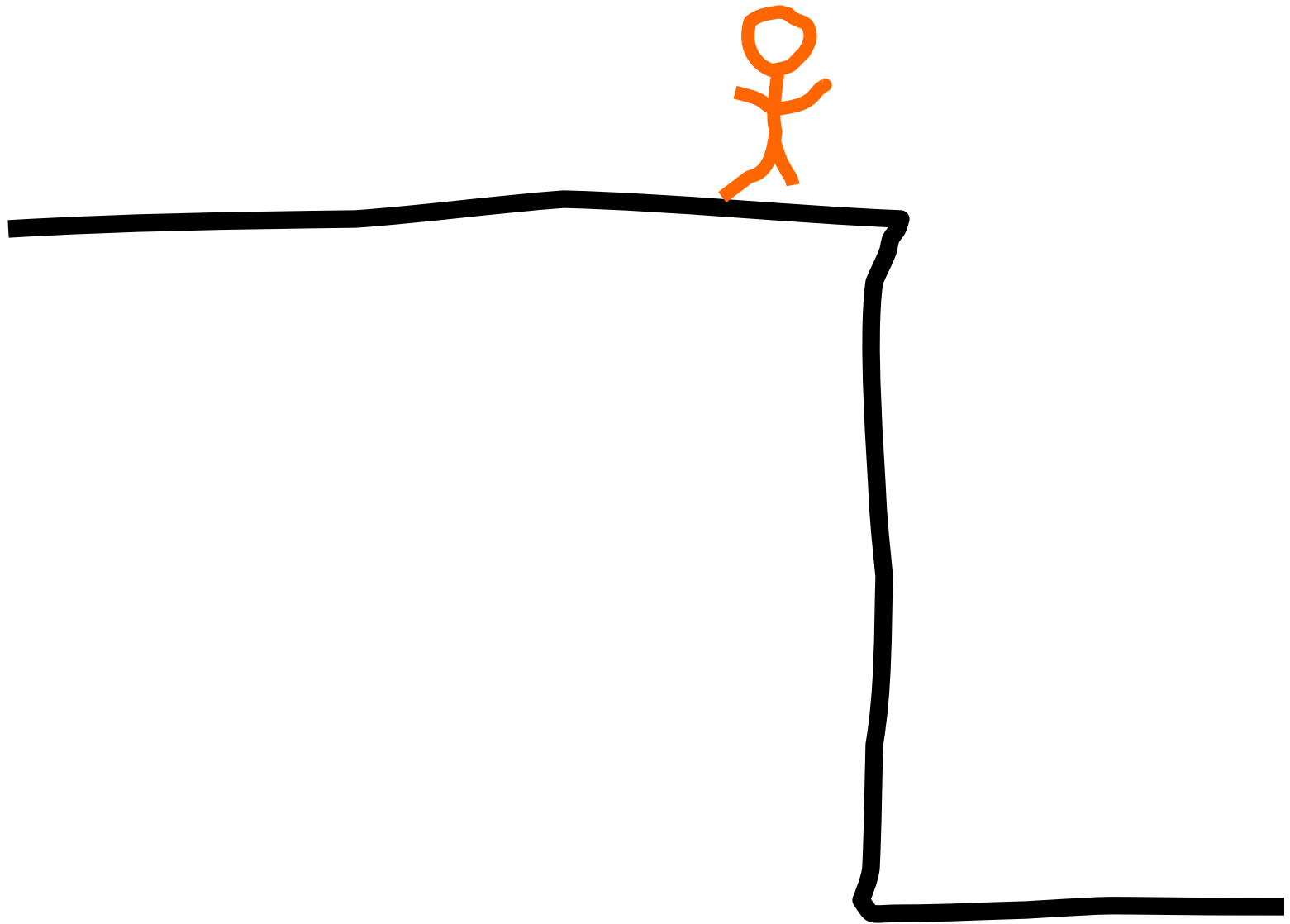
*Orlando, Florida
November 11, 2016*

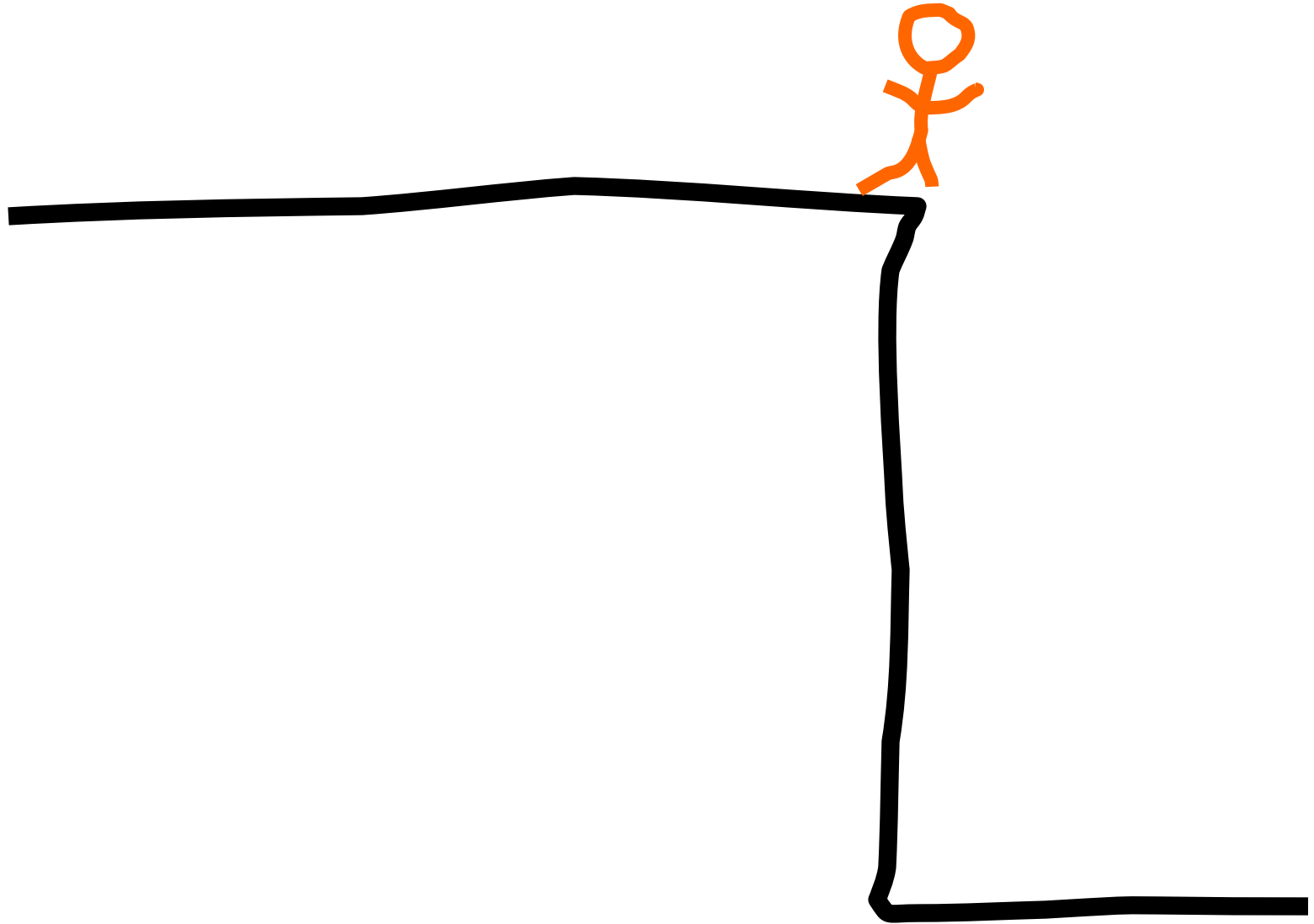
Levels of health intervention

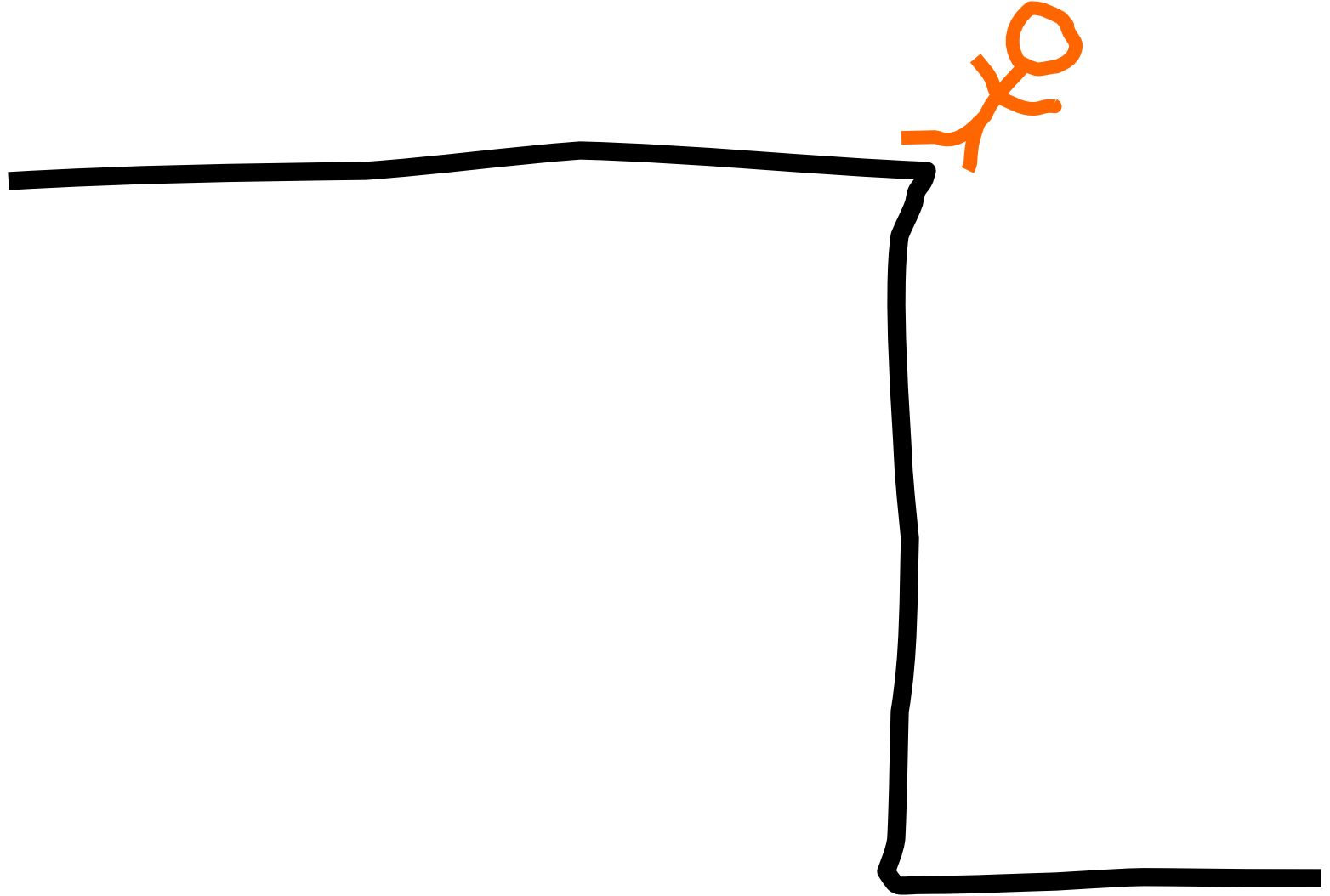


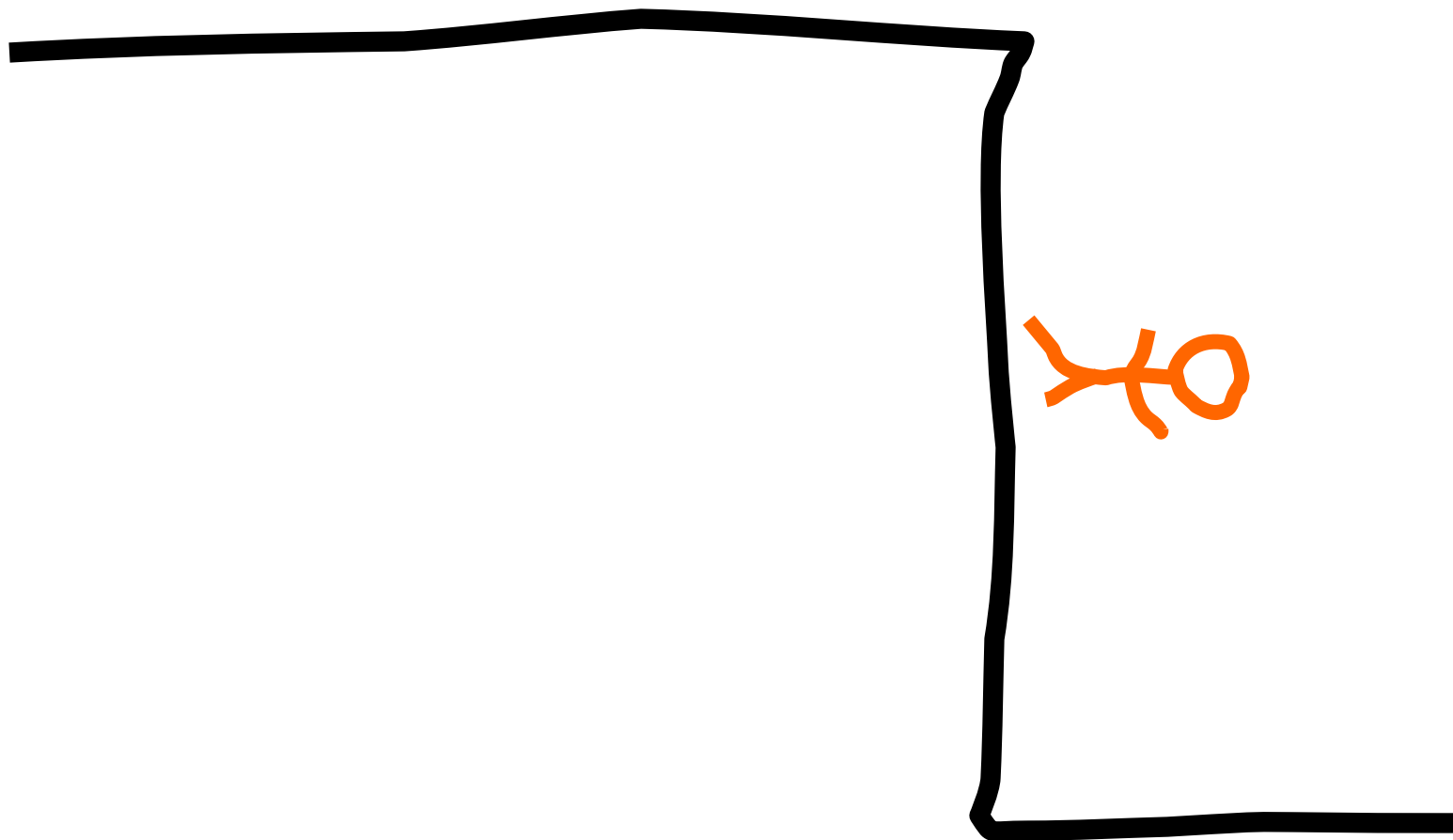


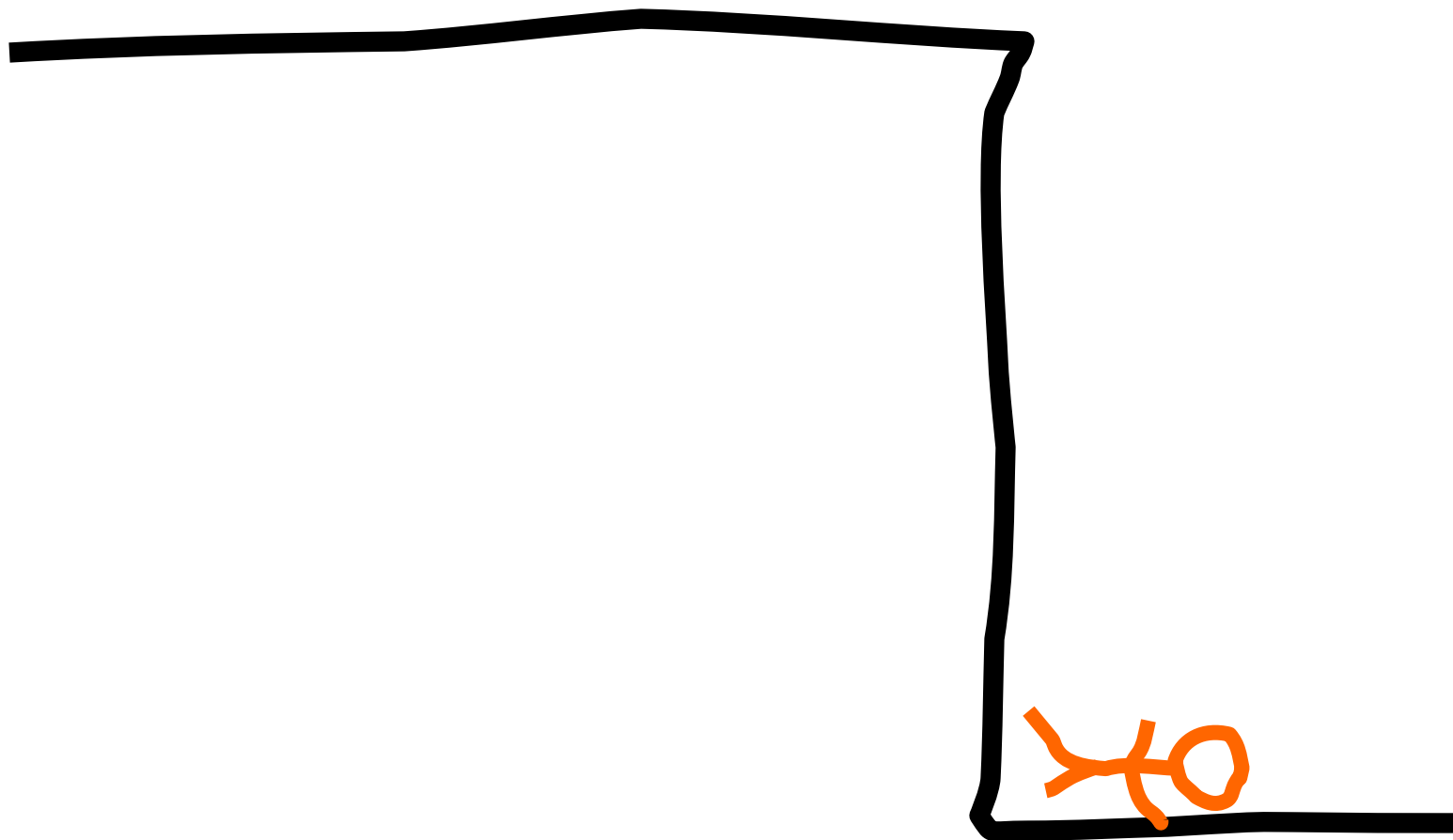


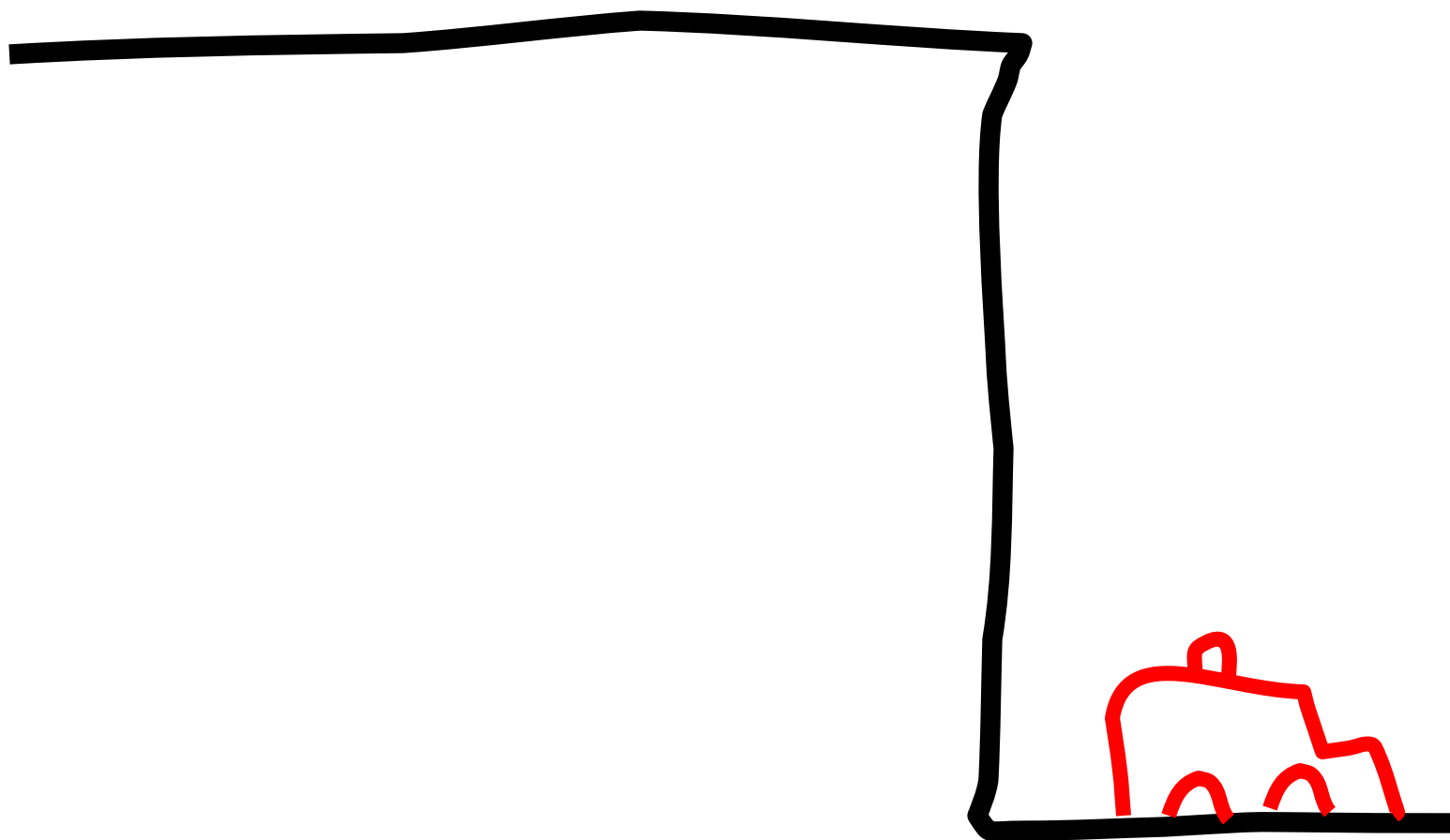


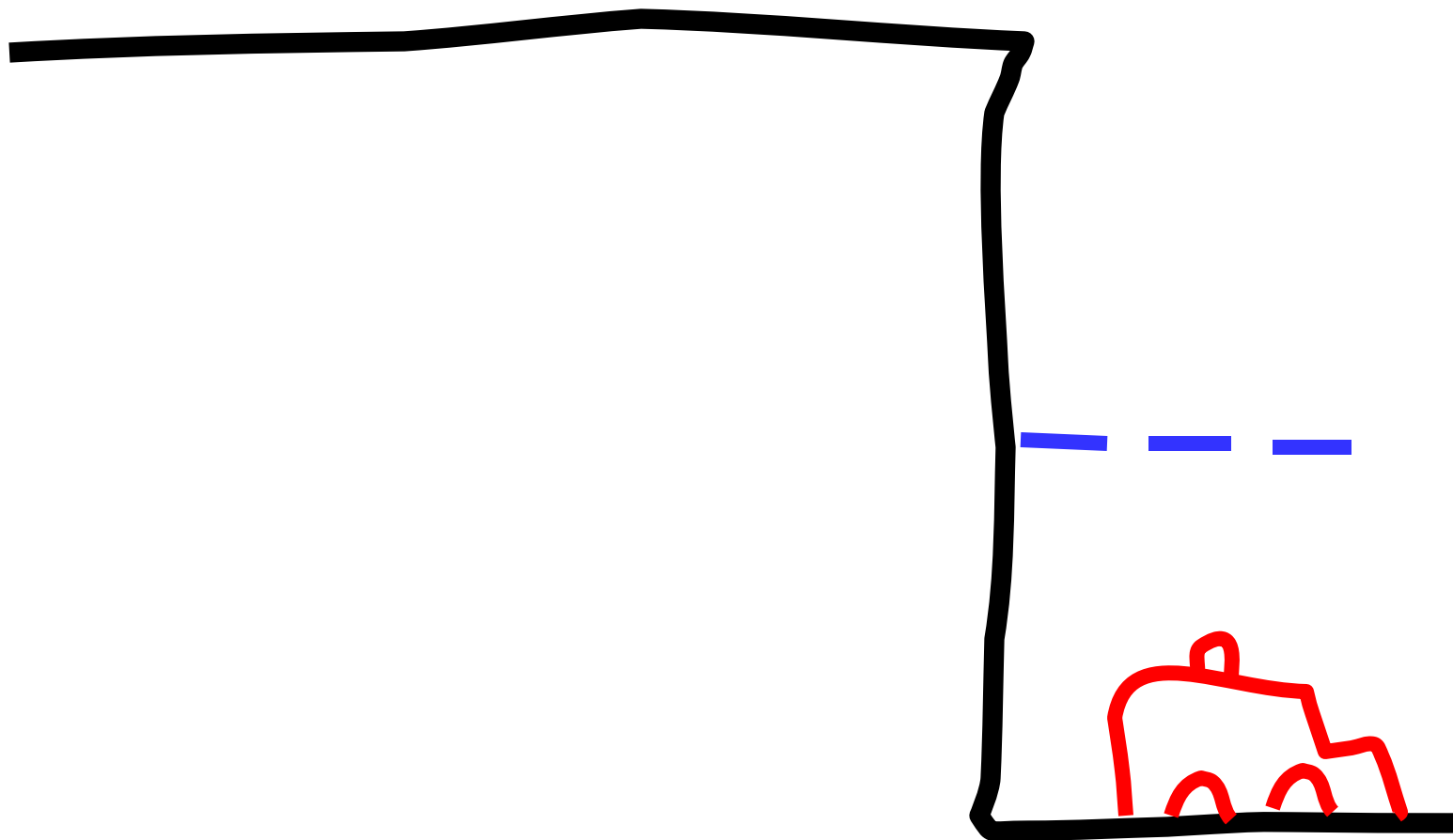


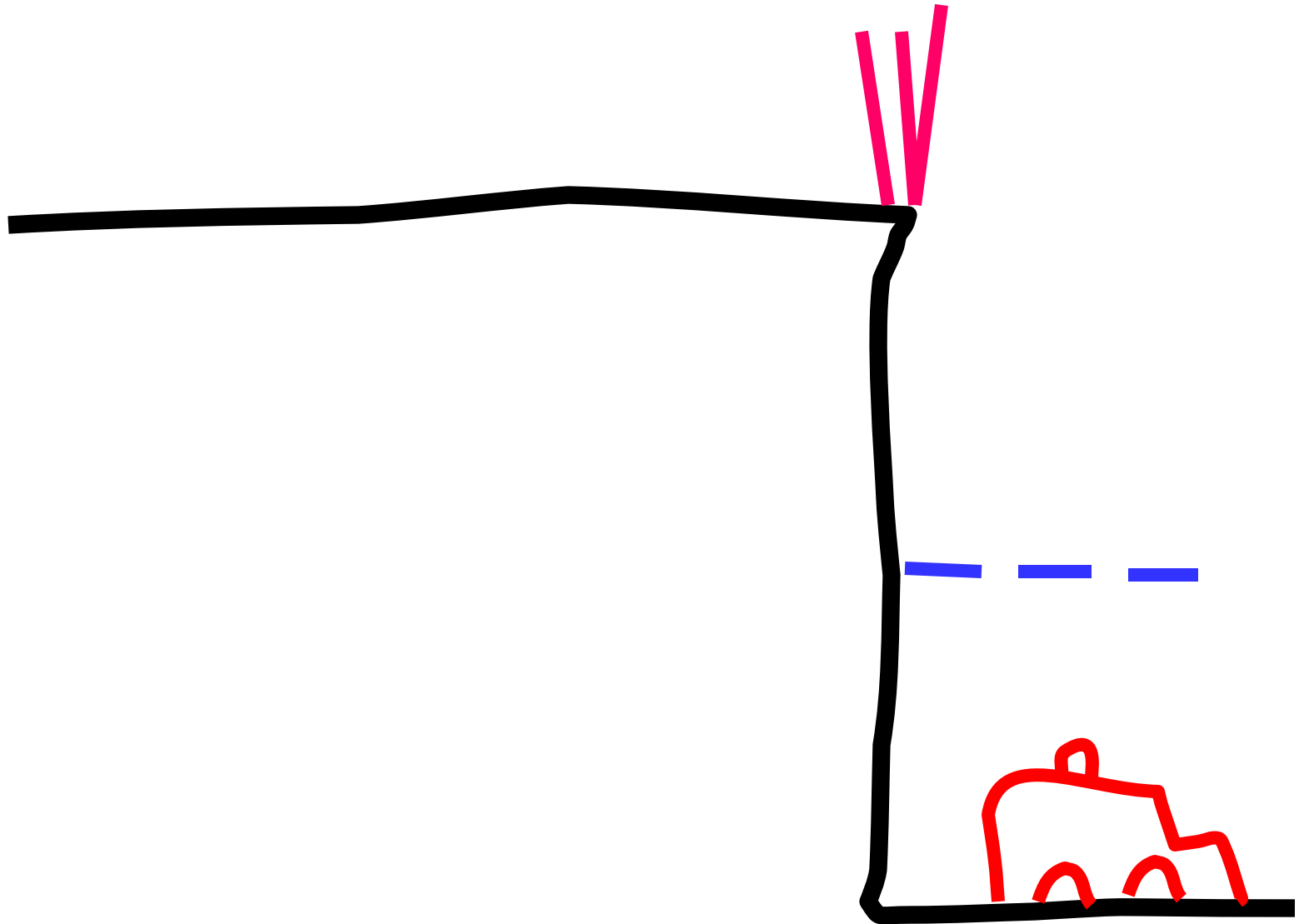


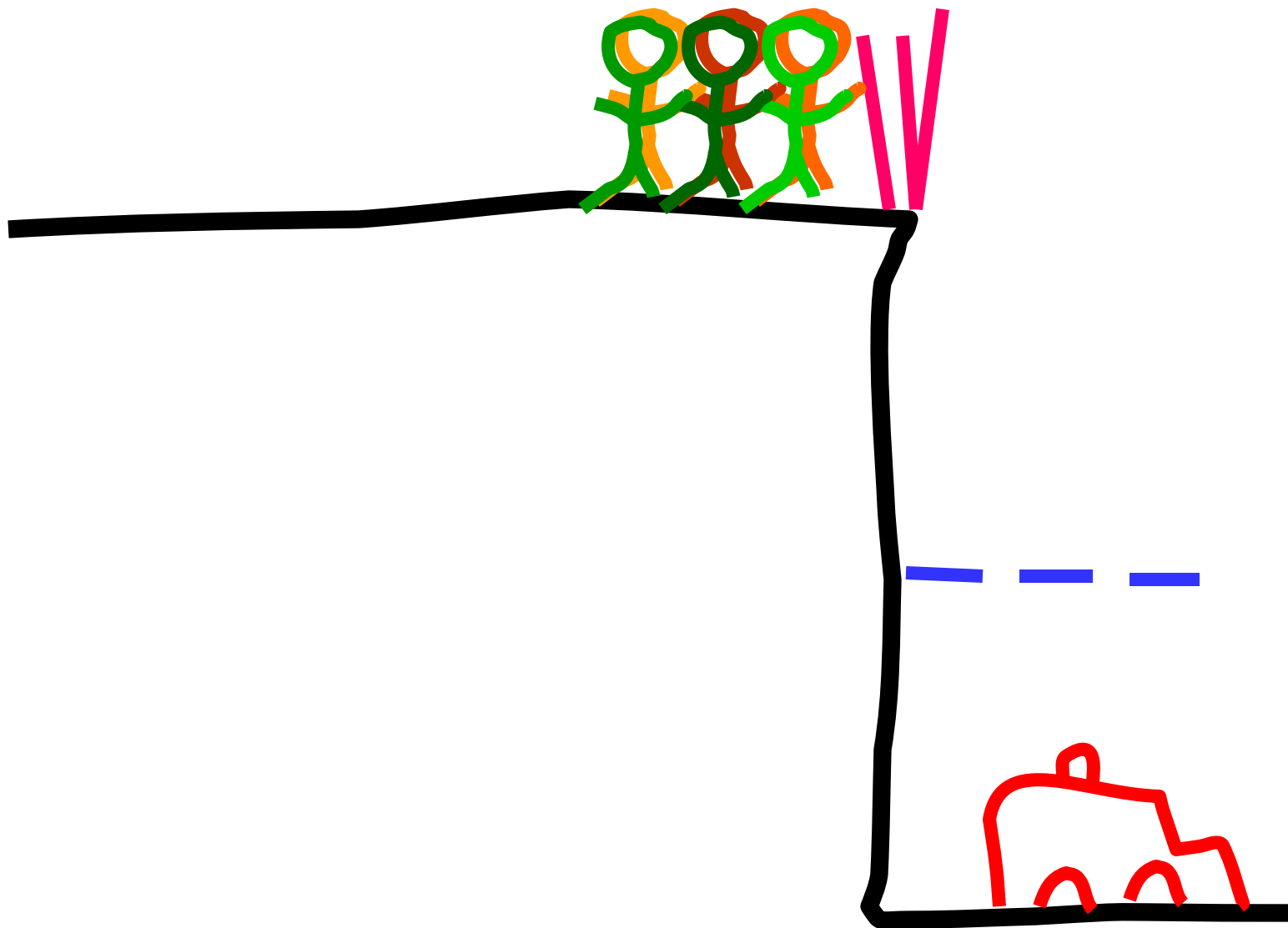


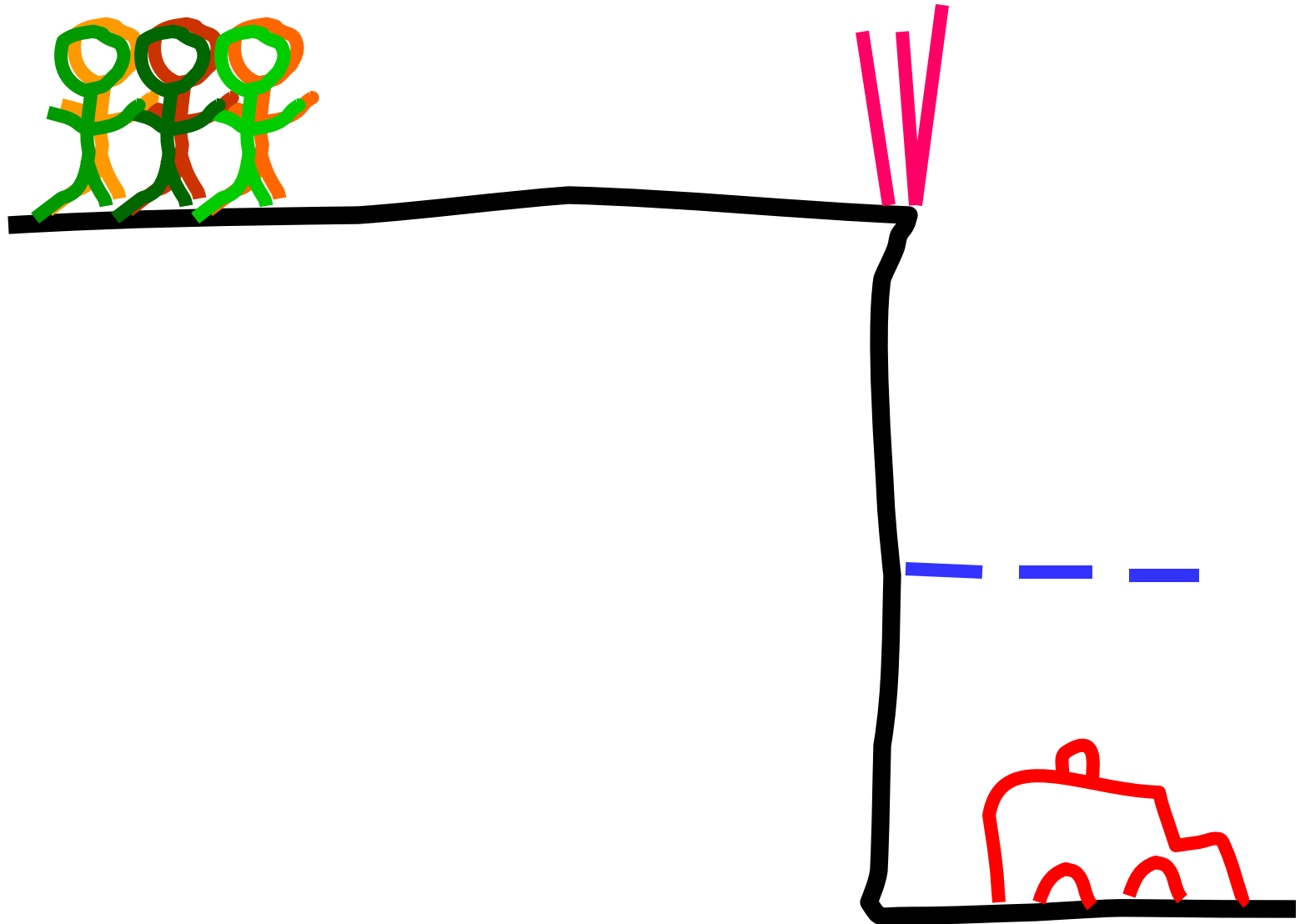


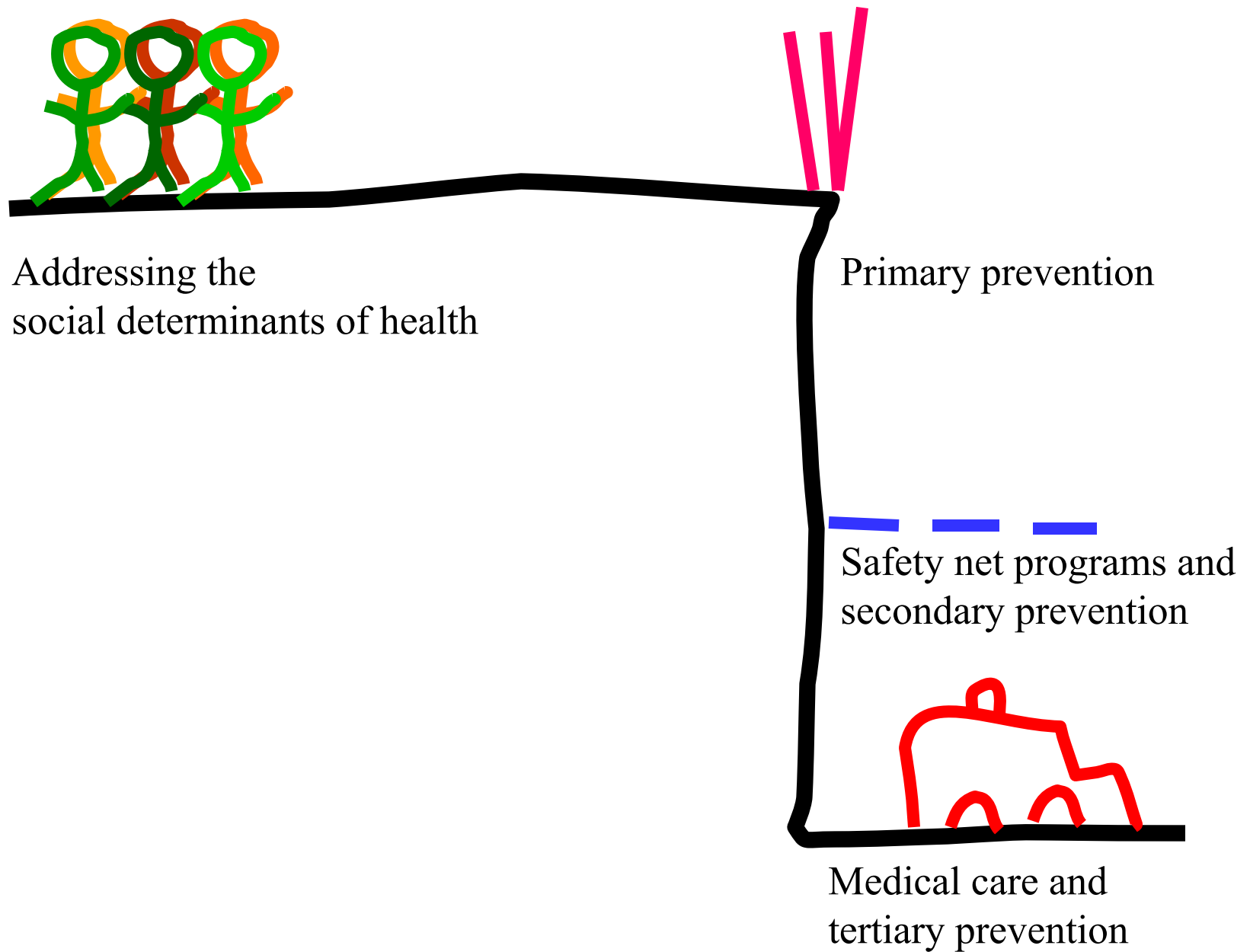












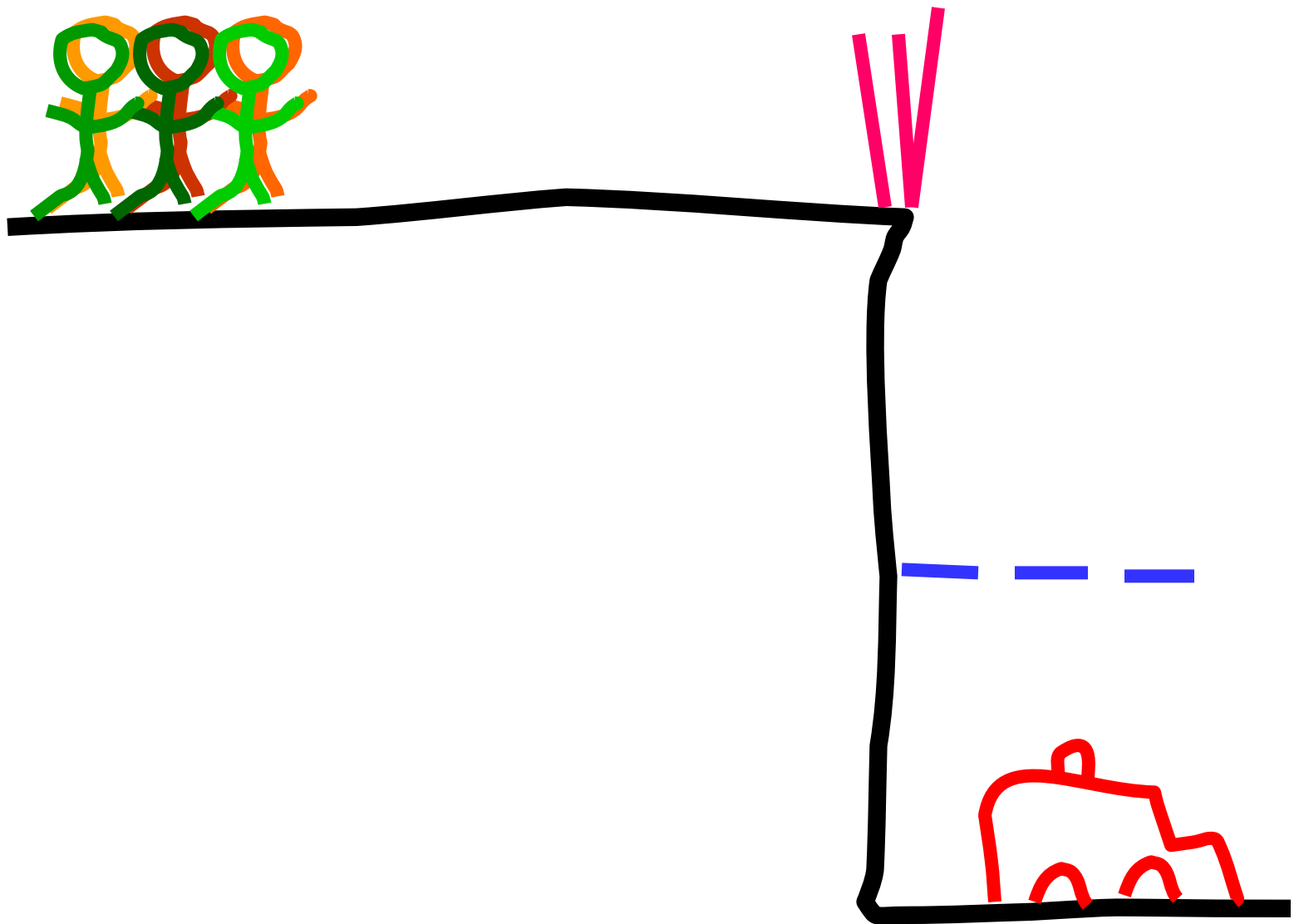
But how do disparities arise?

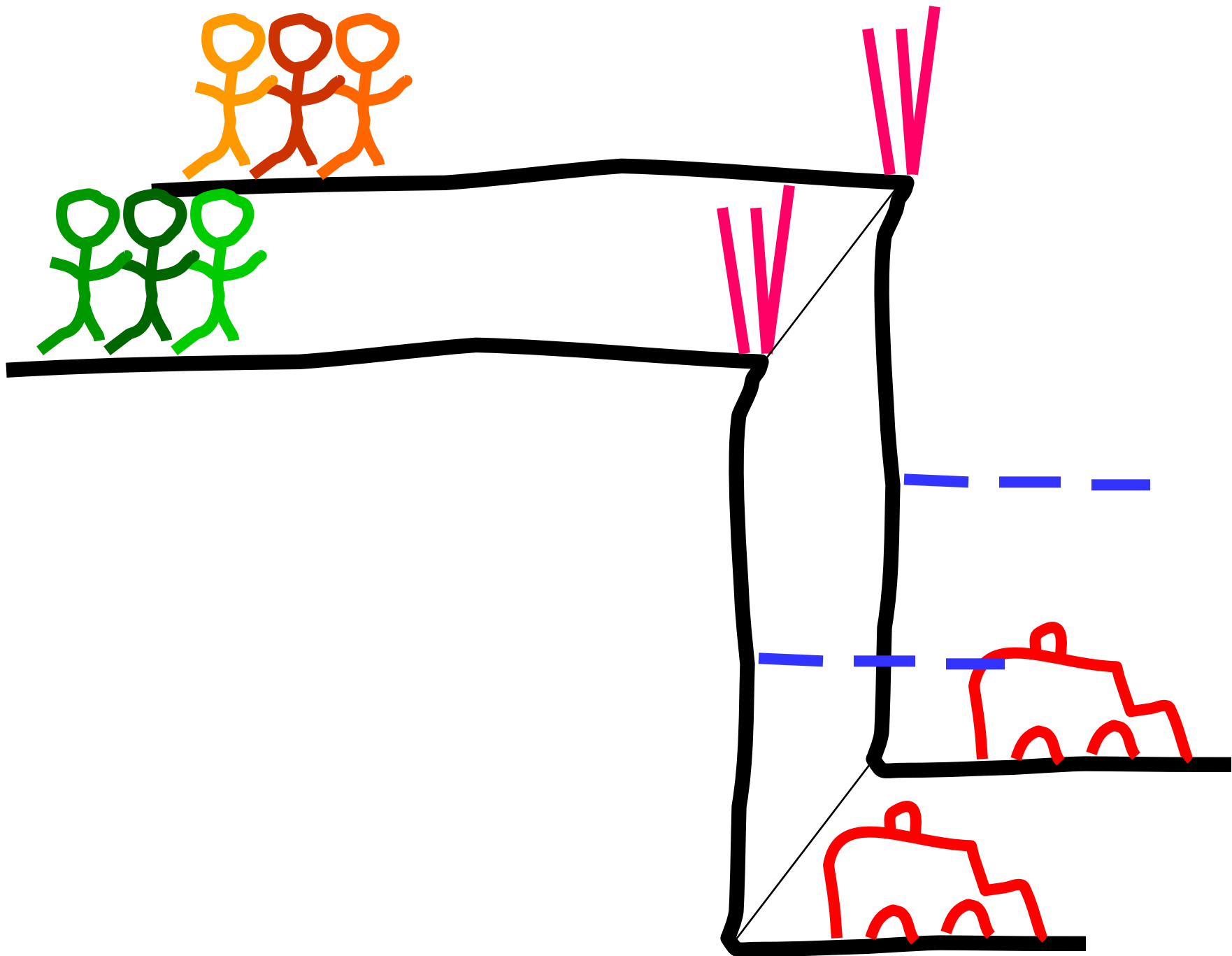
- ❑ Differences in the quality of care received within the health care system**
- ❑ Differences in access to health care, including preventive and curative services**
- ❑ Differences in life opportunities, exposures, and stresses that result in differences in underlying health status**

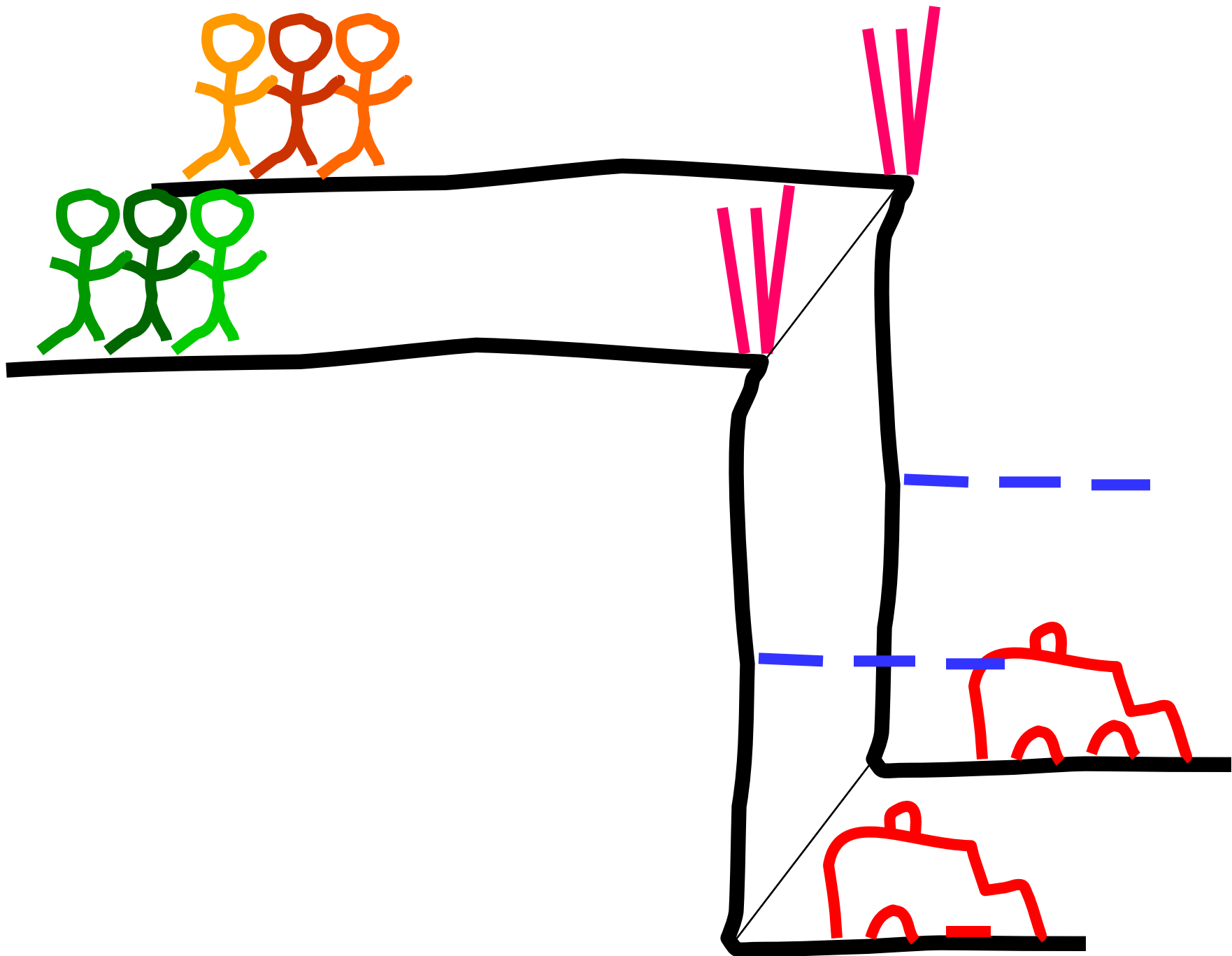
Phelan JC, Link BG, Tehranifar P. Social Conditions as Fundamental Causes of Health Inequalities. *J Health Soc Behav* 2010;51(S):S28-S40.

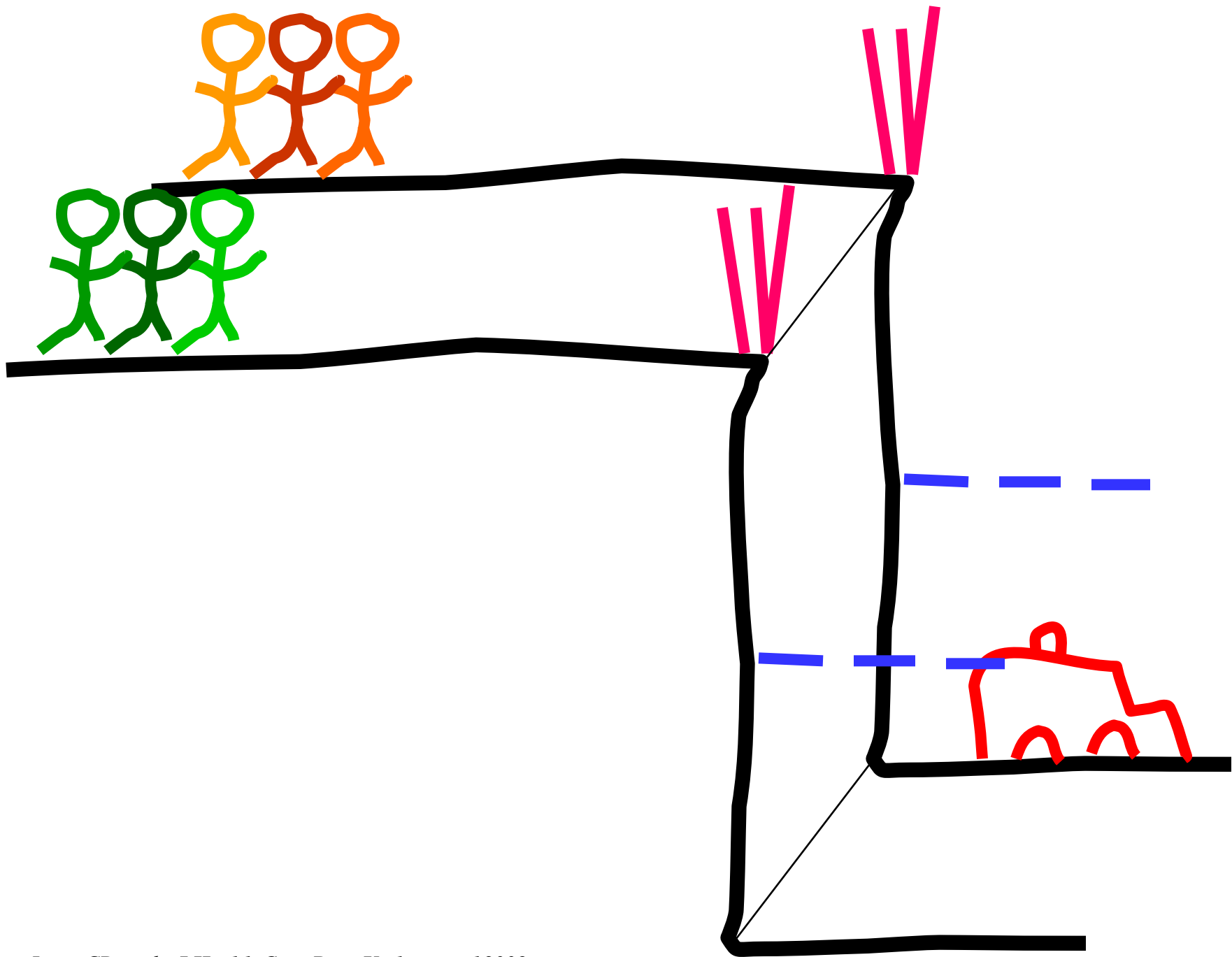
Byrd WM, Clayton LA. *An American Health Dilemma: Race, Medicine, and Health Care in the United States, 1900-2000*. New York, NY: Routledge, 2002.

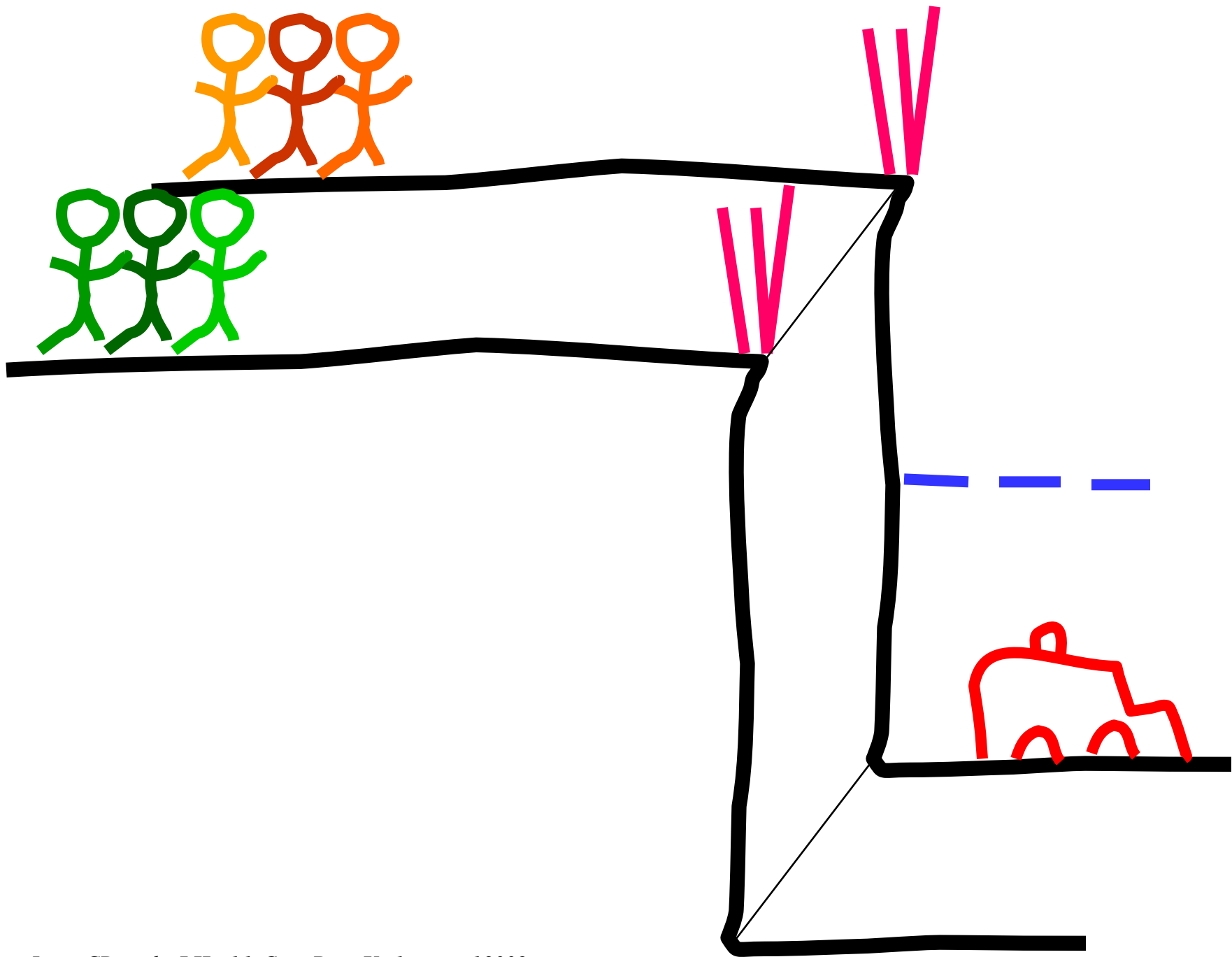
Smedley BD, Stith AY, Nelson AR (editors). *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care*. Washington, DC: The National Academies Press, 2002.

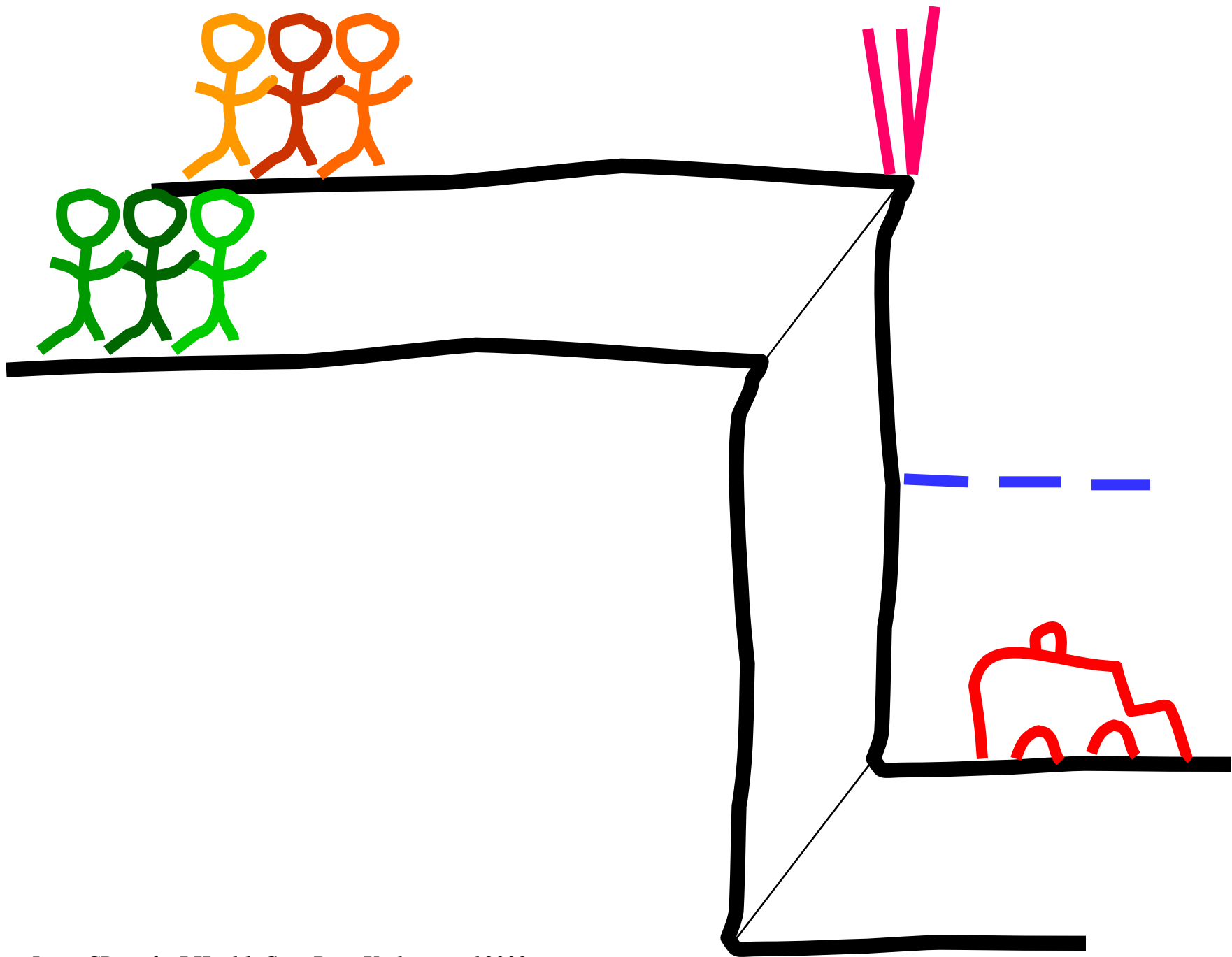


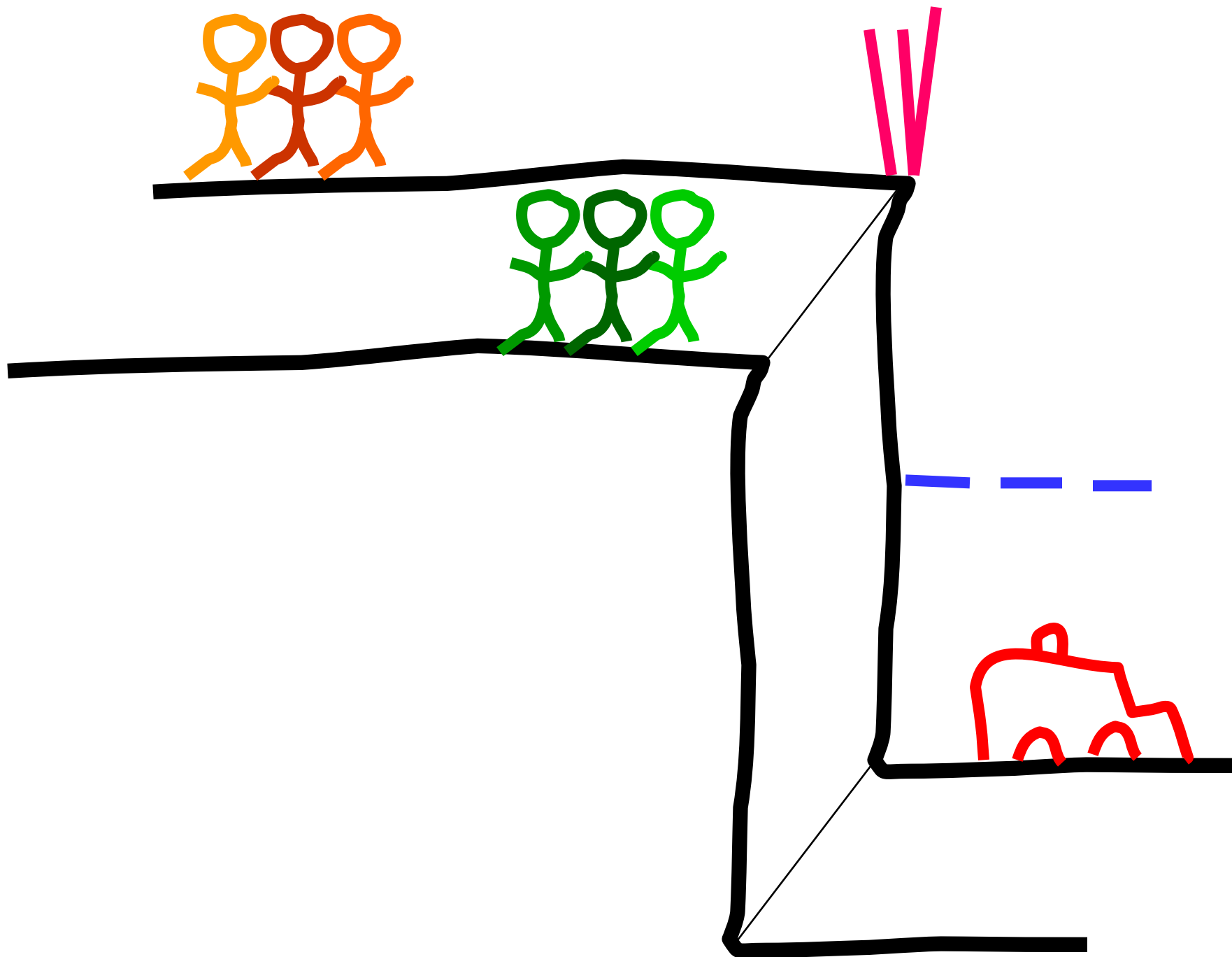


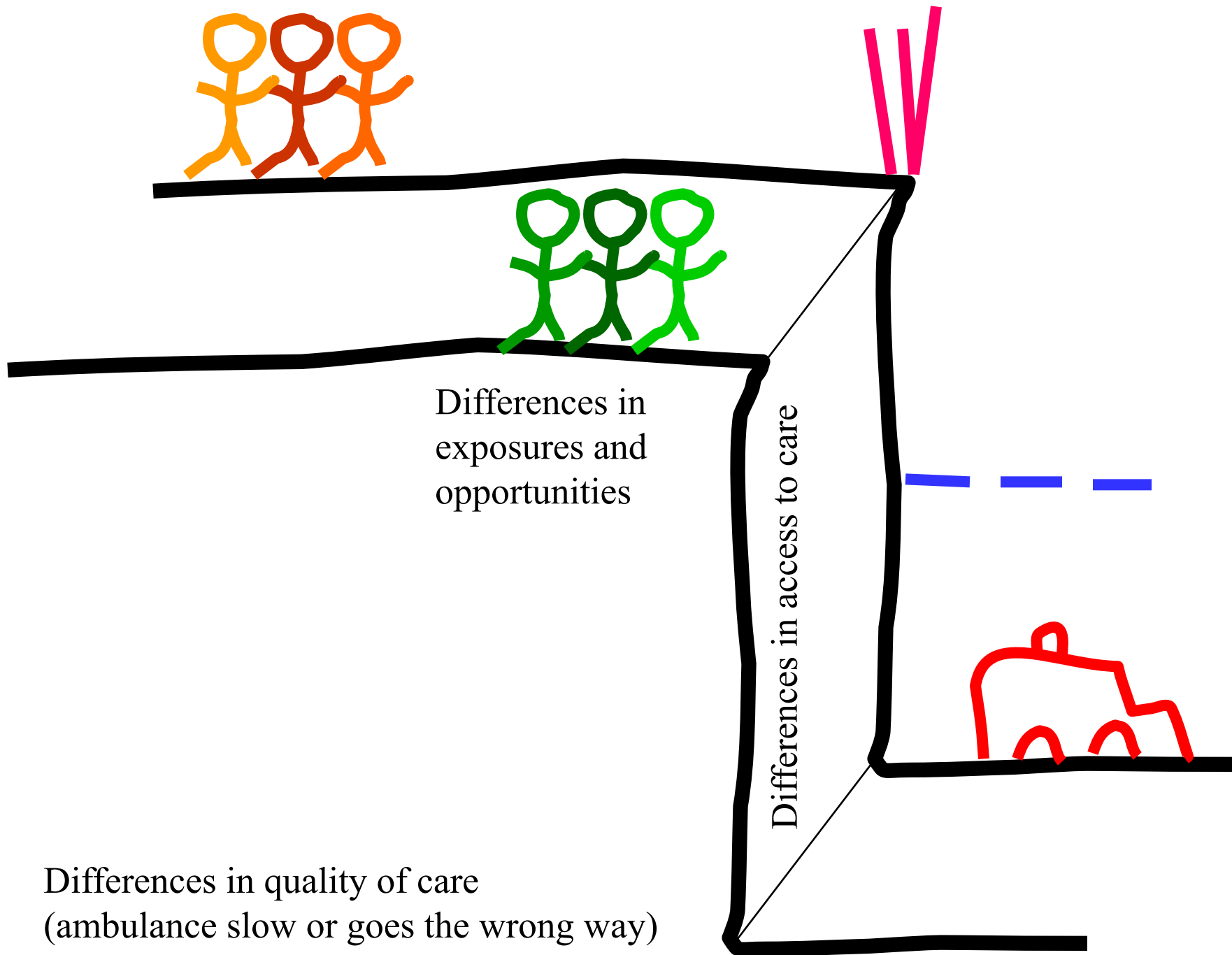


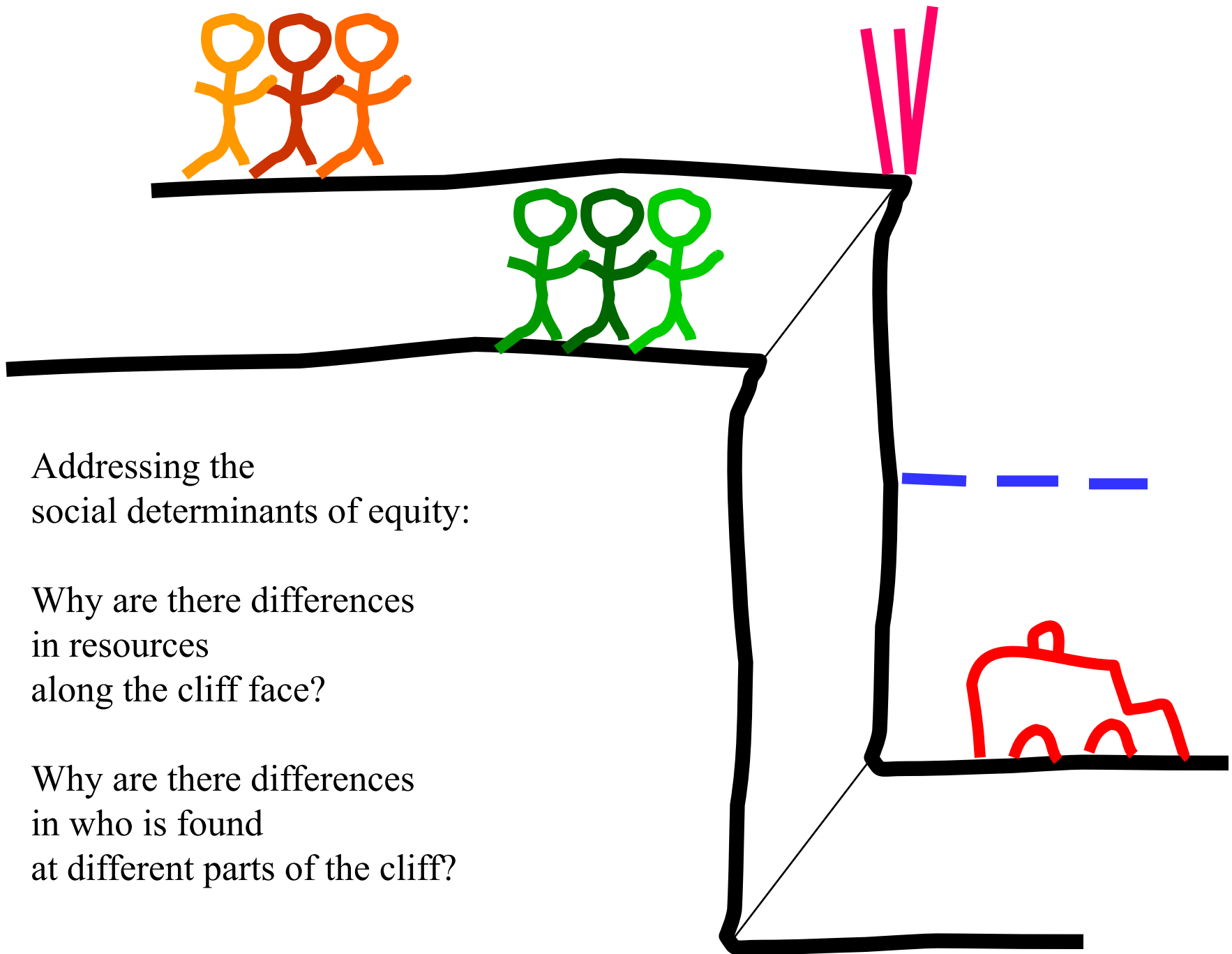












Addressing the
social determinants of equity:

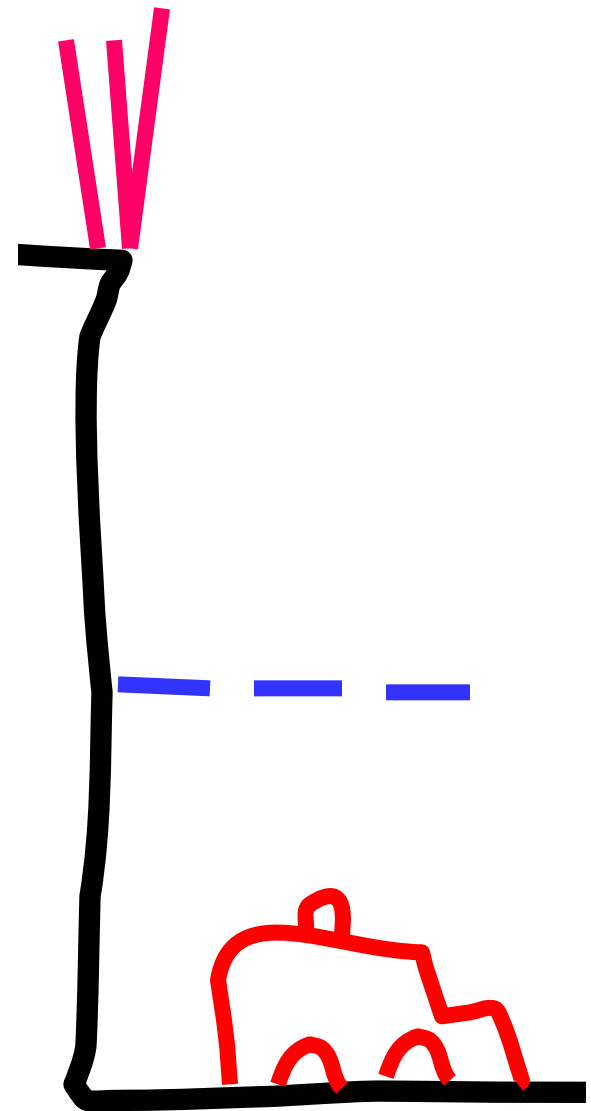
Why are there differences
in resources
along the cliff face?

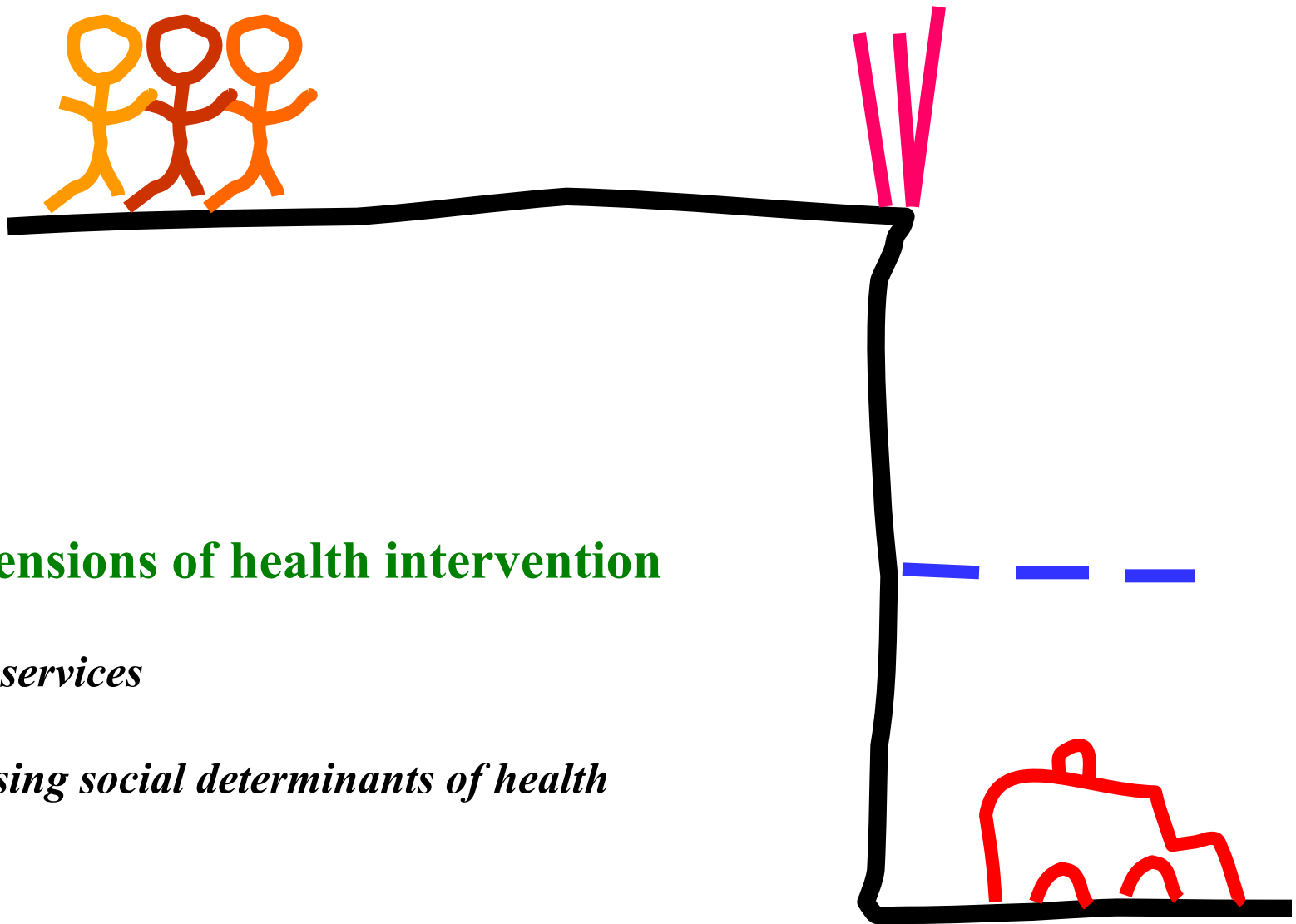
Why are there differences
in who is found
at different parts of the cliff?

3 dimensions of health intervention

3 dimensions of health intervention

Health services

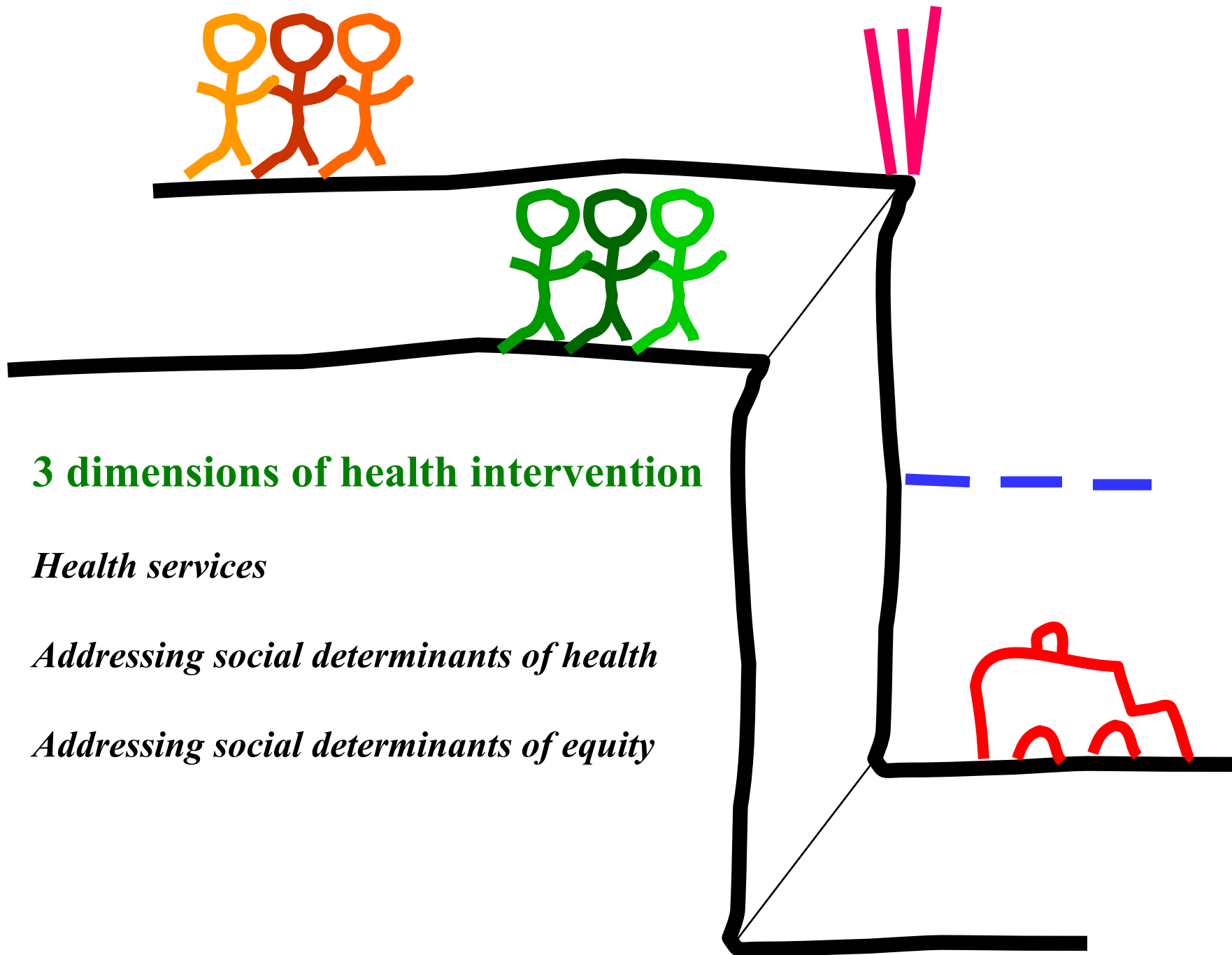




3 dimensions of health intervention

Health services

Addressing social determinants of health



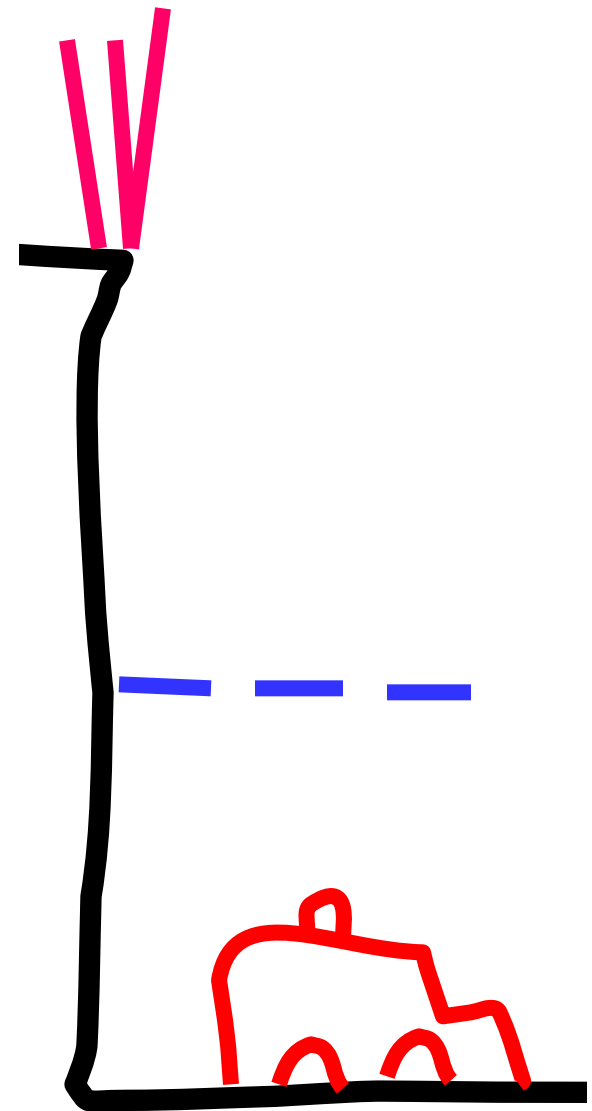
The best way to keep your children safe from injury or death from guns is to NEVER have a gun in the home:

Do not purchase a gun, especially a handgun.

Remove all guns present in the home.

Find out if there are guns in the homes where your children play.

If so, talk to the adults in the house about the dangers of guns to their families.



*For those who know the danger of guns
but still keep a gun in the home:*

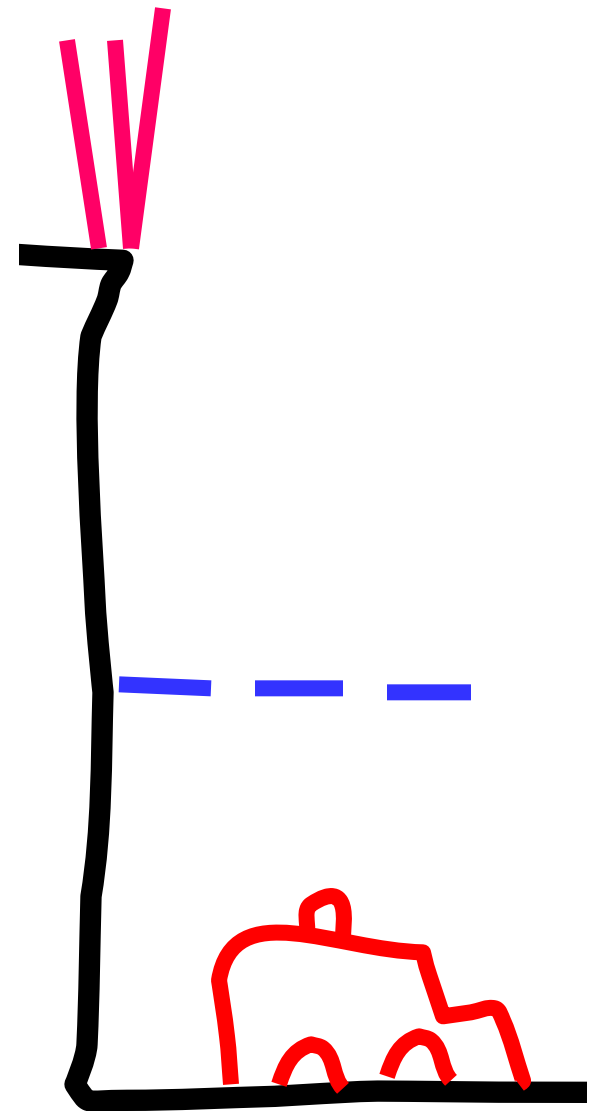
**Always keep the gun unloaded and locked
up.**

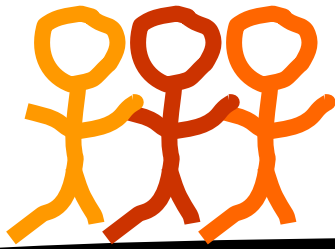
**Lock and store the bullets in a separate
place.**

**Make sure to hide the keys to the locked
boxes.**

Equip guns with trigger locks.

**Let your children know that risks of gun
injuries may exist in places they visit and
play:**





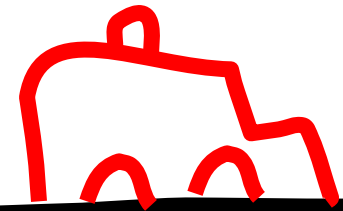
Implement gun control legislation:

Ban assault weapons and high-capacity ammunition magazines.

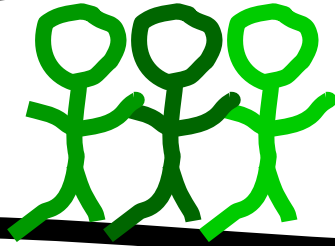
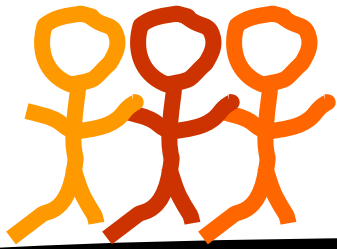
Regulate handguns and handgun ammunition.

Restrict handgun ownership.

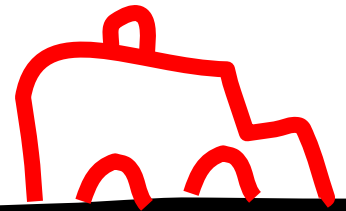
Reduce the number of privately owned handguns.



American Academy of Pediatrics



[No specific recommendations at this level.]



American Academy of Pediatrics

What is racism?

A system

What is racism?

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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A system of structuring opportunity and assigning value based on the social interpretation of how one looks (which is what we call “race”), that

- Unfairly disadvantages some individuals and communities

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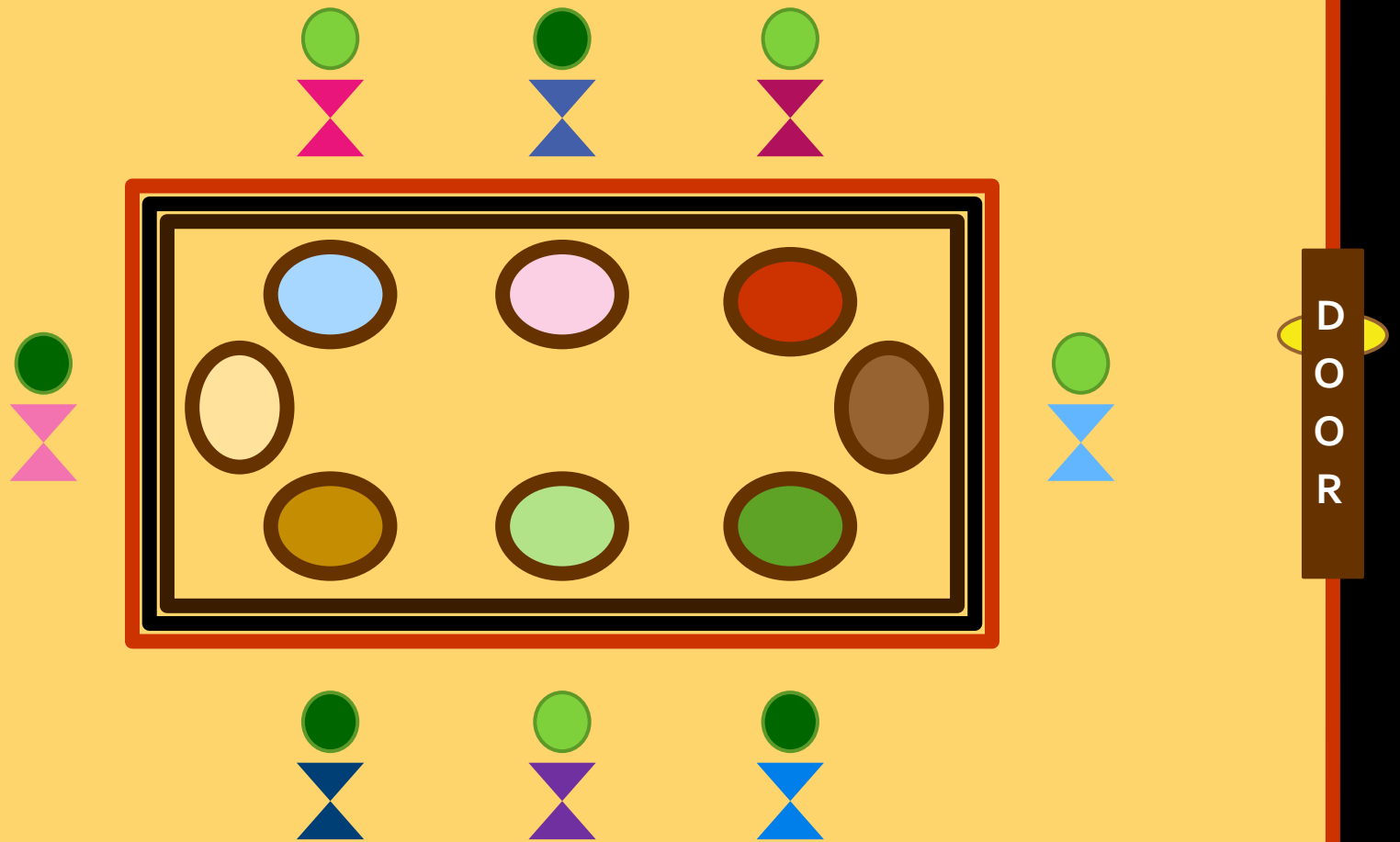
What is racism?

A system of structuring opportunity and assigning value based on the social interpretation of how one looks (which is what we call “race”), that

- 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

Dual Reality: A restaurant saga





I looked up and noticed a sign . . .

OPEN

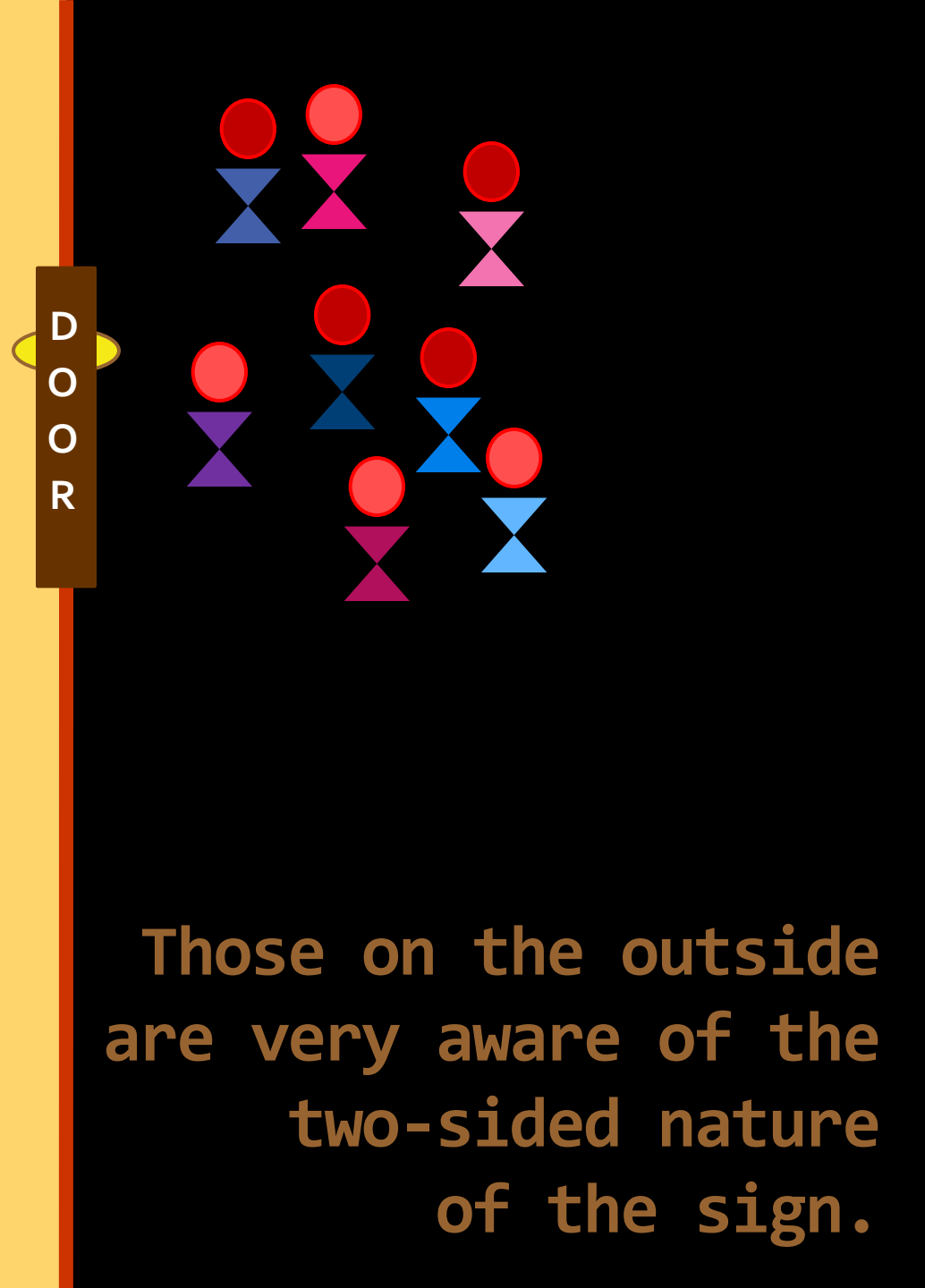


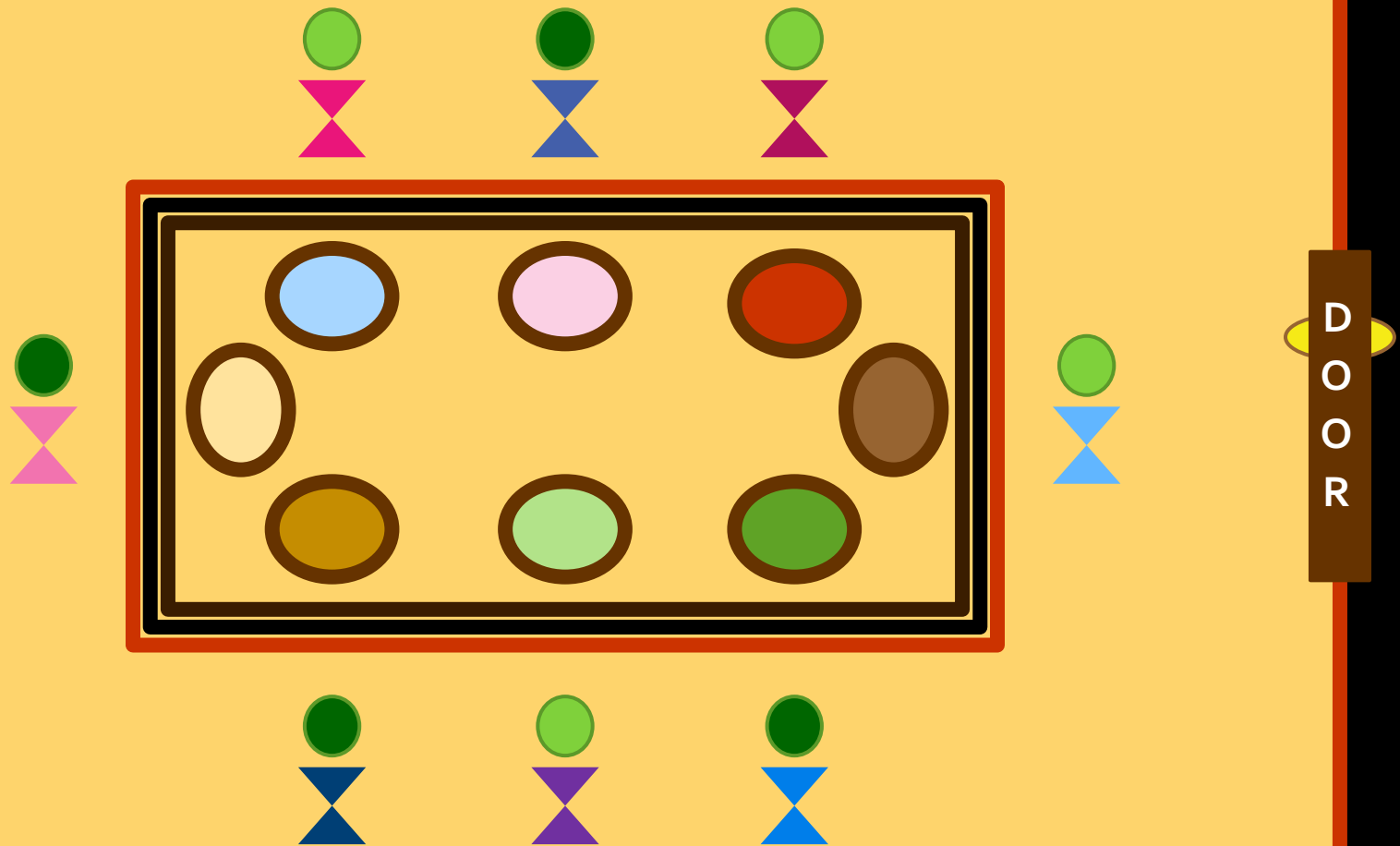


CLOSED



Racism structures “Open/Closed”
signs in our society.





Is there really a two-sided sign?

Hard to know, when only see “Open”.
A privilege not to HAVE to know.
Once DO know, can choose to act.

Levels of racism

- ❑ Institutionalized
- ❑ Personally-mediated
- ❑ Internalized

Institutionalized racism

- ❑ **Differential access to the goods, services, and opportunities of society, by “race”**
- ❑ **Examples**
 - Housing, education, employment, income
 - Medical facilities
 - Clean environment
 - Information, resources, voice
- ❑ **Explains the association between social class and “race”**

Personally-mediated racism

- ❑ **Differential assumptions about the abilities, motives, and intents of others, by “race”**
- ❑ **Differential actions based on those assumptions**

- ❑ **Prejudice and discrimination**
- ❑ **Examples**
 - Police brutality
 - Physician disrespect
 - Shopkeeper vigilance
 - Waiter indifference
 - Teacher devaluation

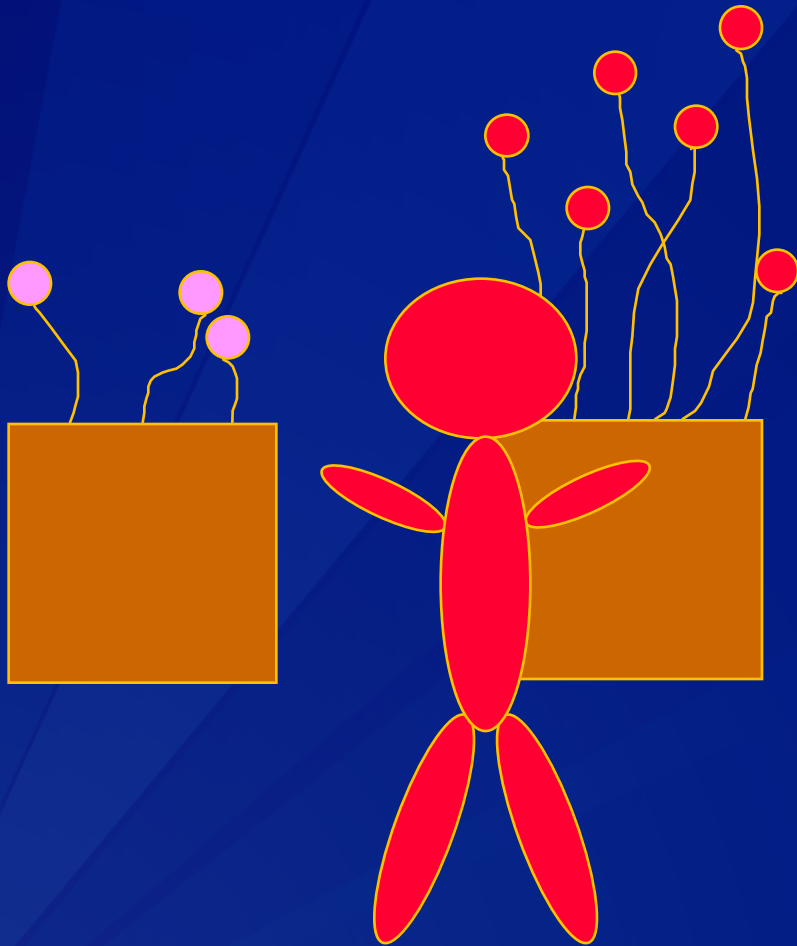
Internalized racism

- ❑ **Acceptance by the stigmatized “races” of negative messages about our own abilities and intrinsic worth**
- ❑ **Examples**
 - Self-devaluation
 - White man’s ice is colder
 - Resignation, helplessness, hopelessness
- ❑ **Accepting limitations to our full humanity**

Levels of Racism: A Gardener's Tale

Jones CP. Levels of Racism: A Theoretic Framework and a Gardener's Tale. *Am J Public Health* 2000;90(8):1212-1215.

Who is the gardener?



- Power to decide
- Power to act
- Control of resources

■ **Dangerous when**

- Allied with one group
- Not concerned with equity

“How is racism operating here?”

□ Identify mechanisms

- **Structures:** the *who?*, *what?*, *when?*, and *where?* of decision-making
- **Policies:** the written *how?*
- **Practices and norms:** the unwritten *how?*
- **Values:** the *why?*

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What is *[inequity]* ?

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

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

- Unfairly disadvantages some individuals and communities
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Many axes of inequity

- ❑ “Race”**
- ❑ Gender**
- ❑ Ethnicity**
- ❑ Labor roles and social class markers**
- ❑ Nationality, language, and legal status**
- ❑ Sexual orientation**
- ❑ Disability status**
- ❑ Geography**
- ❑ 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**

Barriers to achieving health equity

❑ **A-historical culture**

- The present as disconnected from the past
- Current distribution of advantage/disadvantage as happenstance
- Systems and structures as givens and immutable

❑ **Narrow focus on the individual**

- Self-interest narrowly defined
- Limited sense of interdependence
- Limited sense of collective efficacy
- Systems and structures as invisible or irrelevant

❑ **Myth of meritocracy**

- Role of hard work
- Denial of racism
- Two babies: Equal potential or equal opportunity?

ICERD

- ❑ *International Convention on the Elimination of all forms of Racial Discrimination*

International anti-racism treaty adopted by the UN General Assembly in 1965

<http://www.ohchr.org/EN/ProfessionalInterest/Pages/CERD.aspx>

- ❑ US signed in 1966
- ❑ US ratified in 1994

Current status

- ❑ **3rd US report submitted to the UN Committee on the Elimination of Racial Discrimination (CERD) in 2013**
http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CERD%2fC%2fUSA%2f7-9&Lang=en
- ❑ **82 parallel reports submitted by civil society organizations**
- ❑ **CERD considered at its 85th session (13-14 Aug 2014)**

CERD Concluding Observations

- ❑ **14-page document (25 Sep 2014) available online**
http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CERD%2fC%2fUSA%2fCO%2f7-9&Lang=en
- ❑ **Concerns and recommendations**
 - Racial profiling (paras 8 and 18)
 - Residential segregation (para 13)
 - Achievement gap in education (para 14)
 - Differential access to health care (para 15)
 - Disproportionate incarceration (para 20)

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- ❑ **Concerns and recommendations**
 - “The Committee recommends that the State party adopt a national action plan to combat structural racial discrimination” (para 25)
 - “The Committee recommends that the State party increase its efforts to raise public awareness and knowledge of the Convention throughout its territory” (para 32)

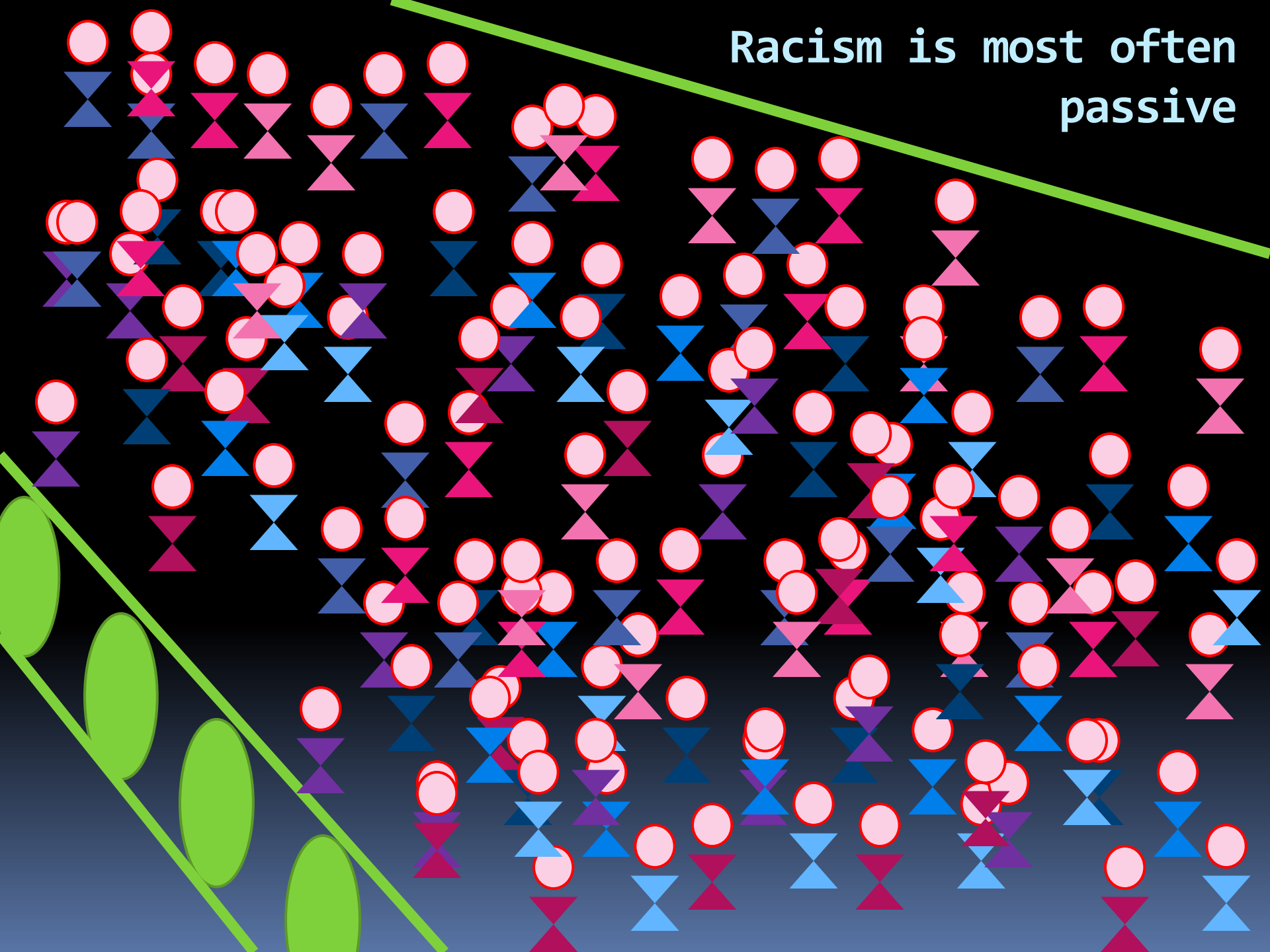
American Public Health Association National Campaign Against Racism

- ❑ **Active website: www.apha.org/racism**
- ❑ **Coming soon: Anti-Racism Collaborative with seven Collective Action Teams**
 - Communication and Dissemination
 - Education and Development
 - Global Matters
 - Liaison and Partnership
 - Organizational Excellence
 - Policy and Legislation
 - Science and Publications

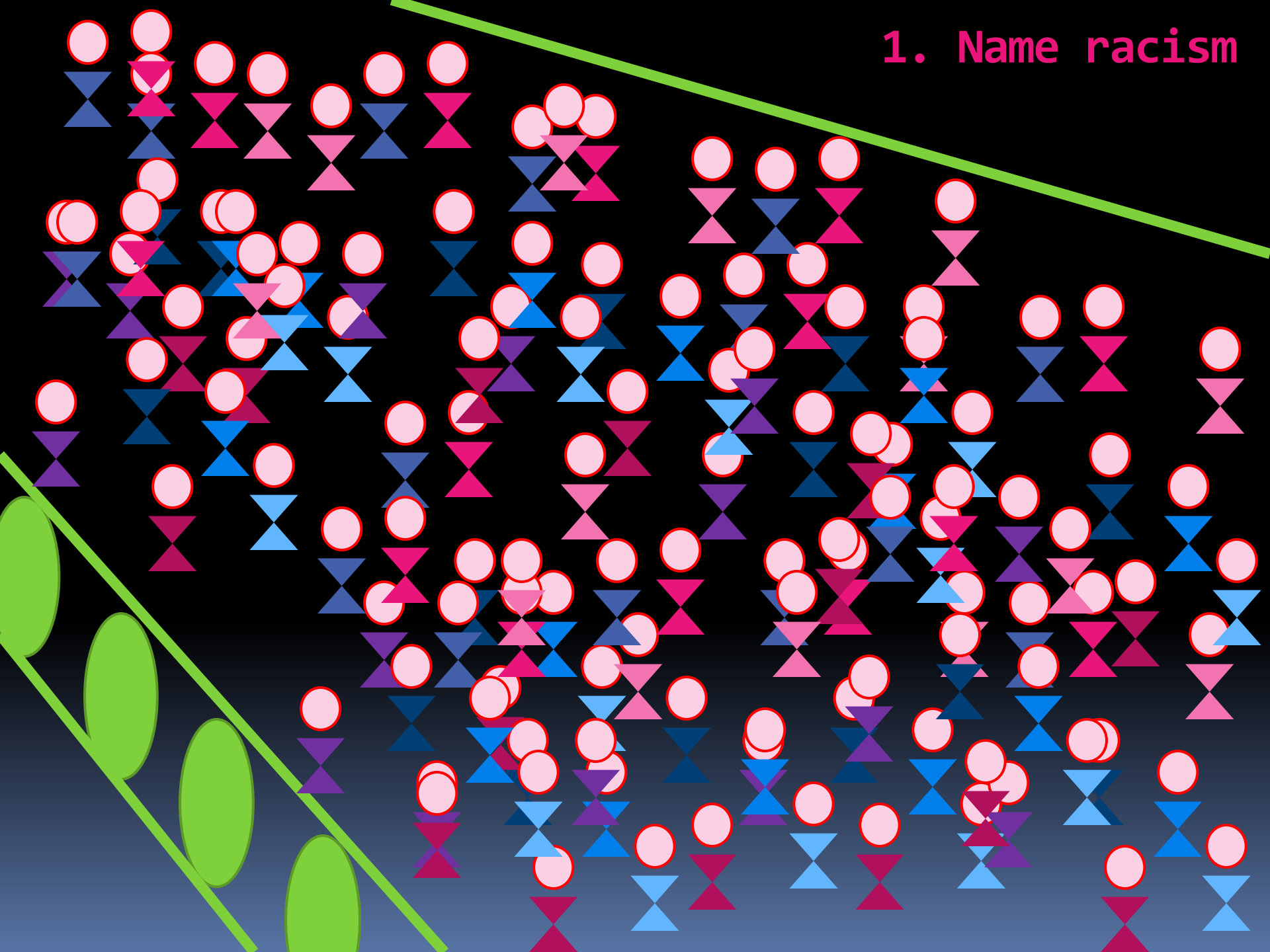


Life on a Conveyor Belt: Moving to action

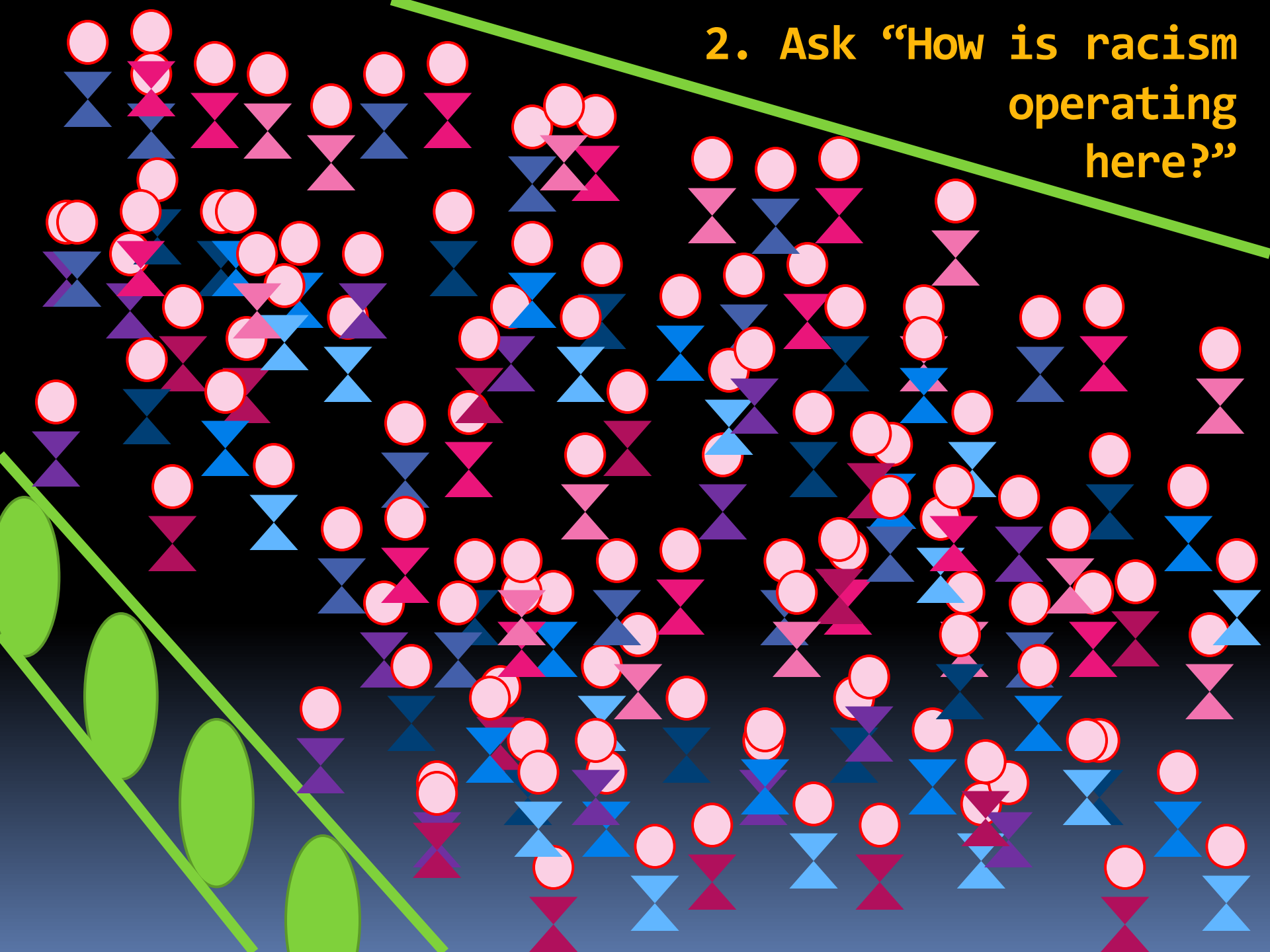
Racism is most often
passive



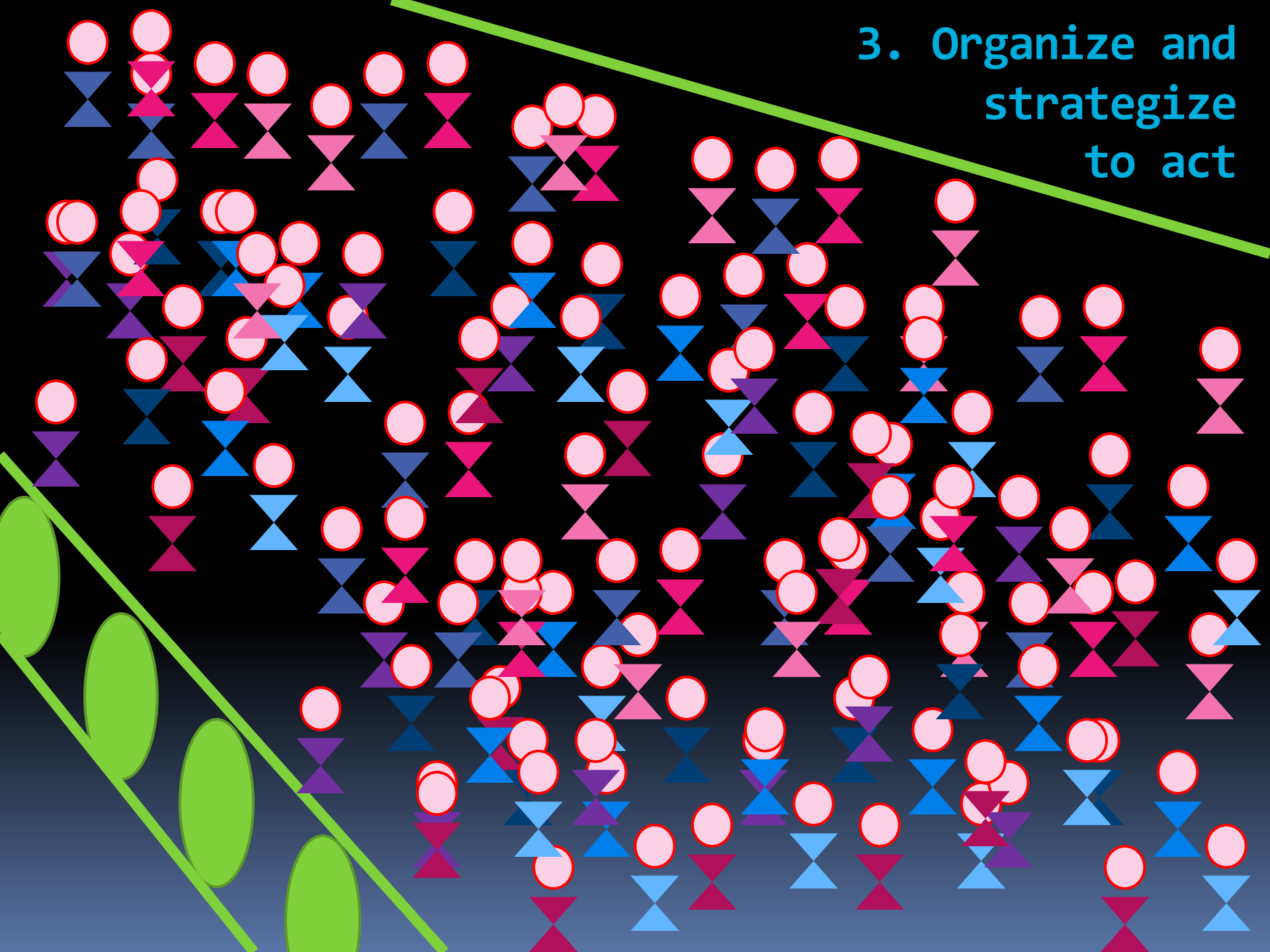
1. Name racism



2. Ask “How is racism operating here?”



3. Organize and strategize to act



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Strategies for achieving health equity

- ❑ **To change opportunity structures**
 - Understand the importance of history
 - Challenge the narrow focus on the individual
 - Expose the “myth of meritocracy”
 - Examine successful strategies from outside the US

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❑ To value all people equally

- Break out of bubbles to experience our common humanity
- Embrace ALL children as OUR children

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“Reactions to Race” module

- ❑ **Six-question optional module on the Behavioral Risk Factor Surveillance System since 2002**

“Reactions to Race” module

Question 1

❑ How do other people usually classify you in this country?
Would you say:

- White
- Black or African-American
- Hispanic or Latino
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native
- Some other group

- Don't know / Not sure
- Refused

“Reactions to Race” module

Question 2

- ❑ How often do you think about your race? Would you say:**
- Never
 - Once a year
 - Once a month
 - Once a week
 - Once a day
 - Once an hour
 - Constantly

 - Don't know / Not sure
 - Refused

“Reactions to Race” module

Question 3

- ❑ Within the past 12 months at work, do you feel you were treated worse than, the same as, or better than people of other races?**
 - Worse than other races
 - Same as other races
 - Better than other races

 - Worse than some races, better than others
 - Only encountered people of the same race
 - Don't know / Not sure
 - Refused

“Reactions to Race” module

Question 4

- ❑ Within the past 12 months when seeking health care, do you feel your experiences were worse than, the same as, or better than for people of other races?**
 - Worse than other races
 - Same as other races
 - Better than other races

 - Worse than some races, better than others
 - Only encountered people of the same race
 - No health care in past 12 months
 - Don't know / Not sure
 - Refused

“Reactions to Race” module

Question 5

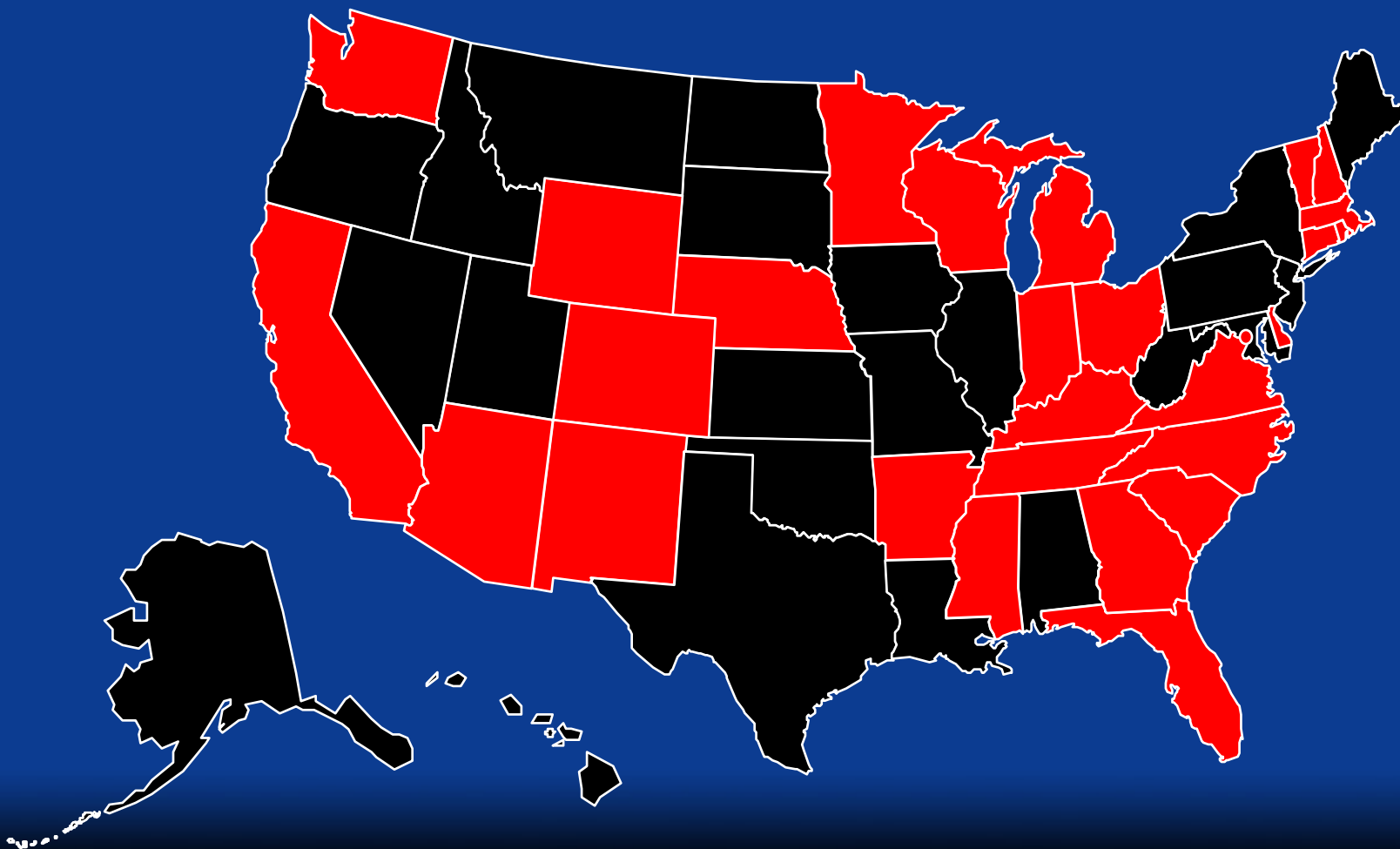
- ❑ Within the past 30 days, have you experienced any physical symptoms, for example a headache, an upset stomach, tensing of your muscles, or a pounding heart, as a result of how you were treated based on your race?**
 - Yes
 - No
 - Don't know / Not sure
 - Refused

“Reactions to Race” module

Question 6

- ❑ Within the past 30 days, have you felt emotionally upset, for example angry, sad, or frustrated, as a result of how you were treated based on your race?**
 - Yes
 - No
 - Don't know / Not sure
 - Refused

Jurisdictions using the “Reactions to Race” module 2002 to 2014 BRFSS



Arizona, Arkansas, California, Colorado, [Connecticut](#), Delaware, District of Columbia, Florida, Georgia, Indiana, Kentucky, [Massachusetts](#), Michigan, Minnesota, Mississippi, Nebraska, New Hampshire, New Mexico, North Carolina, Ohio, Rhode Island, South Carolina, [Tennessee](#), [Vermont](#), Virginia, [Washington](#), Wisconsin, Wyoming, Palau

[illegible]

[illegible]

Socially-assigned “race”

**□ How do other people usually classify you in this country?
Would you say:**

- White
- Black or African-American
- Hispanic or Latino
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native
- Some other group

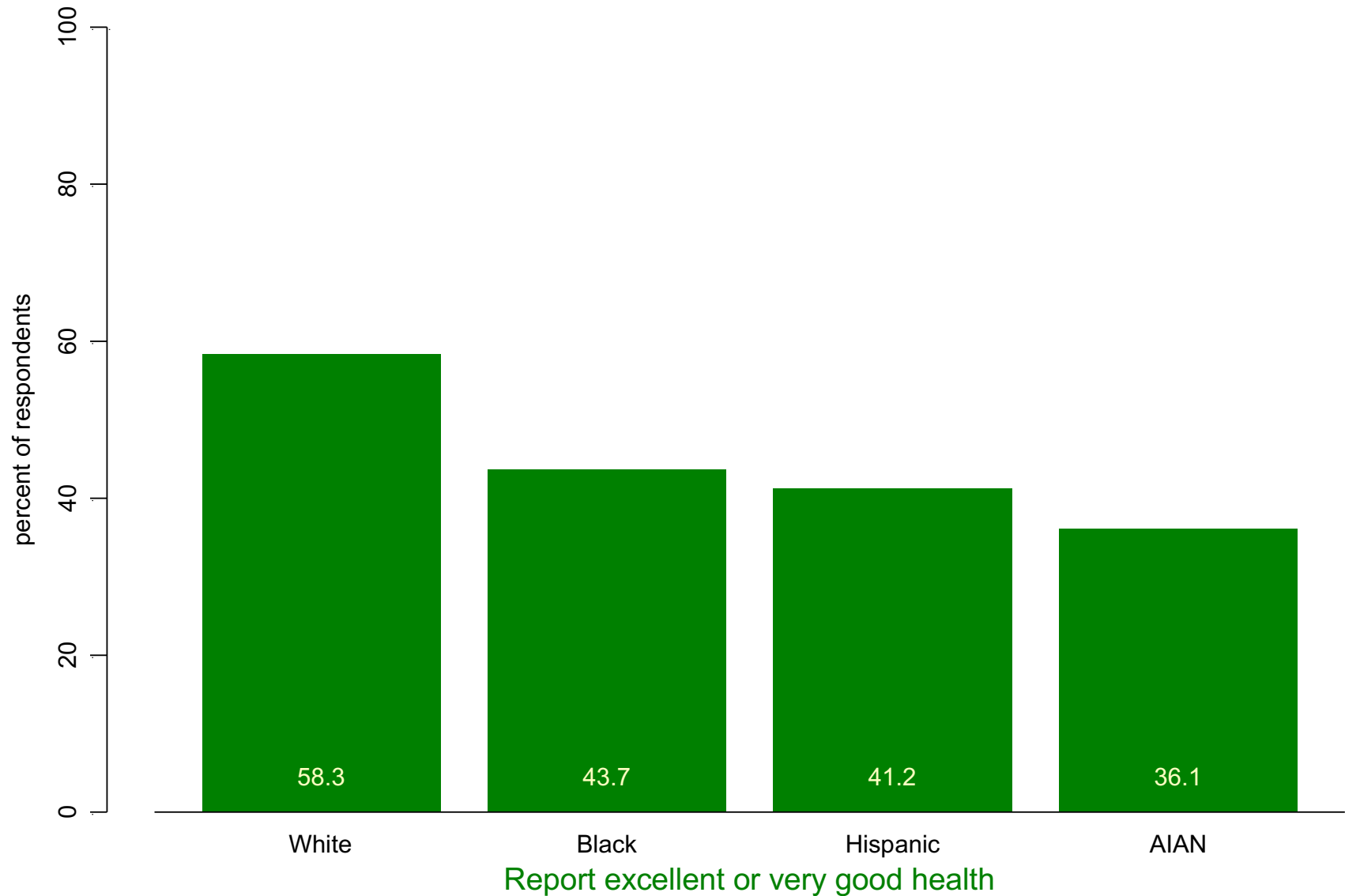
Socially-assigned “race”

- ❑ **On-the-street “race”** quickly and routinely assigned without benefit of queries about self-identification, ancestry, culture, or genetic endowment
- ❑ ***Ad hoc* racial classification**, an influential basis for interactions between individuals and institutions for centuries
- ❑ **Substrate upon which racism operates**

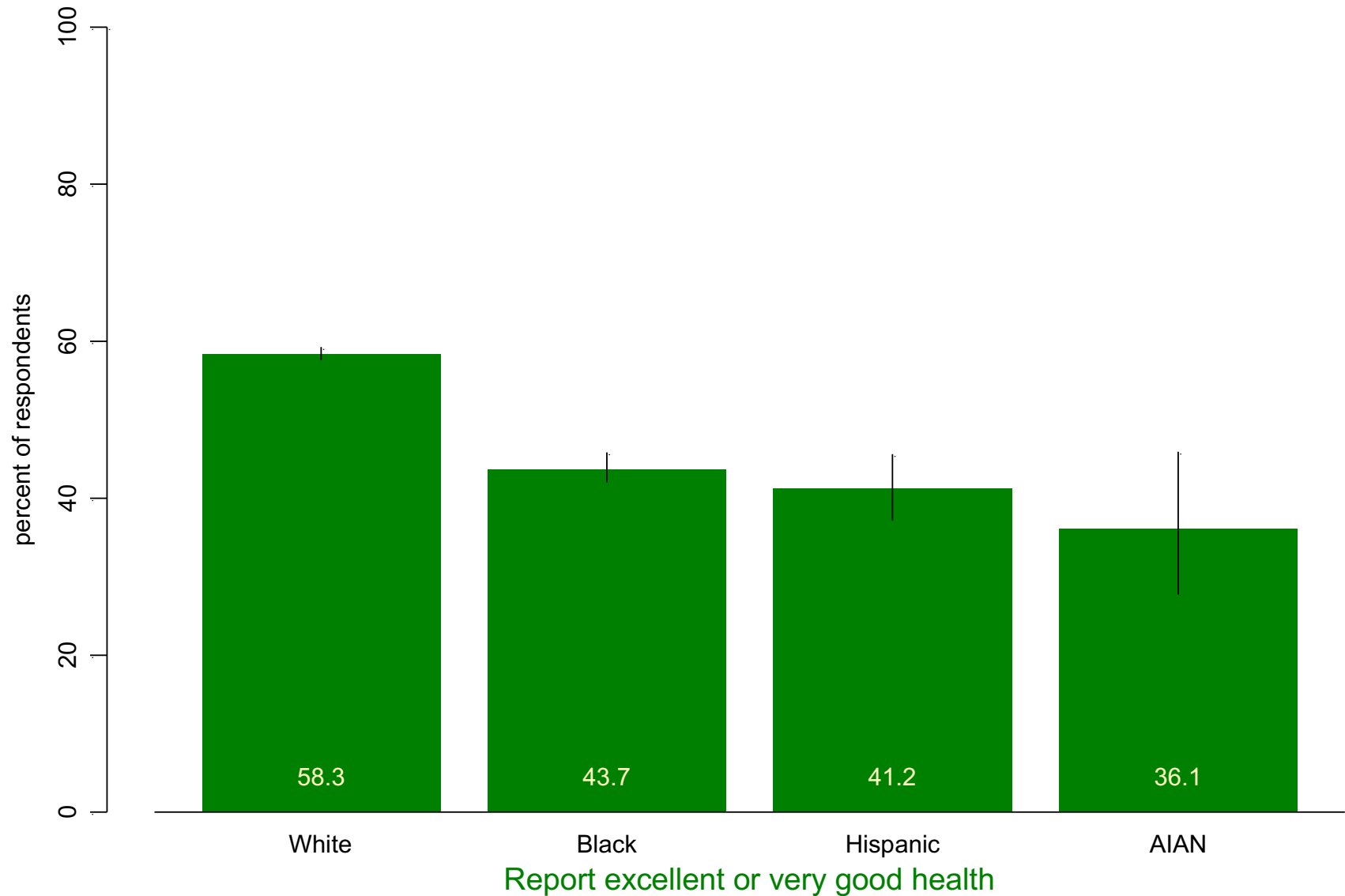
General health status

- ❑ **Would you say that in general your health is:**
 - Excellent
 - Very good
 - Good
 - Fair
 - Poor

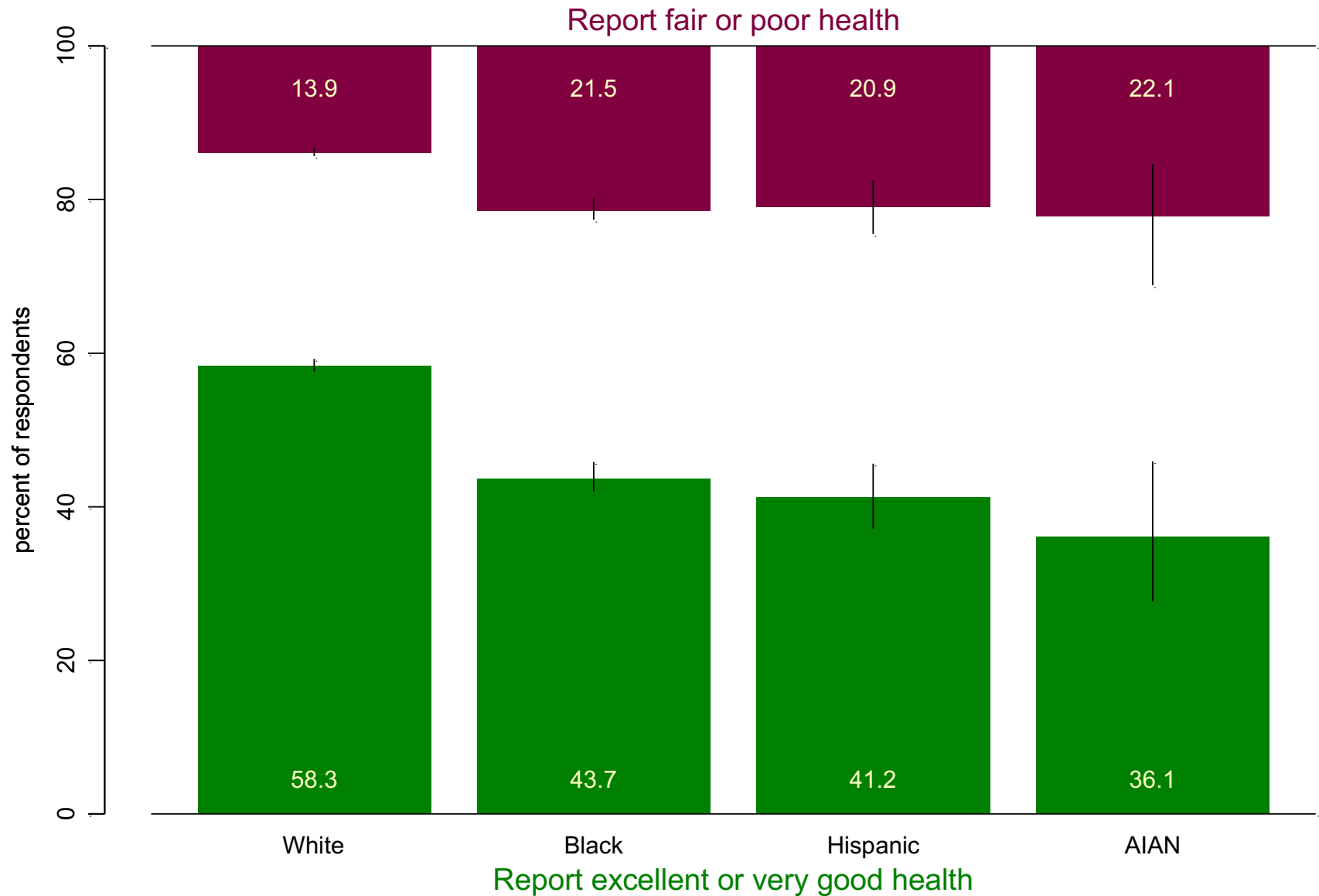
General health status by socially-assigned "race", 2004 BRFSS



General health status by socially-assigned "race", 2004 BRFSS



General health status by socially-assigned "race", 2004 BRFSS



General health status and “race”

- Being perceived as *White* is associated with better health

Self-identified ethnicity

☐ Are you Hispanic or Latino?

- Yes
- No

Self-identified “race”

- ❑ Which one or more of the following would you say is your race?
 - White
 - Black or African-American
 - Asian
 - Native Hawaiian or Other Pacific Islander
 - American Indian or Alaska Native
 - Other

Self-identified “race”/ethnicity

❑ **Hispanic**

- “Yes” to Hispanic/Latino ethnicity question
- Any response to race question

❑ **White**

- “No” to Hispanic/Latino ethnicity question
- Only one response to race question, “White”

❑ **Black**

- “No” to Hispanic/Latino ethnicity question
- Only one response to race question, “Black”

❑ **American Indian/Alaska Native**

- “No” to Hispanic/Latino ethnicity question
- Only one response to race question, “AI/AN”

Two measures of “race”

How usually classified by others

White

Black

Hispanic

AIAN

...

How self-identify

White 26,373	98.4	0.1	0.3	0.1	1.1
Black 5,246	0.4	96.3	0.8	0.3	2.2

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Two measures of “race”

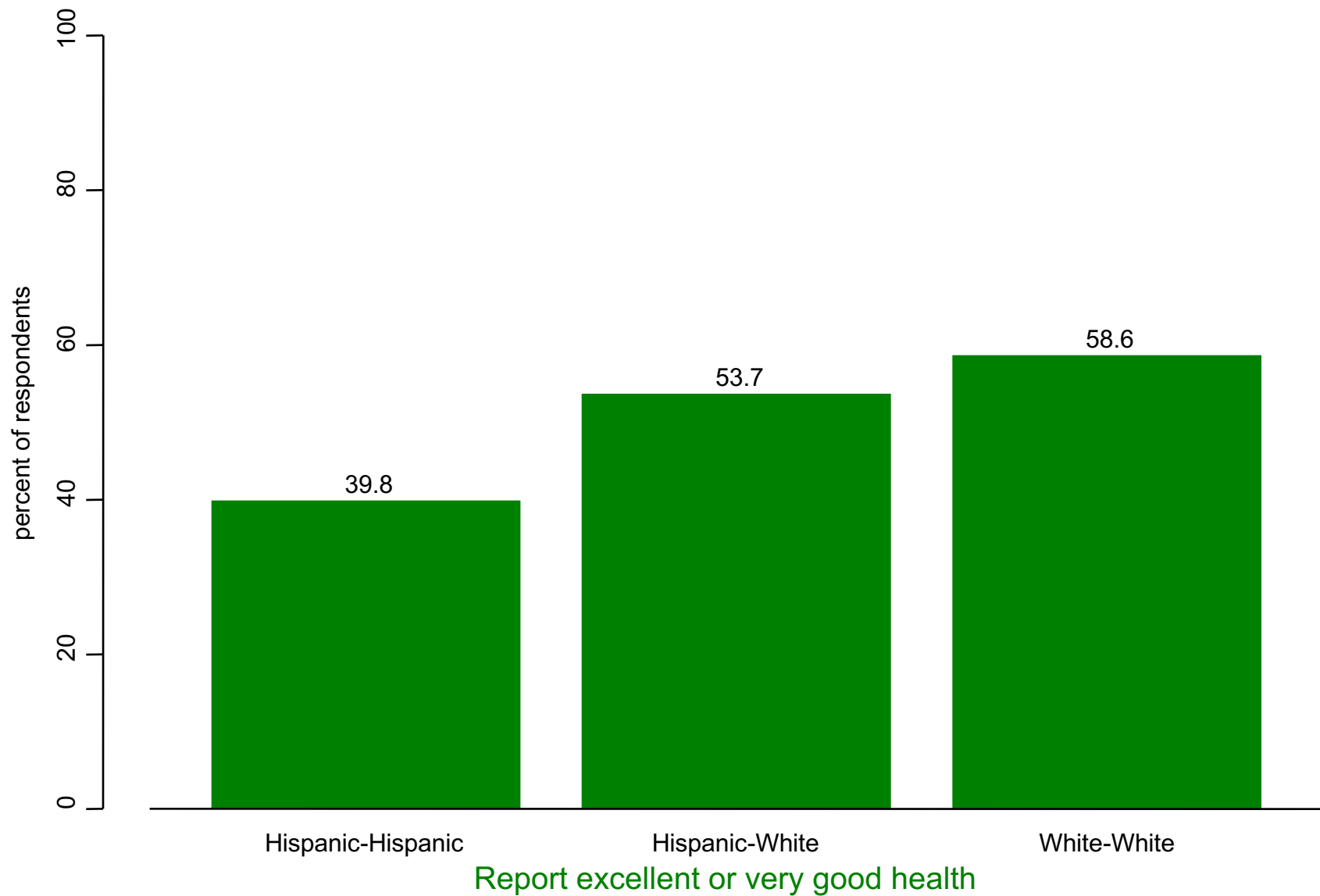
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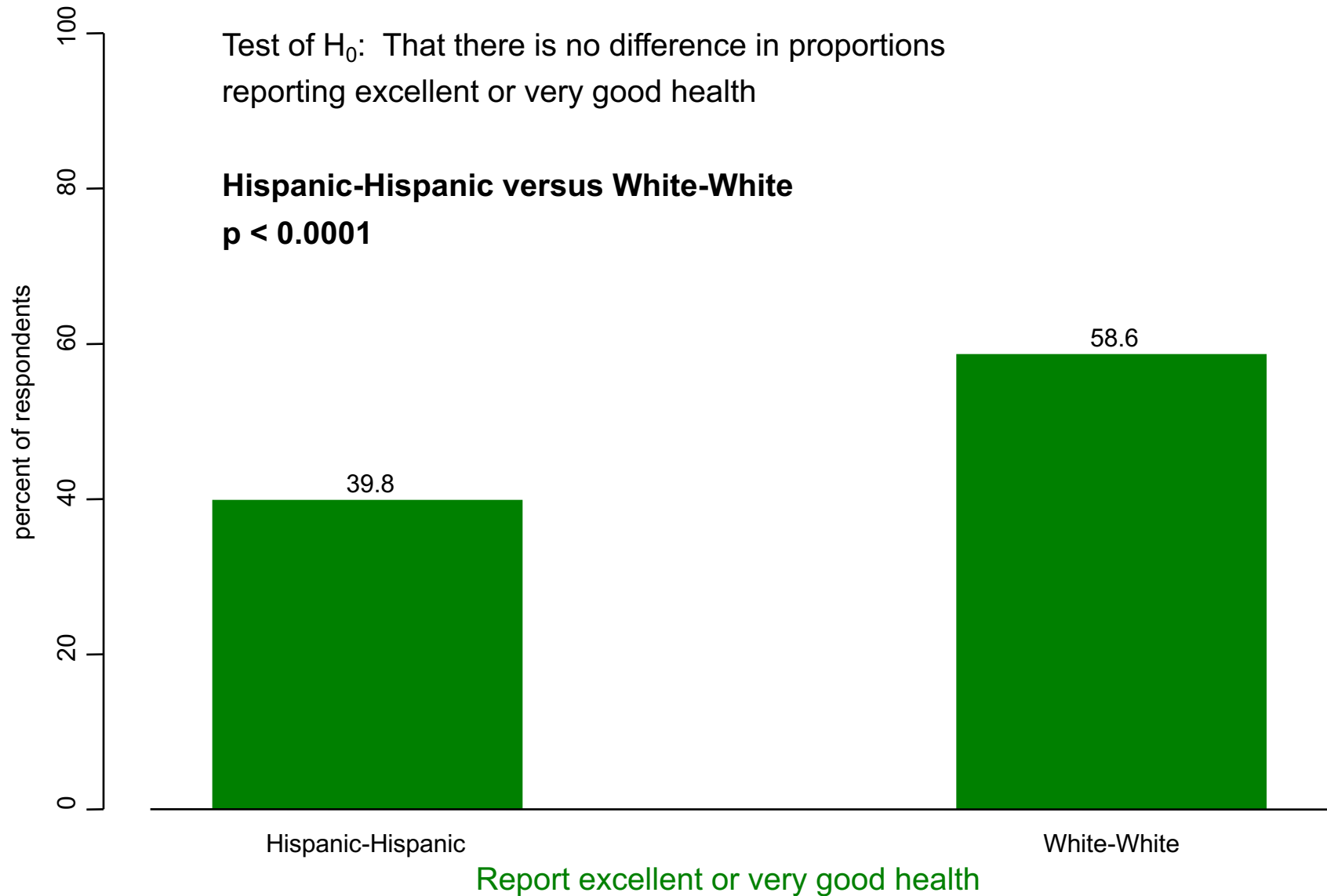
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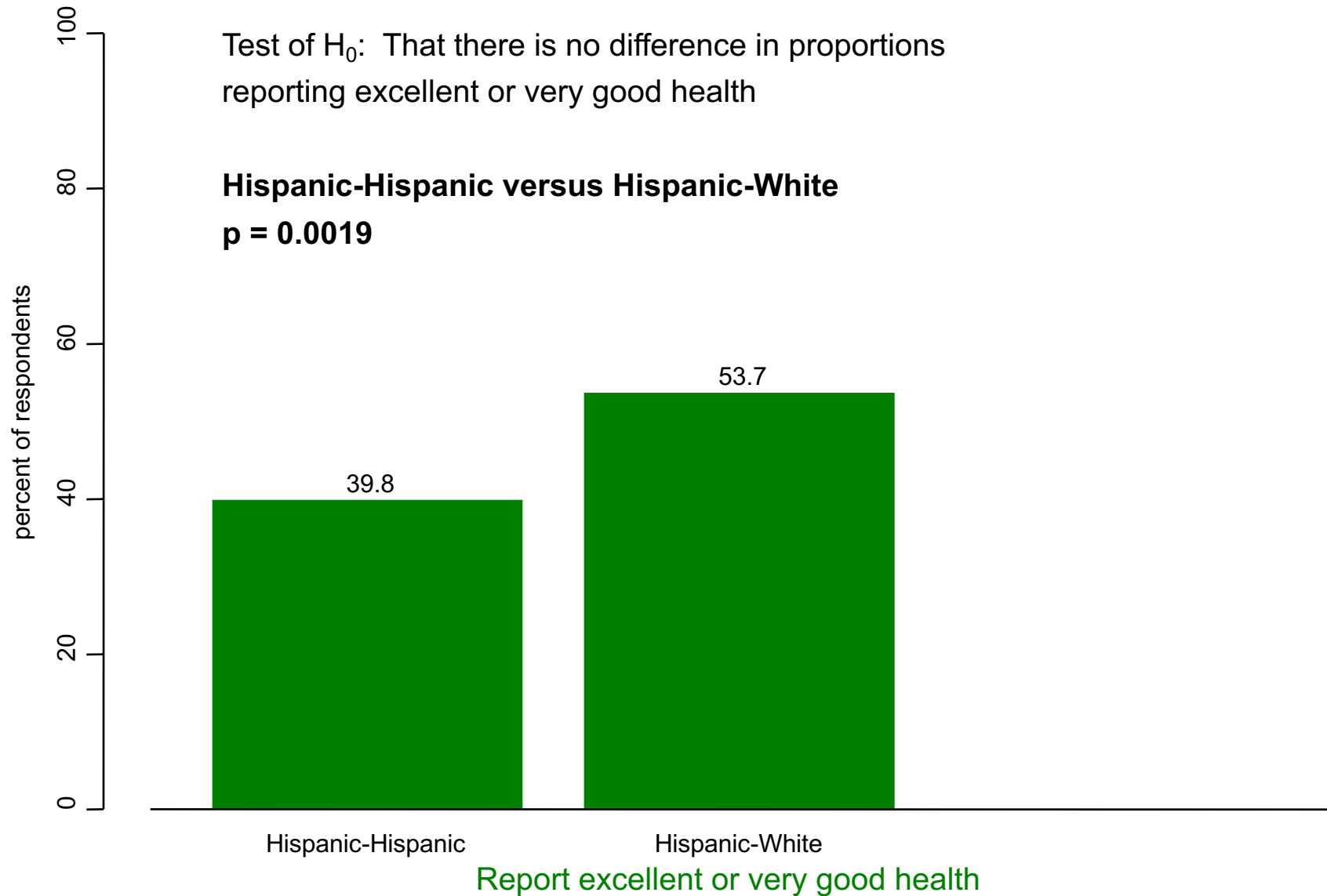
General health status, by self-identified and socially-assigned "race", 2004



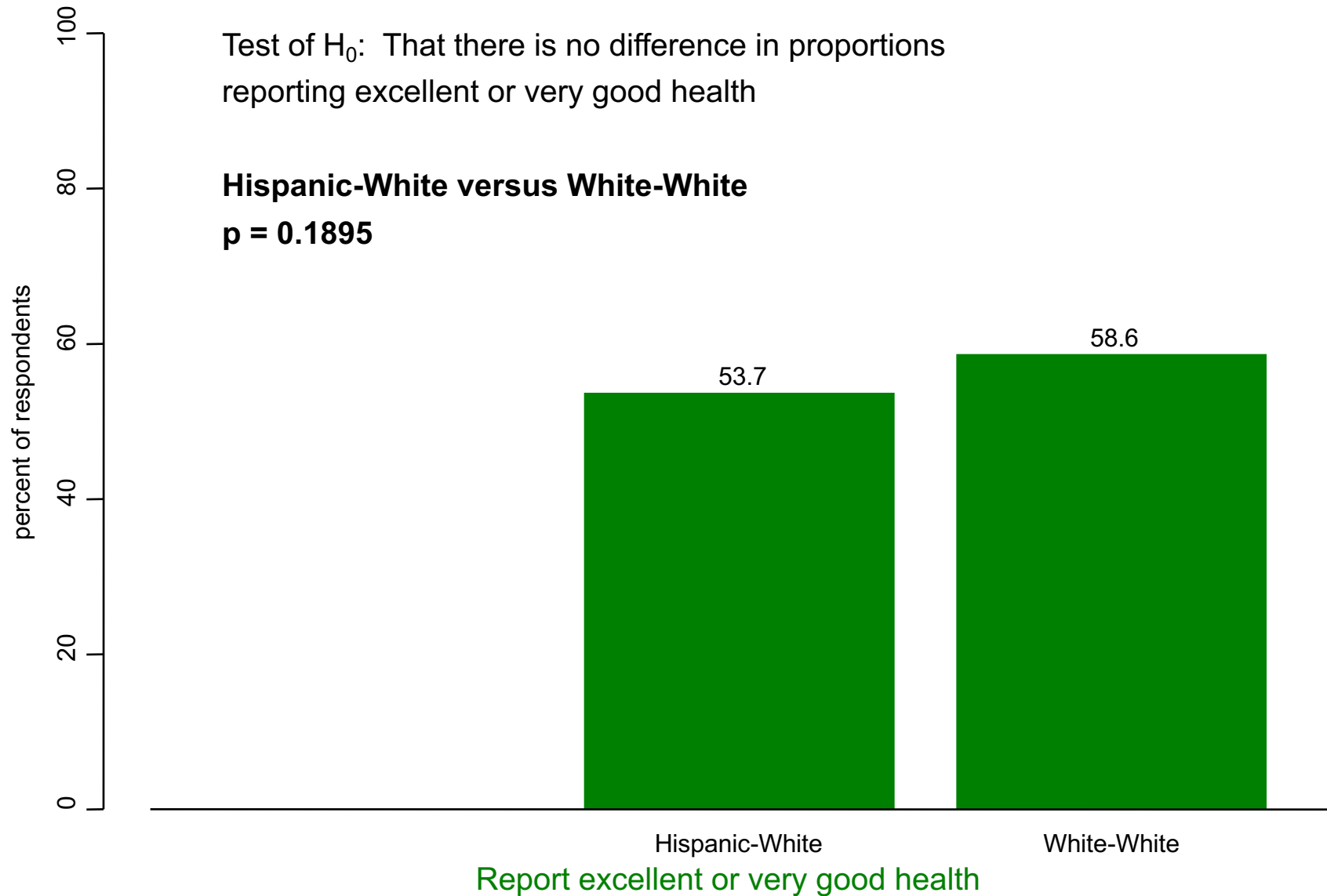
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Two measures of “race”

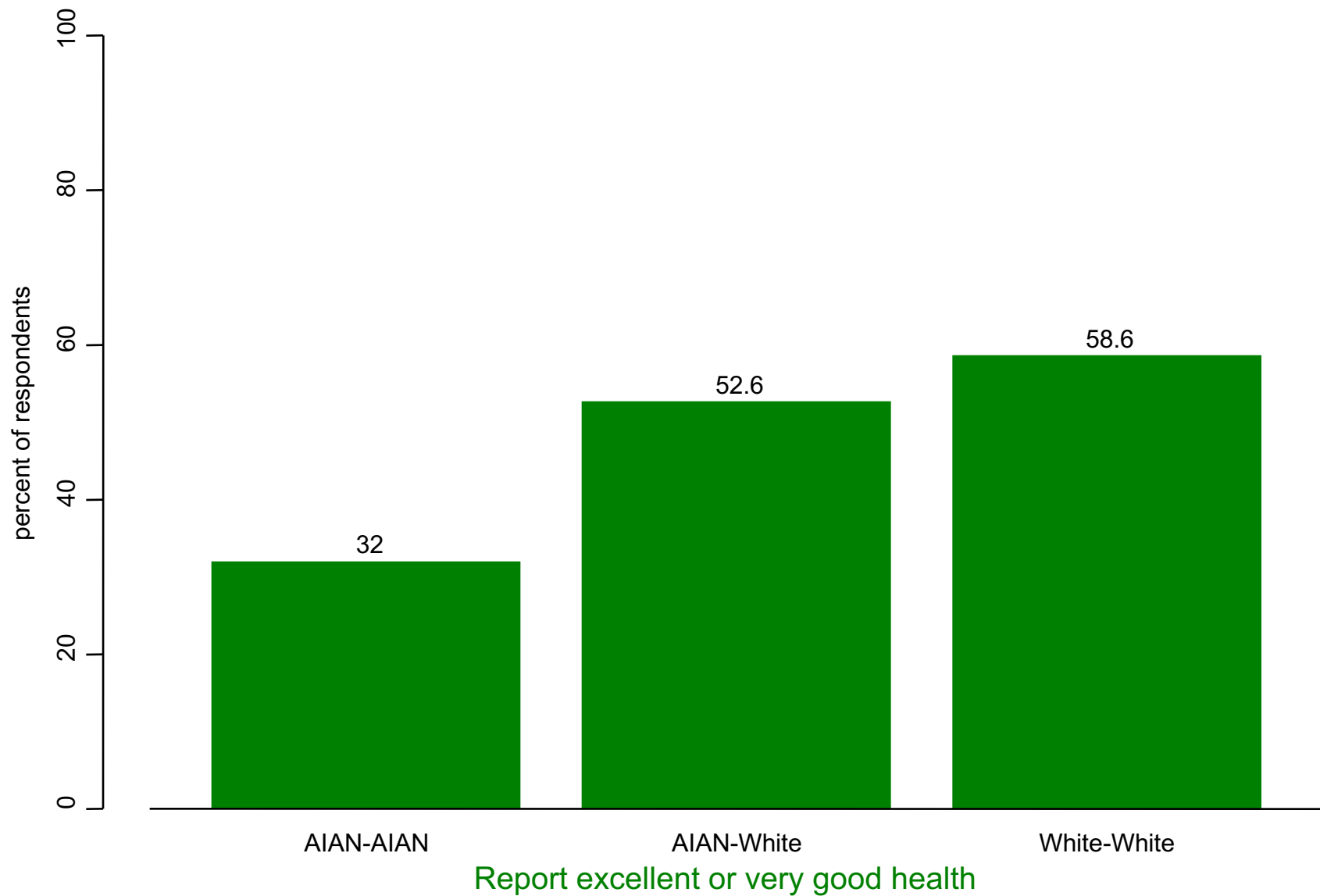
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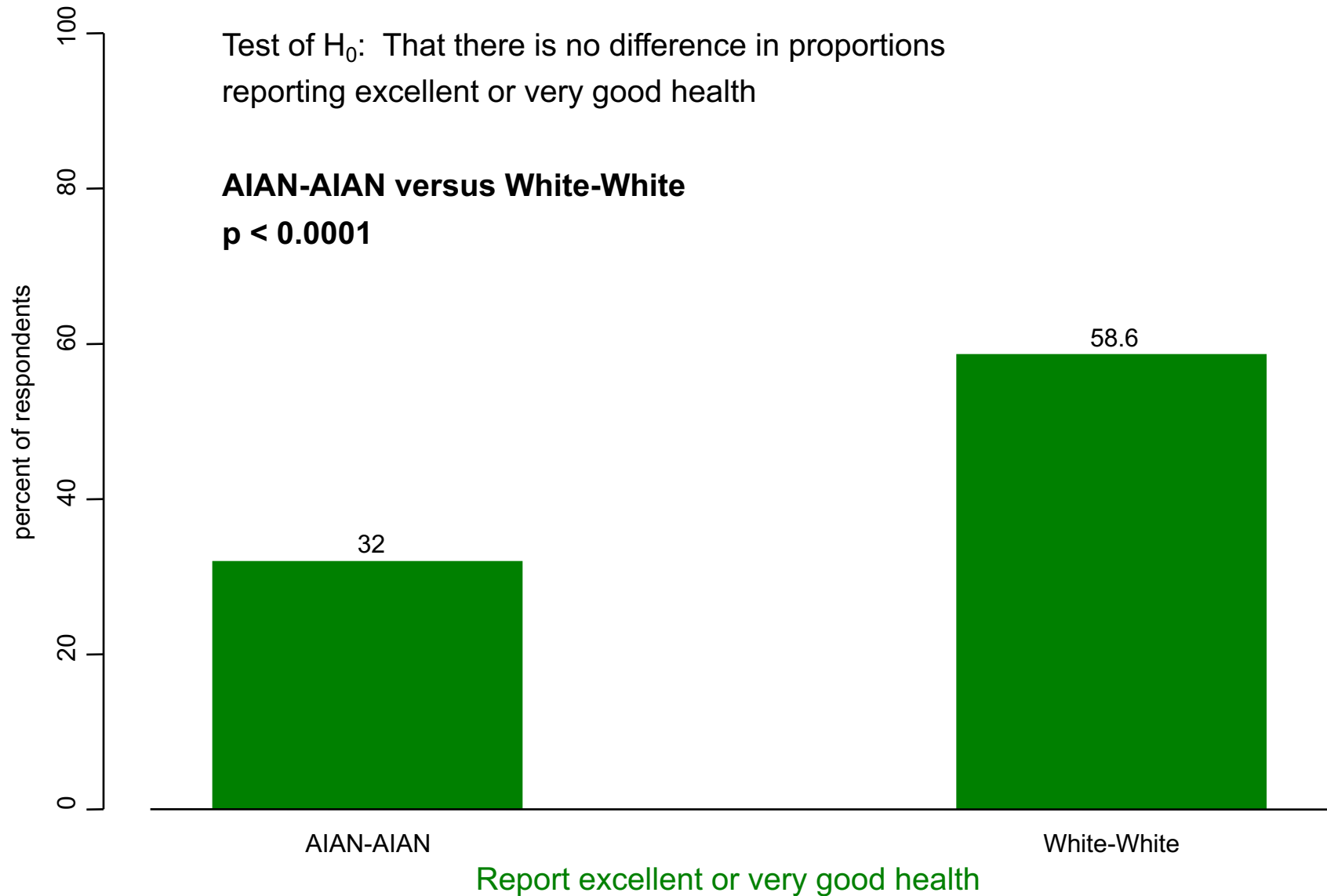
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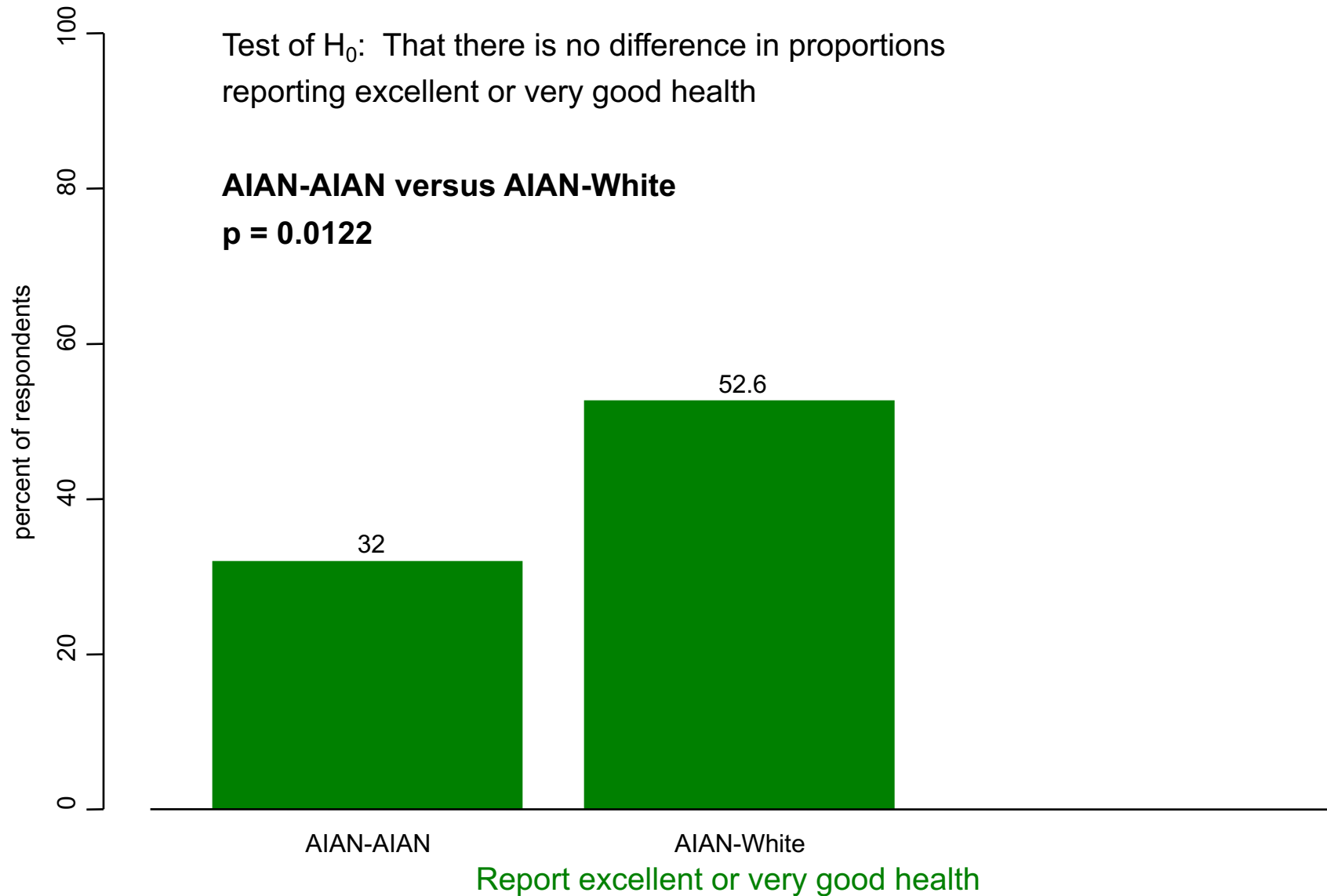
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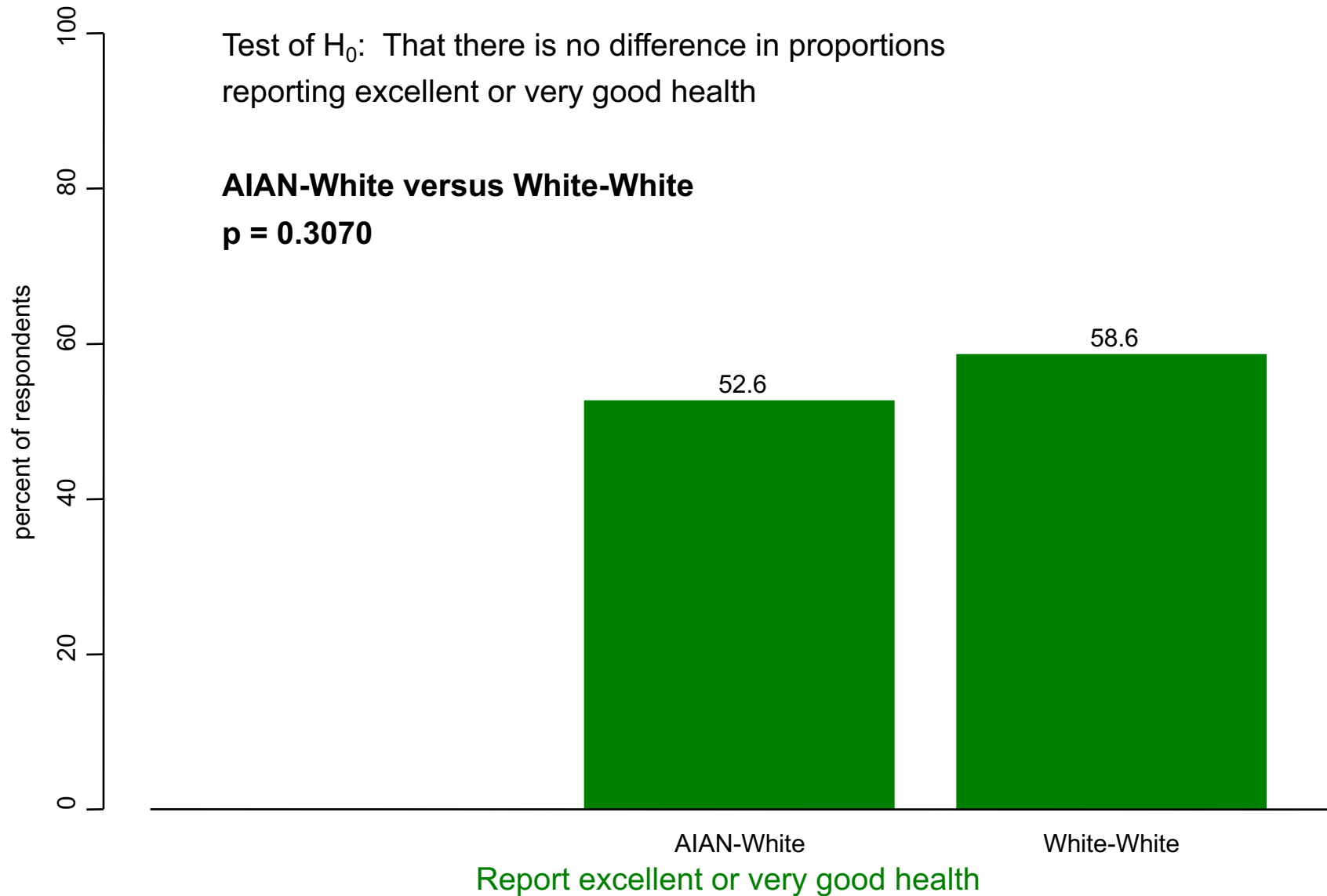
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General health status and “race”

- ❑ Being perceived as *White* is associated with better health
 - Even within non-*White* self-identified “race”/ethnic groups

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General health status and “race”

- ❑ **Being perceived as *White* is associated with better health**
 - Even within non-*White* self-identified “race”/ethnic groups
 - Even within the same educational level

- ❑ **Being perceived as *White* is associated with higher education**

Key questions

- ❑ **Why is socially-assigned “race” associated with self-rated general health status?**
 - Even within non-*White* self-identified “race”/ethnic groups
 - Even within the same educational level

- ❑ **Why is socially-assigned “race” associated with educational level?**

Racism

A system of structuring opportunity and assigning value based on the social interpretation of how we look (“race”), which

- 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

Jones CP. Confronting Institutionalized Racism. *Phylon* 2003;50(1-2):7-22.

Jones CP, Truman BI, Elam-Evans LD, Jones CA, Jones CY, Jiles R, Rumisha SF, Perry GS. Using “socially assigned race” to probe *White* advantages in health status. *Ethn Dis* 2008;18(4):496-504.

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Anti-Racism Collaborative Communication and Dissemination

❑ Guiding questions

- How can we support the naming of racism in all public and private spaces?
- What tools and strategies are needed to start community conversations on racism?

Anti-Racism Collaborative Communication and Dissemination

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- How can we support the naming of racism in all public and private spaces?
- What tools and strategies are needed to start community conversations on racism?

❑ Possible activities

- Expand the APHA Webinar Series on Racism and Health
- Convene Regional Town Halls on Anti-Racism and Health
- Develop a toolbox of communication tools and strategies

Anti-Racism Collaborative Education and Development

❑ Guiding questions

- How can we support training around issues of “race”, racism, and anti-racism at educational institutions of all levels?
- How does effective anti-racism curriculum look?

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- How can we support training around issues of “race”, racism, and anti-racism at educational institutions of all levels?
- How does effective anti-racism curriculum look?

❑ Possible activities

- Convene anti-racism scholars and activists
- Develop curricula for schools of public health and medicine
- Establish an APHA Fellowship on Anti-Racism and Health

Anti-Racism Collaborative Global Matters

❑ Guiding questions

- How can we use the International Convention on the Elimination of all forms of Racial Discrimination (ICERD) to support anti-racism work in the United States?
- What can we learn from anti-racism work in other nations?

Anti-Racism Collaborative Global Matters

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- How can we use the International Convention on the Elimination of all forms of Racial Discrimination (ICERD) to support anti-racism work in the United States?
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❑ Possible activities

- Disseminate information on US obligations under ICERD
- Scan anti-racism efforts in other countries
- Contribute to a global conversation on social equity

Anti-Racism Collaborative Liaison and Partnership

❑ Guiding questions

- What anti-racism work is happening at the community level?
- What anti-racism work is happening in other sectors?
- How can we create linkages?

Anti-Racism Collaborative Liaison and Partnership

❑ Guiding questions

- What anti-racism work is happening at the community level?
- What anti-racism work is happening in other sectors?
- How can we create linkages?

❑ Possible activities

- Catalog and connect local anti-racism efforts
- Develop an anti-racism commitment agreement for partner organizations

Anti-Racism Collaborative Organizational Excellence

❑ Guiding questions

- How do we answer the question “How is racism operating here?” in each of our settings?
- How do we examine structures, policies, practices, norms, and values?

Anti-Racism Collaborative Organizational Excellence

❑ Guiding questions

- How do we answer the question “How is racism operating here?” in each of our settings?
- How do we examine structures, policies, practices, norms, and values?

❑ Possible activities

- Develop tools to discern historical and contemporary mechanisms of institutionalized racism
- Establish a National Advisory Committee on Anti-Racism and Health

Anti-Racism Collaborative Policy and Legislation

❑ Guiding questions

- What are current policy and legislative strategies to address and dismantle racism?
- What new strategies should we propose?

Anti-Racism Collaborative Policy and Legislation

❑ Guiding questions

- What are current policy and legislative strategies to address and dismantle racism?
- What new strategies should we propose?

❑ Possible activities

- Catalog anti-racism policies across jurisdictions
- Propose new areas for legislation
- Disseminate model legislation

Anti-Racism Collaborative Science and Publications

❑ Guiding questions

- What research has been done to examine the impacts of racism on the health and well-being of the nation and world?
- What intervention strategies have been evaluated?
- What are next steps?

Anti-Racism Collaborative Science and Publications

❑ Guiding questions

- What research has been done to examine the impacts of racism on the health and well-being of the nation and world?
- What intervention strategies have been evaluated?
- What are next steps?

❑ Possible activities

- Develop a compendium of measures of racism
- Link anti-racism researchers in collaborative work
- Develop a science of anti-racism

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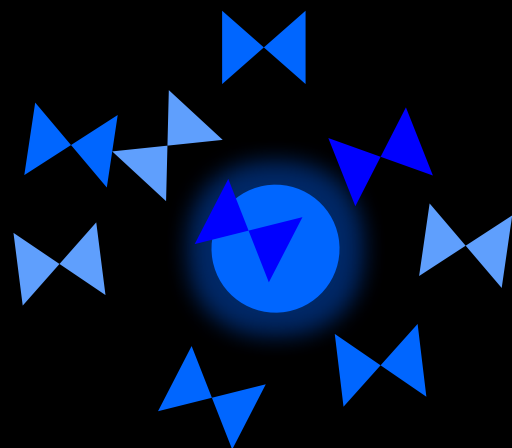
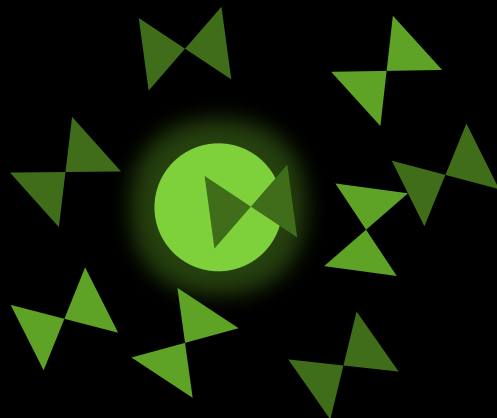
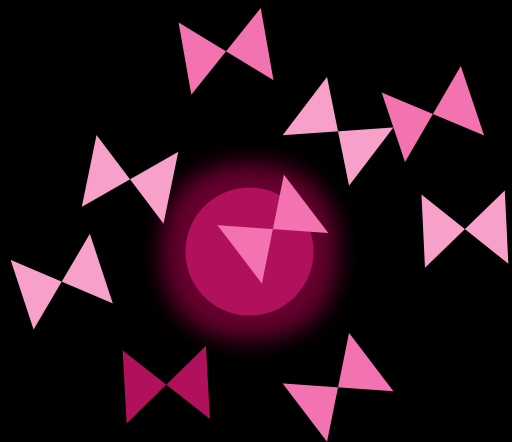
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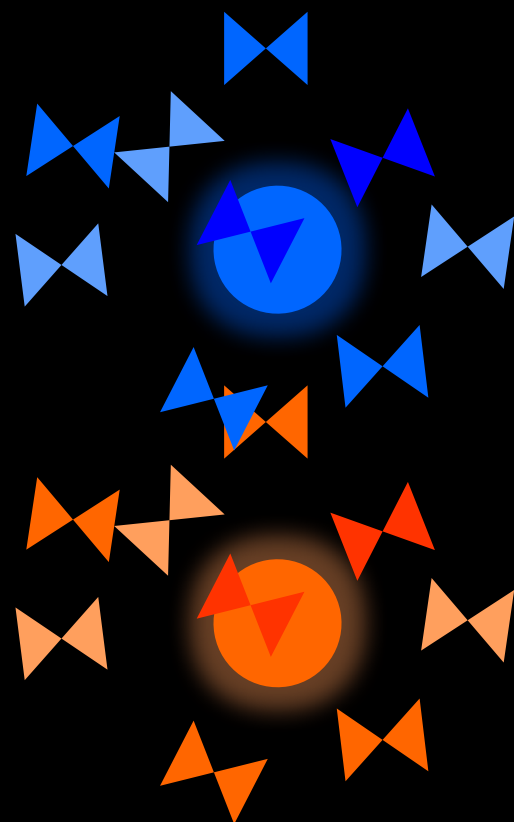
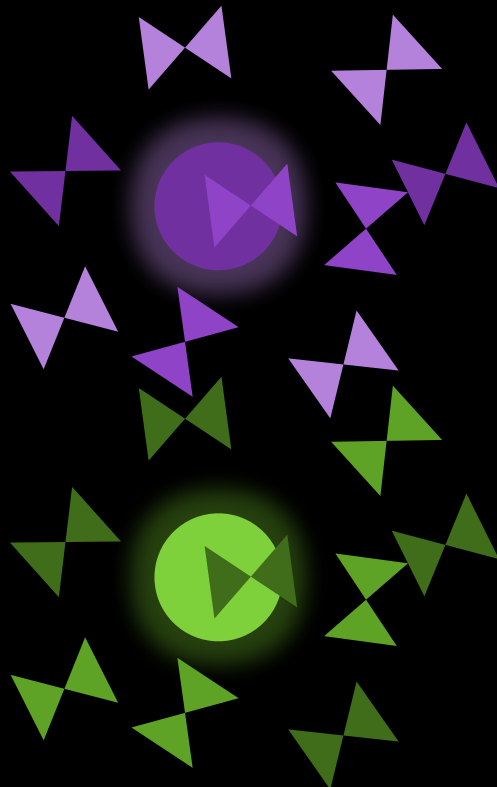
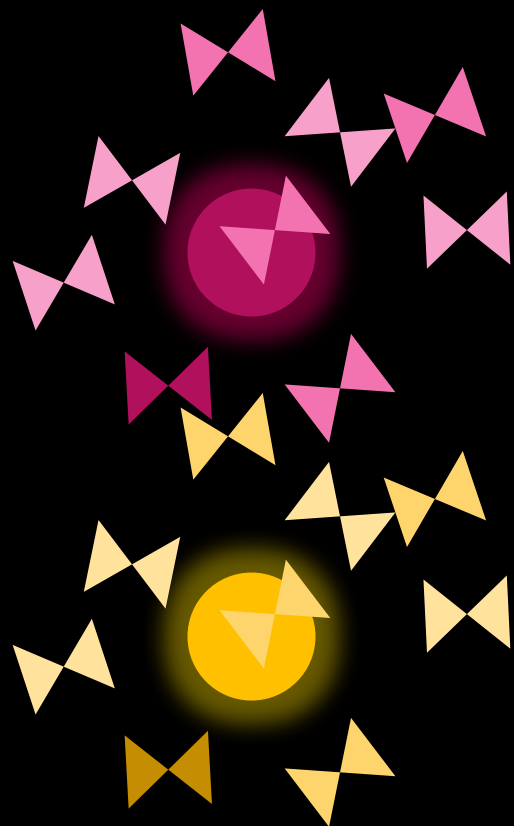
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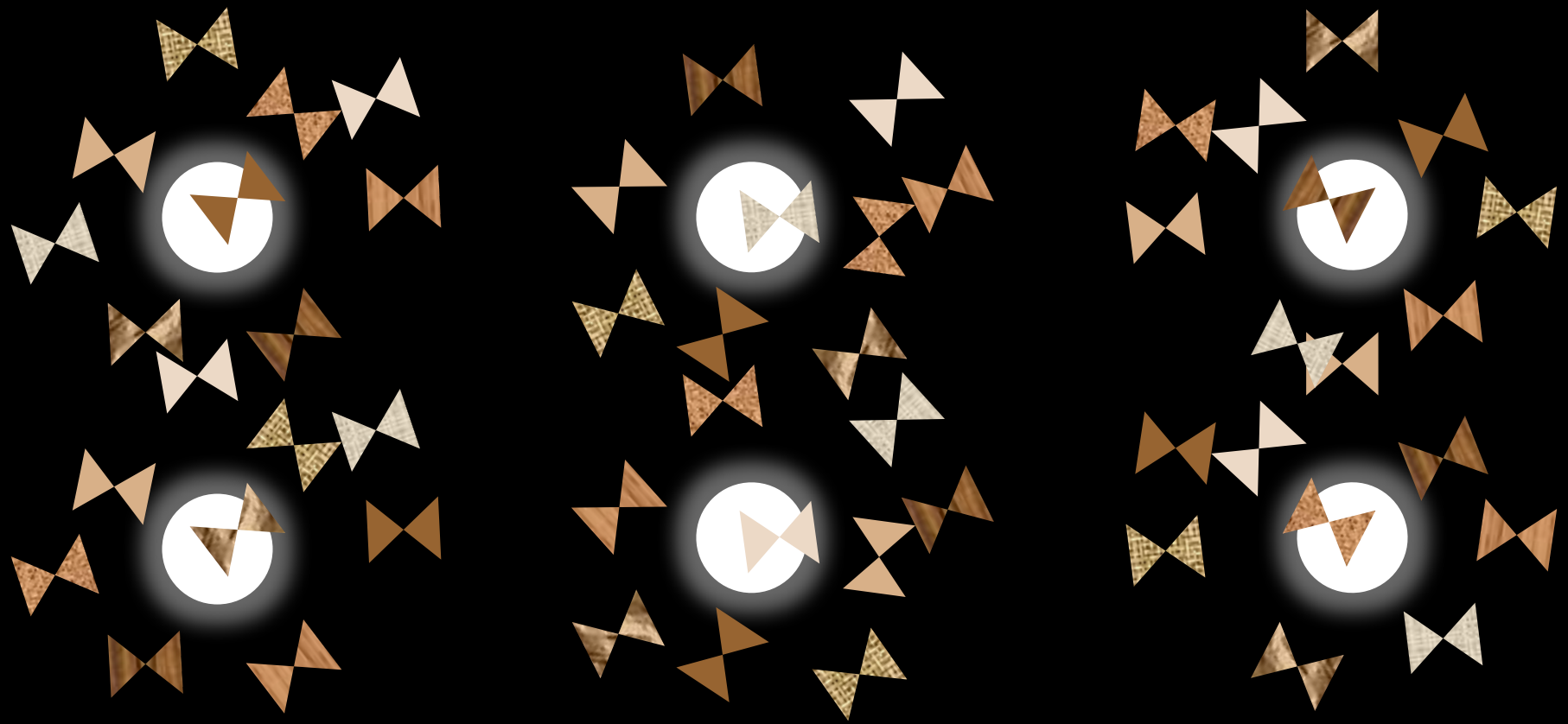
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Japanese Lanterns: Colored perceptions



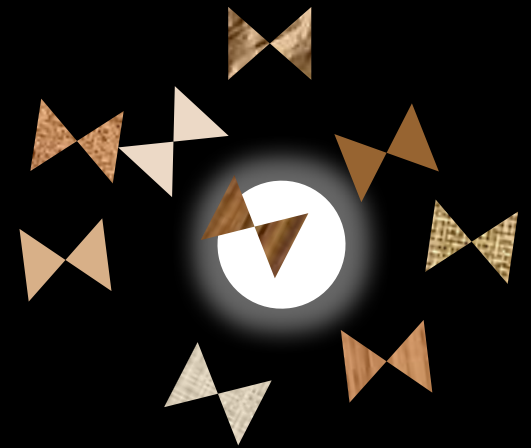
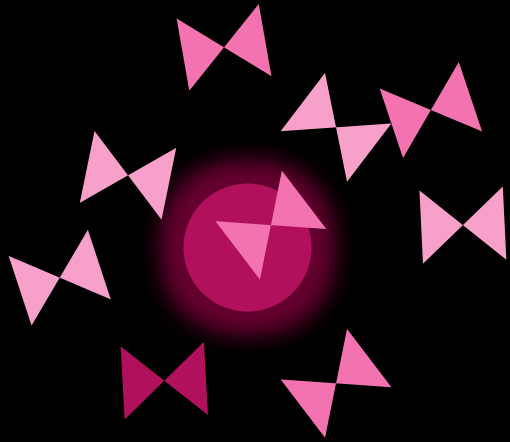






The colors we think we see are due to the lights by which we look.

These colored lights distort and mask our true variability.



What is “race”?

A social classification,
not a biological descriptor.
The social interpretation of how one looks
in a “race”-conscious society.

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