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Are Our Policy Makers on Board? What Policy Makers Think of the Social Determinants, Health Disparities, and Health in All Policies

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Are Our Policy Makers on Board? What Policy Makers Think of the Social Determinants, Health Disparities, and Health in All Policies

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Brigham Young University

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3. Department of Exercise Sciences

Utah Public Health Association Annual Conference

March 29, 2017

Perspectives, Policy, & Health

Are our Policymakers on Board?

What Policymakers think of the Social Determinants of Health, Health Disparities, and Health in All Policies



Changing the way we think about health shapes our neighborhoods and our nation's health.



Health is Everything.

Health Happens Where We Live, Learn, Work, and Play.

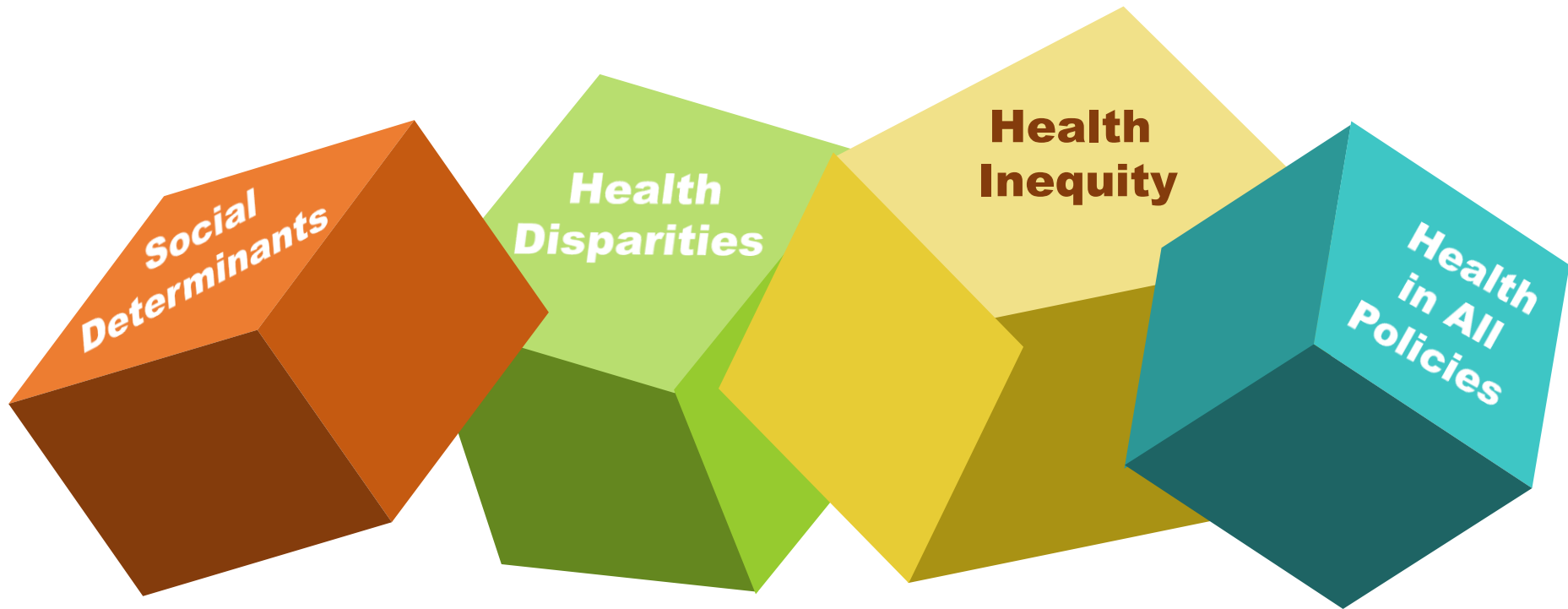
“Health is an essential part of everything we do.

But for too long our nation has defined health as simply not being sick. We have confined our view of health to health care services, separate from the other aspects of our lives. Yet, health is the bedrock of personal fulfillment, the backbone of prosperity, and the foundation of a strong, competitive nation.

Our ZIP codes should not predict how long or how well we live. Nor should they determine access to opportunities like good jobs, safe communities, clean air, and healthy environments.”

*~ Riza Lavizzo-Mourey, 2017 RWJF Annual Message
Seven Lessons I've Learned About Improving Health in America*

DEFINITIONS



SOCIAL DETERMINANTS

The **conditions** in which people are born, grow, live, work and age... shaped by the **distribution of money, power and resources** at global, national and local levels... are **mostly responsible for health inequities** - the **unfair and avoidable differences in health status** seen within and between countries (WHO, 2008)

HEALTH DISPARITIES

Is there a **difference** in health status rates between population groups?

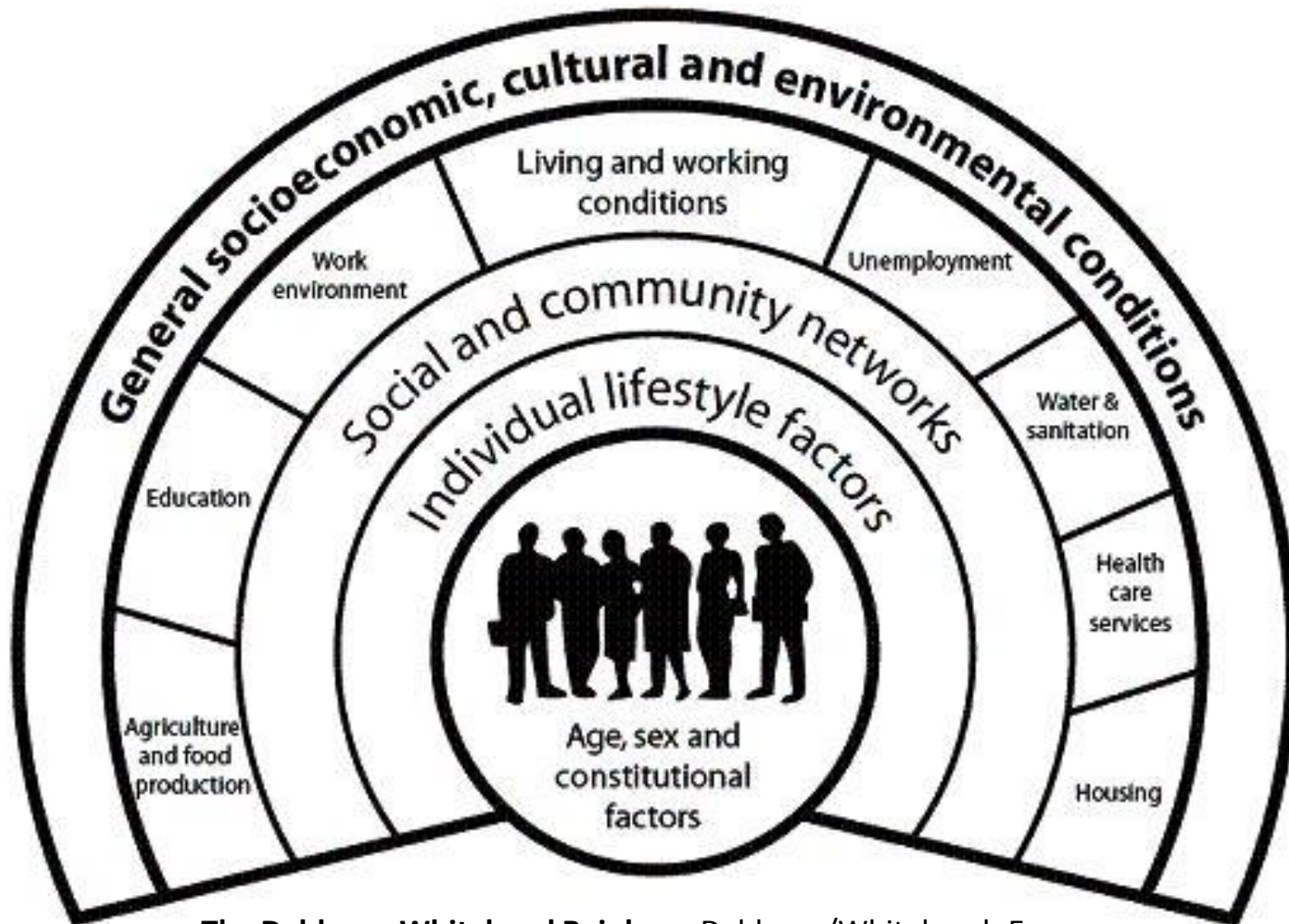
HEALTH INEQUITY

Is the disparity in rates due to differences in social, economic, environmental or HC resources? Is it **fair**? Is it **preventable**?

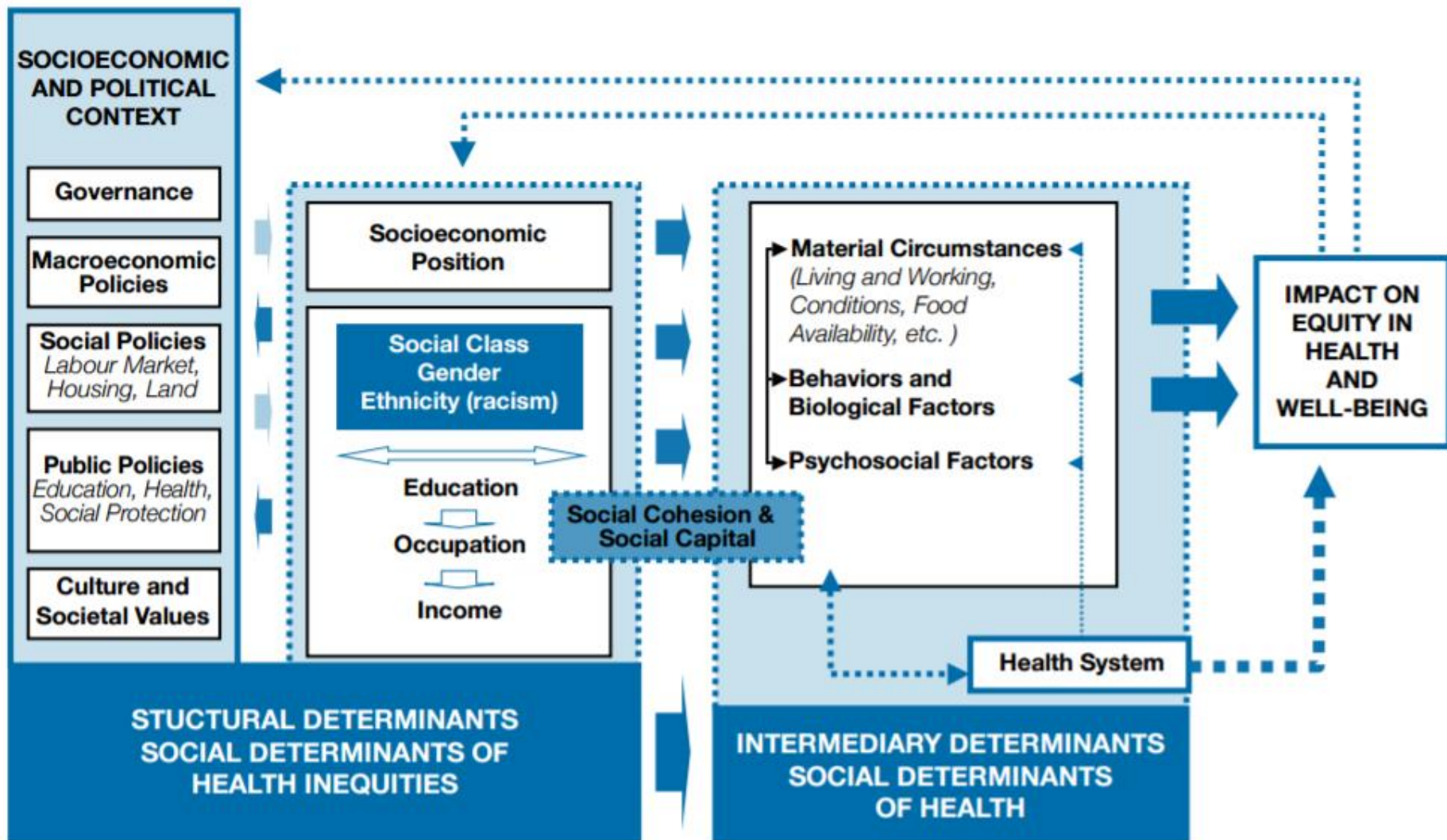
HEALTH IN ALL POLICIES

A **collaborative approach** that **integrates and articulates health considerations into policymaking across sectors** to improve the health of all communities and people. HiAP recognizes that health is created by a multitude of factors beyond healthcare and, in many cases, beyond the scope of traditional public health activities (CDC, 2016)

Layers of Influence on Health

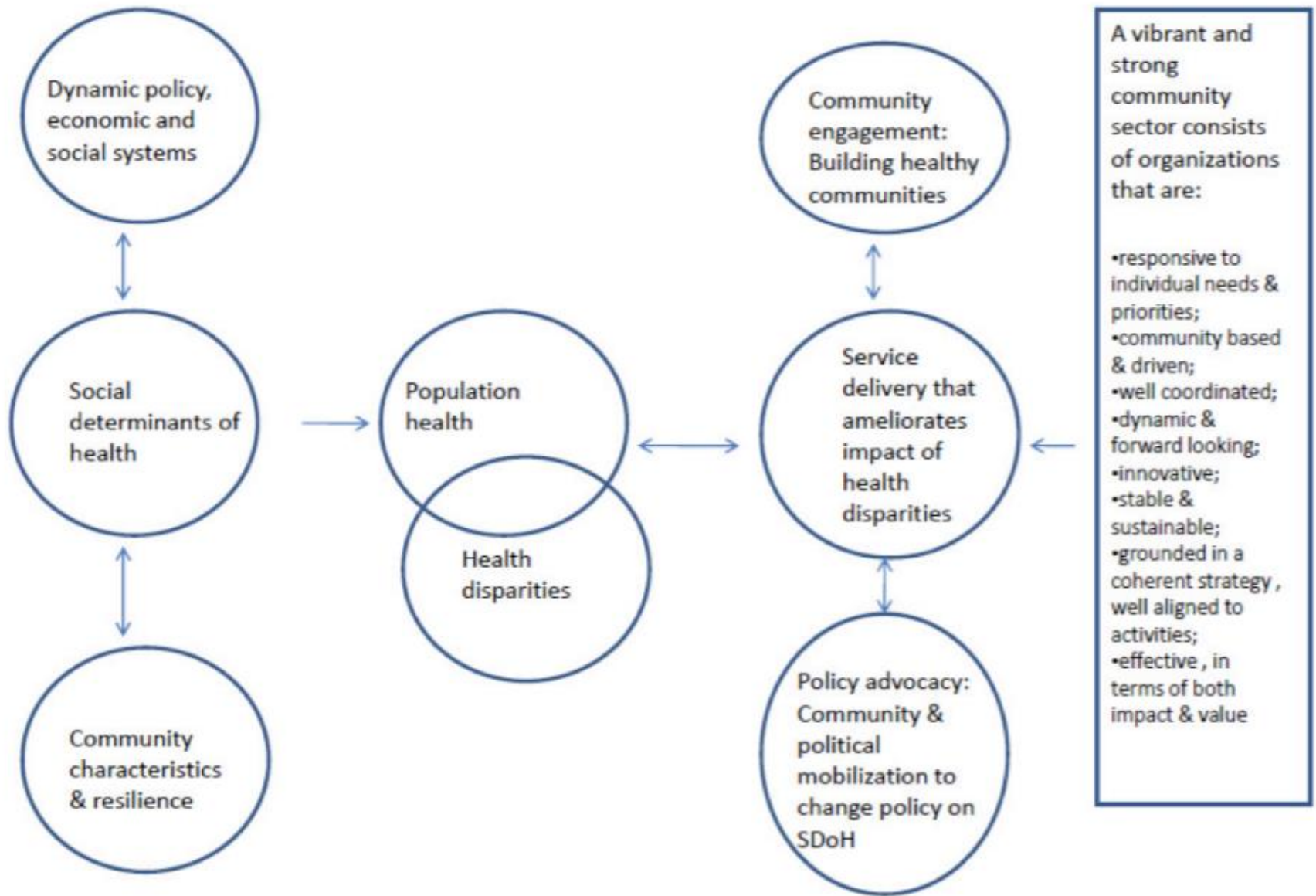


The Dahlgren-Whitehead Rainbow. Dahlgren/Whitehead: European strategies for tackling social inequities in health – levelling up part 2 (World Health Organization Report 2006, reprinted 2007)



Conceptual Framework for Action on the Social Determinants of Health

Solar O, Irwin A. A conceptual framework for action on the social determinants of health. Social Determinants of Health Discussion Paper 2 (Policy and Practice). World Health Organization



Reducing Disparities and Improving Population Health: The Role of a Vibrant Community Sector



LINKAGES IN POLICY & HEALTH

Linkages

Address equity in health access and outcomes

Linkages

Bridge science and policy decision-making

Linkages

Review laws & regulations on the public's health

Linkages

Carve effective health messages

Linkages

Nurture public health-policy relationships to benefit population health

WHY STUDY POLICYMAKERS' PERSPECTIVES?



Rationale

What grabs policymakers' attention?

Rationale

Based on the literature, what are patterns of policy action and inaction?

Rationale

What lessons can be gleaned on framing health issues & communicating with policymakers?

Rationale

How can we bridge the gap between a policymakers' awareness and response to an issue?



RESEARCH OBJECTIVES

Research Question 1

Which facets of the social determinants of health are identified by policy makers as legislative priorities?

Research Question 2

How aware are policymakers' on the social determinants of health?

Research Question 3

Which factors facilitate or hinder a policymaker's action on the social determinants of health?

Methods

- Systematic review of scholarly and popular media sources
- Policymakers
 - Elected and non-elected
 - Individuals and organizations
 - Local through national political level
- Inclusion criteria
 - Address social determinants of health or a related topic
 - Focus on the United States
 - Written in English
 - Mention an individual U.S. policymaker or policy making group



Photo by DAVID ILIFF. License: CC-BY-SA 3.0

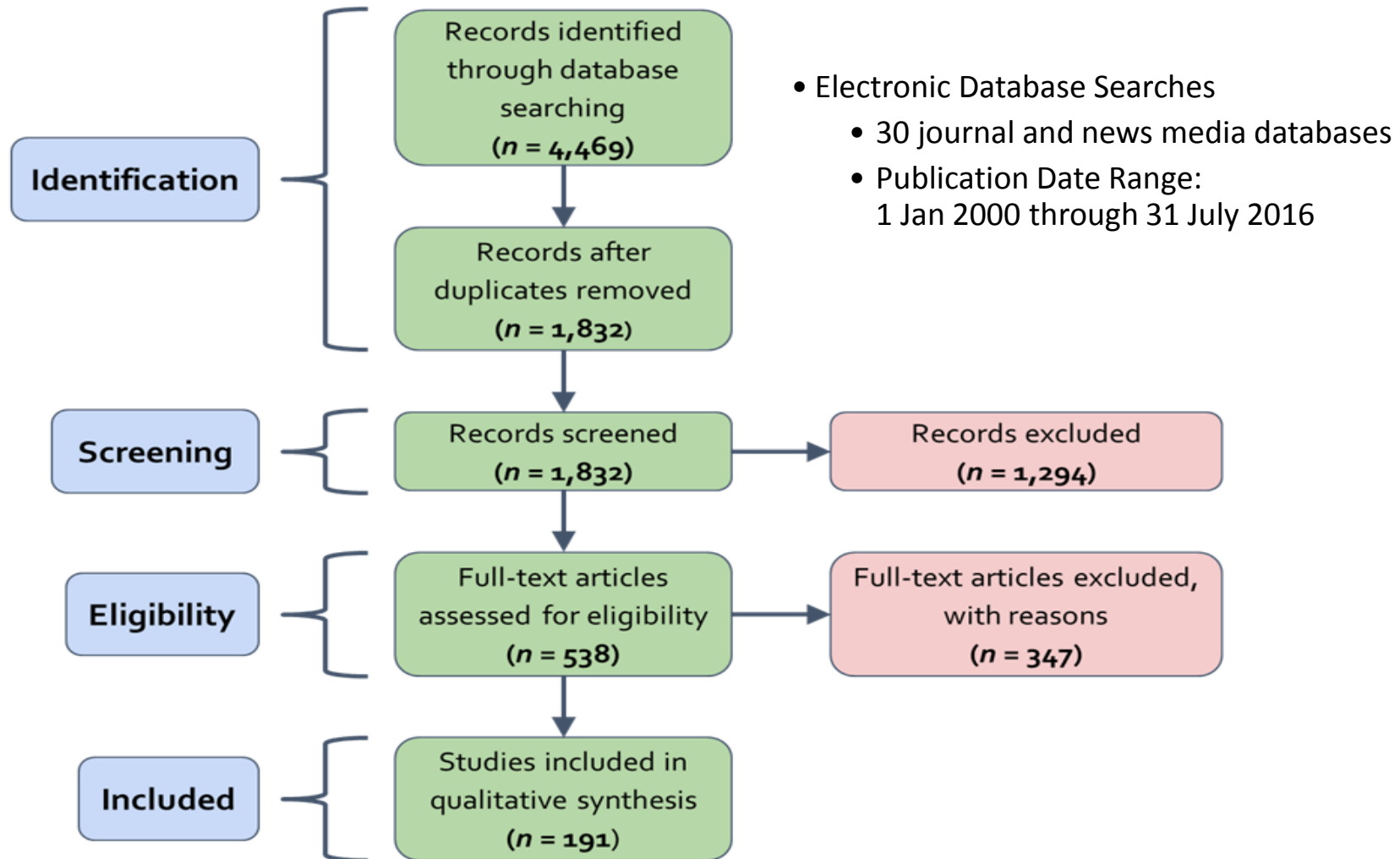
Methods – Search Strategy

("social determinant*" AND health*) OR "health* disparit*" OR "health* inequit*" OR "health* inequalit*" OR "health* equit*" OR "health* equalit*" OR "health in all polic*")

AND ("policy maker*" OR lawmaker* OR "law maker*" OR legislature* OR legislator* OR congress* OR senat* OR "house of representatives" OR commissioner* OR politician* OR governor* OR mayor* OR "urban planner*" OR "city council*")

AND (attitude* OR perceiv* OR percept* OR perspective* OR opinion* OR awareness OR understand* OR response* OR interview* OR decision* OR agenda* OR priorit* OR survey* OR questionnaire* OR "focus group*" OR expert* OR "key informant*" OR "key-informant*")

PRISMA Flow Diagram



Methods – Coding

- Type of Article
- Geographic Focus
- Study Design
- Major SDH Theme
- Gaps Mentioned
- Level of Policymaking
- Policymaker Job
- Elected Status
- Political Party Affiliation
- Policymaker Position
- Action Taken
- Policy Impact
- Interventions/Programs

Methods – Themes

- **Economy** - earned income, poverty
- **Employment** - unemployment rates, workforce characteristics
- **Education** - educational attainment, school characteristics
- **Political** - civic participation, power groups
- **Environmental** - air quality, environmental hazards
- **Housing** - housing stock, residential patterns



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Methods – Themes (cont.)

- **Medical/Healthcare** - primary/specialty care, insurance coverage
- **Governmental** - funding, policy/legislation
- **Public Health** - programs, regulation/enforcement
- **Psychosocial** - volunteer organizations, crime rates
- **Behavioral** - substance abuse, physical activity
- **Transportation** - infrastructure, public transportation

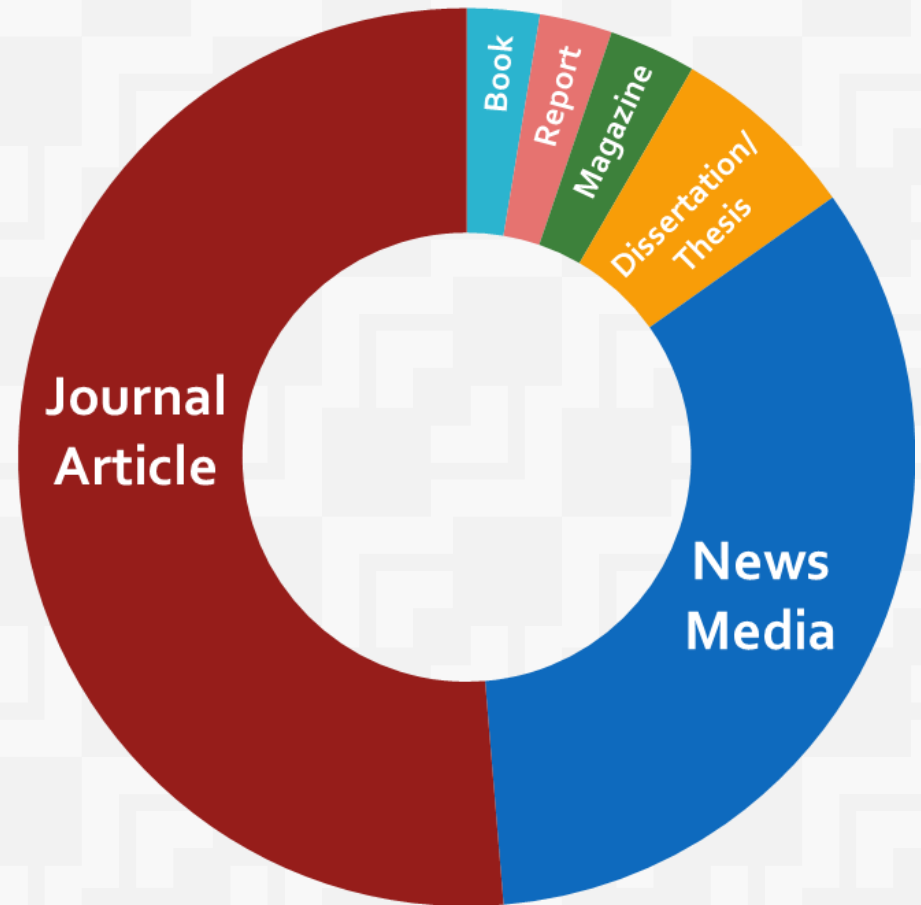


Methods – Study Codebook

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	
	Unique Article ID	Author(s)	Source	Year Published	Notes	Inclusion Coding (0 to 4)	Type of Article	Geographic Focus	Study Design 1	Study Design 2	Study Design 3	SDH Theme 1	SDH Theme 2	SDH Theme 3	SDH Theme 4	SDH Theme 5	Gaps	Level of PM 1	Level of PM 2	Level of PM 3	Level of PM 4	PM Job 1	PM Job 2	PM Job 3	PM Job 4	Elected /Non-Elected 1	Elected /Non-Elected 2	Elected /Non-Elected 3	Elected /Non-Elected 4	
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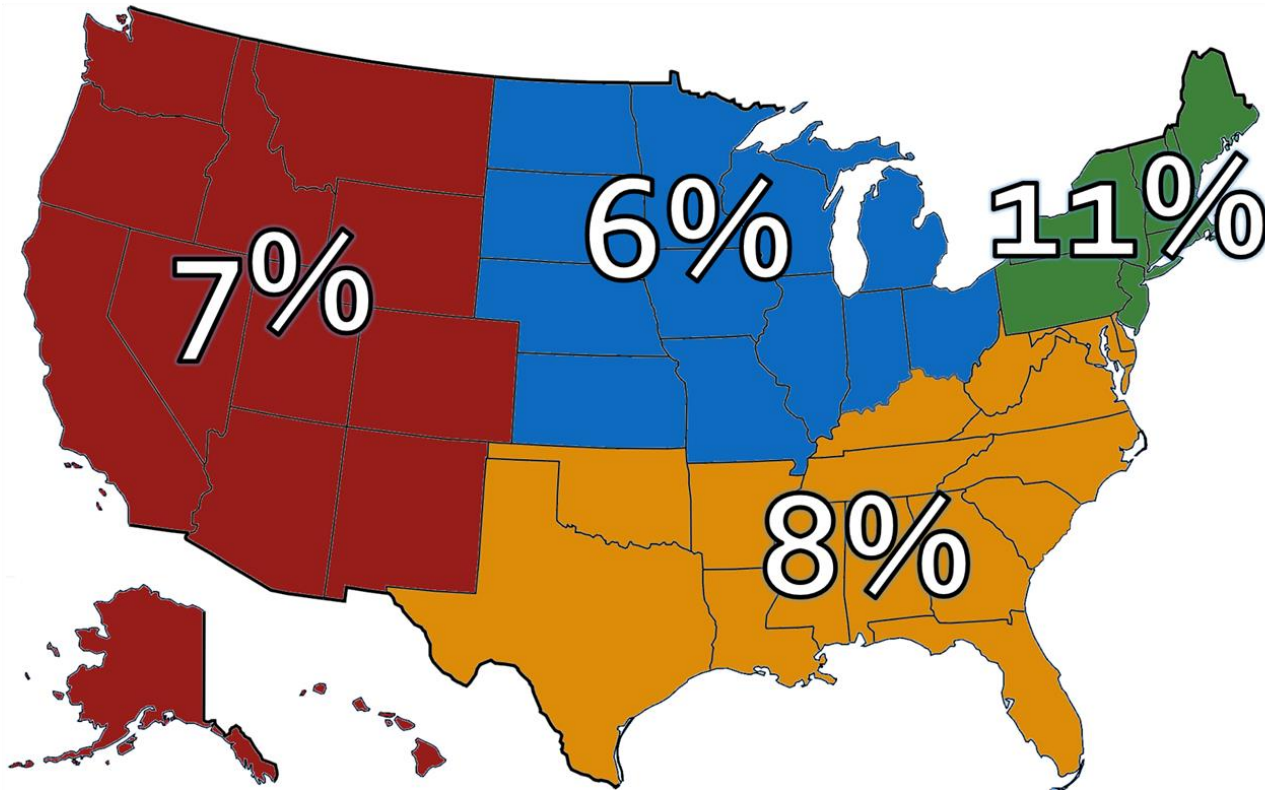
Quantitative Results – Publication Type

- 98 Journal Articles
- 64 News Media Articles
- 13 Dissertations
- 6 Magazine Articles
- 5 Books
- 5 Reports

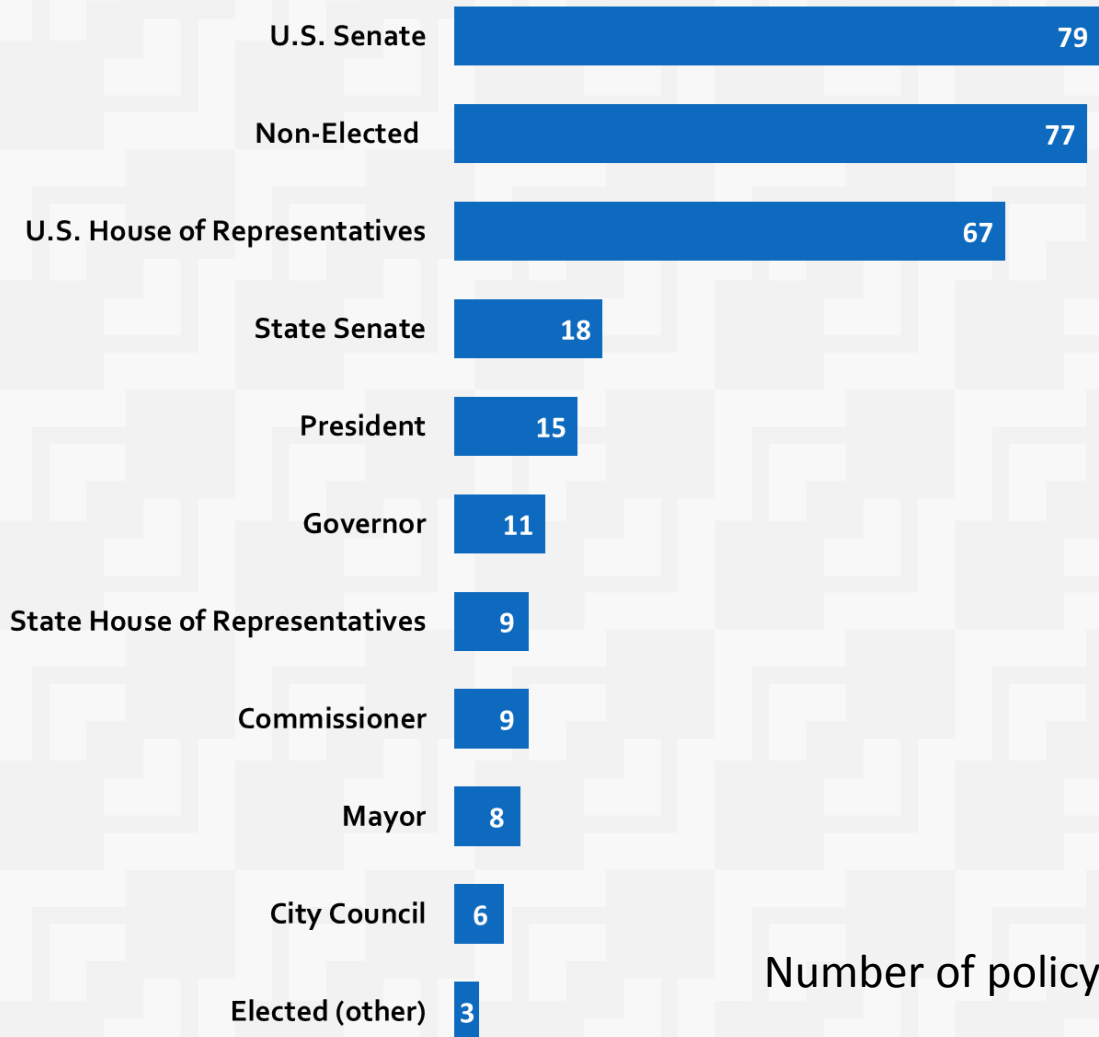


Quantitative Results – Geographic Focus

Nationwide 68%

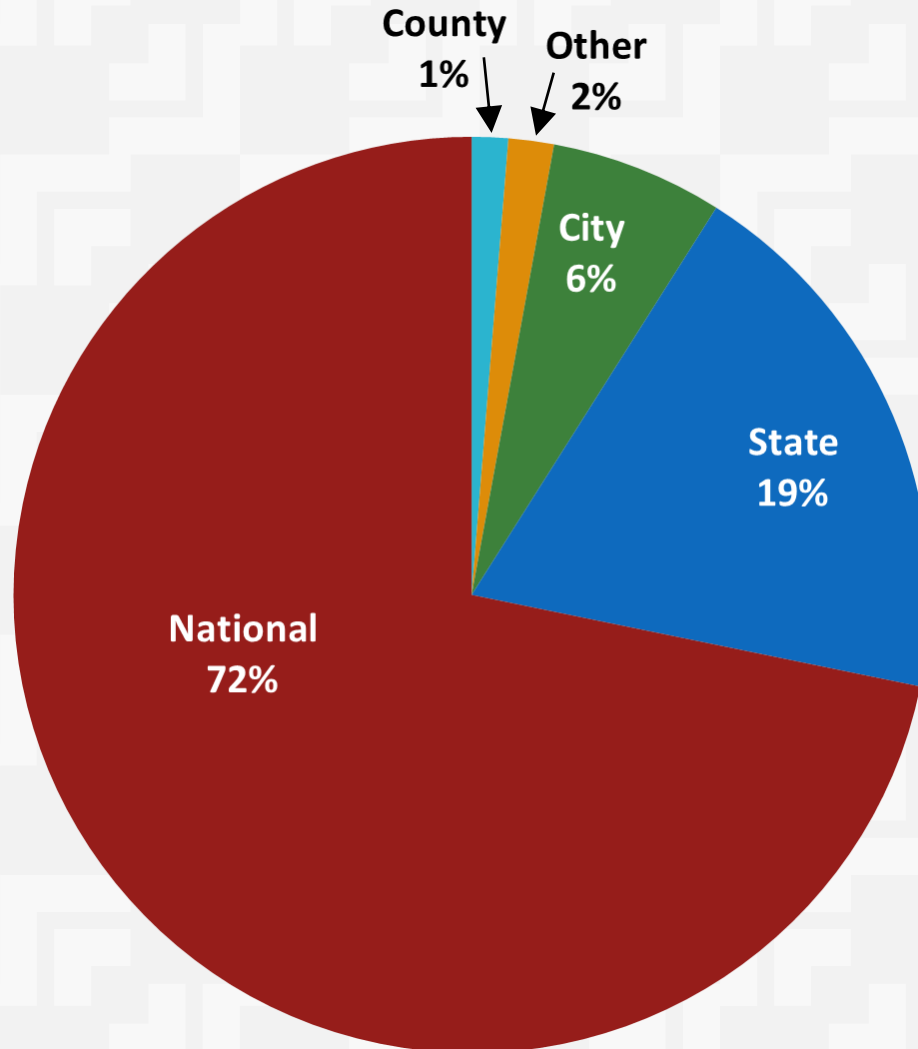


Quantitative Results – Policymaker Job

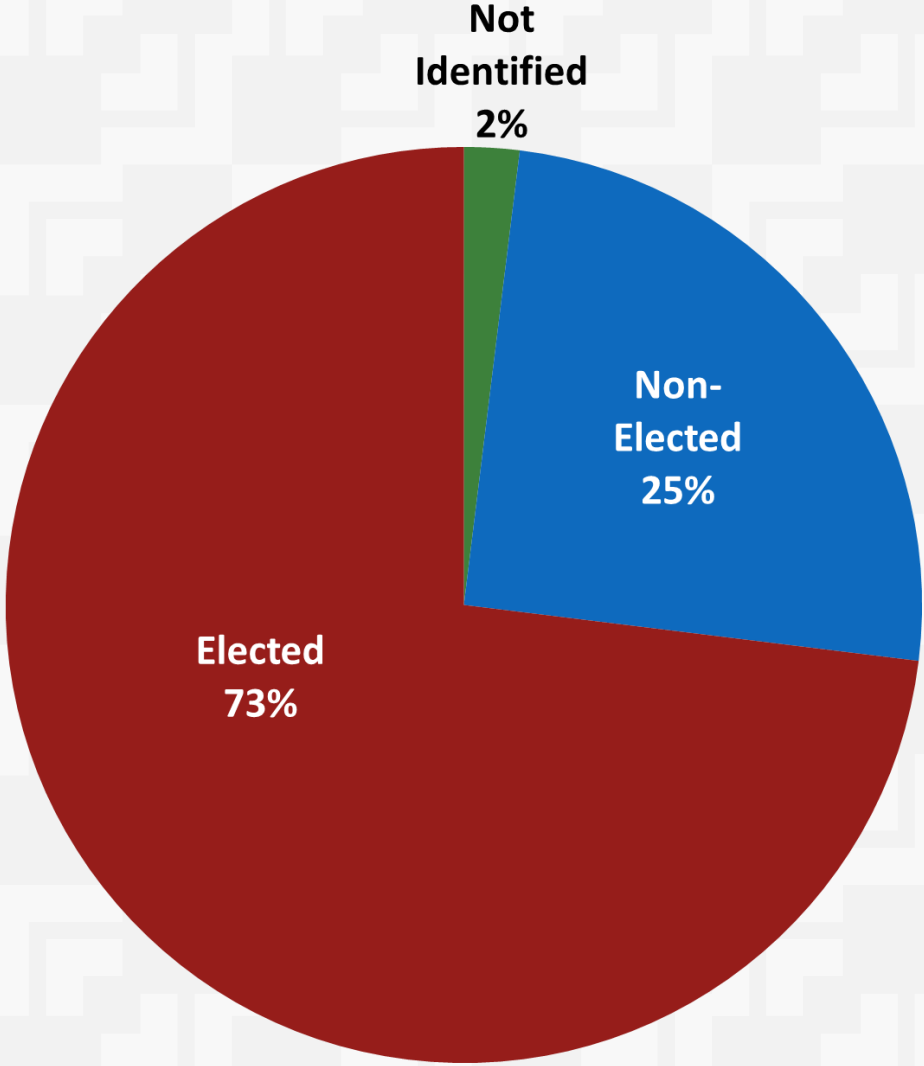


Number of policymakers identified ($n = 302$)

Quantitative Results – Level of Policymaking



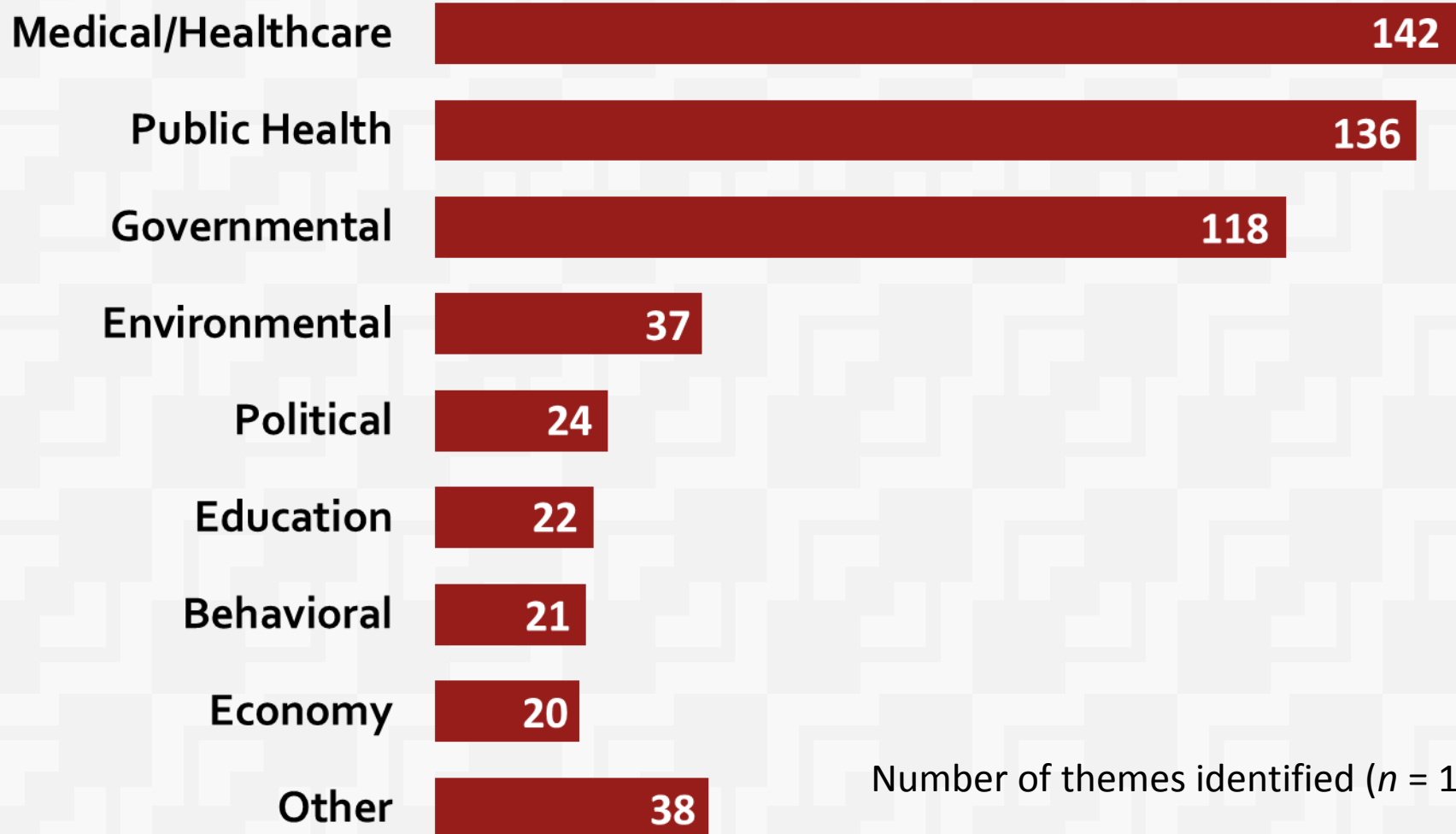
Quantitative Results – Elected Status



Qualitative Results – Research Questions

- RQ 1 – SDH Themes
- RQ 2 - Policymaker Awareness
- RQ 3 – Factors Influencing Action on SDH

RQ 1 – SDH Themes



Number of themes identified ($n = 1,116$)

RQ 1 – SDH Themes

Medical/Healthcare

- Insurance

- “Most members of Congress (on both sides) would agree that the progress (on universal or affordable healthcare) is far from adequate. Fortunately, more and more members on both sides of the aisle are increasingly concerned by the severity of the minority health crisis and understand the need to address it more effectively, through a federal action plan that increases minorities’ access to health care and improves the quality of care the receive.”

U.S. Senator, Ted Kennedy (D-Massachusetts) ¹

- Access

- Distance to hospital, affordability, availability

1. Kennedy, E. M. (2005). The role of the federal government in eliminating health disparities. *Health Affairs*, 24(2), 452-458.

RQ 1 – SDH Themes

Public Health

- Screening

- “Mortality rates show that the combined lack of early screening and access to care shortens the lives of African Americans and Hispanics needlessly.”

Texas State Representative Ruth Jones McClendon (D) ¹

- Awareness

- “We are so proud that these sponsors have come together to increase awareness about preventive health issues in the minority communities.”

U.S. Representative Kendrick Meek (D-Florida) ²

1. McClendon, R. J. (2012). McClendon Launches Minority Cancer Awareness Month in Texas. La Prensa.
2. (2004). Members of Congress, Public Health Experts and Community Leaders Convene in Miami, Discuss Racial and Ethnic Health Disparities. PR Newswire.

RQ 1 – SDH Themes

Governmental

- Funding
 - Rural Funding ¹

- Policy
 - Minimum Wage increase
 - “Raising the minimum wage is the least we can do to help families afford health care.”
Bill Samuel, Director of Legislation, AFL-CIO ²

1. Mitka, M. (2003) New centers to focus on health disparities. *JAMA*, 290(15), 1983.
2. Krisberg, K. (2007). Health issues at the top of agenda for new Congress. *The Nation's Health*, 37(1).

RQ 1 – SDH Themes

Why these Themes?

- National Spotlight
 - Healthcare most talked about theme over the past 16 years among policymakers
- Greatest Change in Shortest Time
 - Screenings prevent cancer and early deaths
- Re-election
 - Motive for some policymaker advocacy for change

RQ 2 - Policymaker Awareness

Personal Connection and Community
Involvement

RQ 2 - Policymaker Awareness

Personal Life

- Personal connection to issue
- Minority

Professional Life

- Work experience
- Community involvement

RQ 2 - Policymaker Awareness



RQ 2 - Policymaker Awareness

- Personal connection

- “ I fervently believe that the medical profession is a principled one and that medicine is rooted more deeply than perhaps any other profession in the ideals of equality. That is why I, and many other medical professionals, find the disparities in U.S. health care unacceptable. They are an affront to the U.S. promise of equal opportunity for all.”

U.S. Senator Bill Frist (R-Tennessee) ¹

- “Being a grateful cancer survivor made me realize we need a greater awareness that cancer impacts minority groups in ways that differ from the general population.”

Texas State Representative Ruth Jones McClendon (D) ²

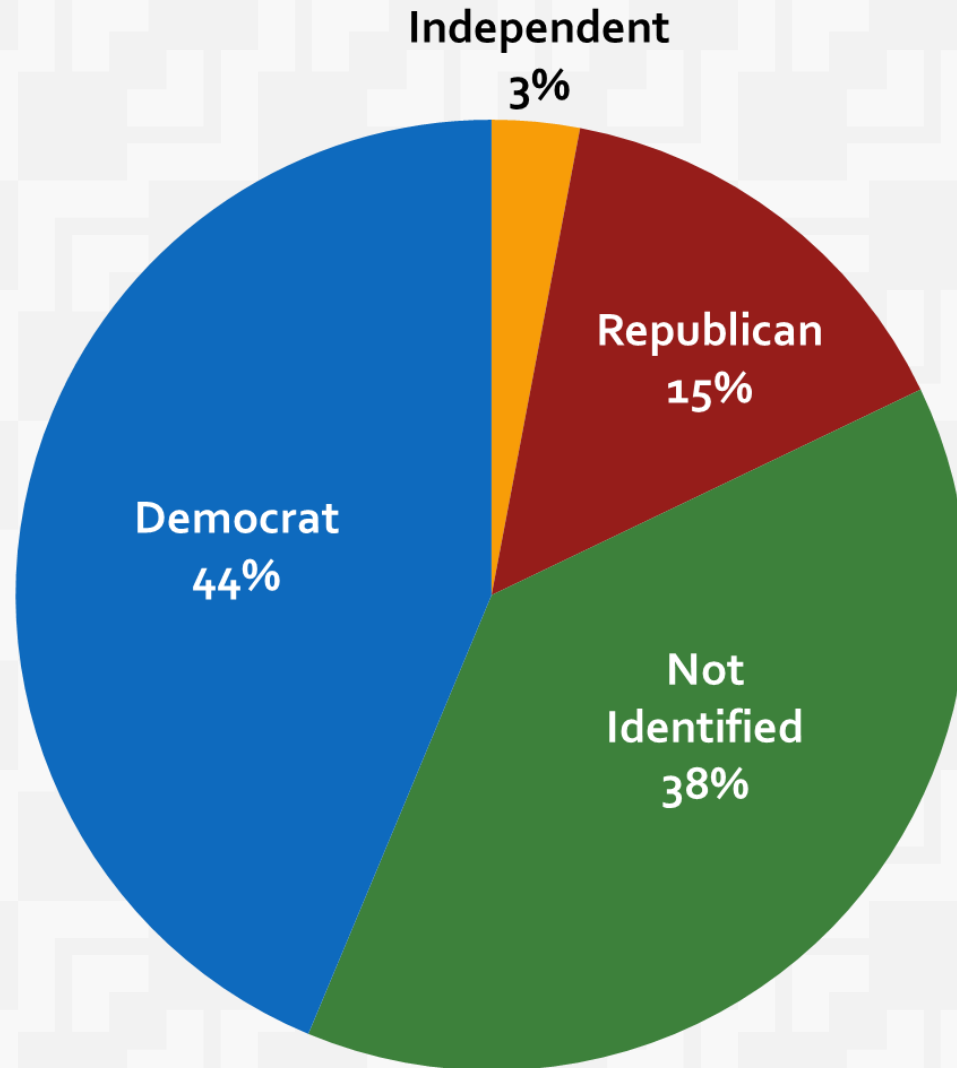
1. Frist, W. H. (2005). Overcoming Disparities In U.S. Health Care. *Health Affairs*, 24(2), 445-451.
2. McClendon, R. J. (2012). McClendon Launches Minority Cancer Awareness Month in Texas. *La Prensa*.

RQ 2 - Policymaker Awareness

- Minorities or family members who are minorities
 - “The goal is to achieve more equitable healthcare services across lines of race, and ethnicity, gender and geography”
U.S. Representative Donna Christensen (D- Virgin Islands) ¹
 - “Disparities in prostate health mirror the broader health gaps the African-American community is facing and we all must do our part to help improve early diagnosis and treatment of all prostate diseases.”
Louis Sullivan, Former Secretary of Health and Human Services ²

1. (2009). Lung Cancer Alliance Praises Congresswoman Donna Christensen for Introduction of Legislation to Correct Healthcare Disparities. PR Newswire.
2. (2003). Inequalities in Prostate Health Care Lead National Medical Association To Issue Call to Action Toward Closing Disparities Gap. PR Newswire

RQ 2 - Policymaker Political Affiliation



RQ 2 - Policymaker Awareness

- Democrats were more inclined to demand:
 - social security
 - more socialized healthcare
 - easier access to organic and healthy food
 - access to parks
 - vaccines
 - environmental protection

RQ 2 - Policymaker Awareness

- Involved in groups that talk about, promote, or address specific health issues
 - Groups: Medical Student Association, “Who’s My Doctor”
 - "Here in Baltimore, there are neighborhoods just blocks apart where the life expectancy differs by 20 years. These disparities tie into every single part of the work we do. They don’t only affect health, they also affect employment, education and opportunity"
Dr. Leana Wen, Baltimore City Commissioner ¹

1. Robeznieks, A. (2015). Baltimore’s recent violence a ‘call to action’ to address health disparities. *Modern Healthcare*, 45(49).

RQ 2 - Policymaker Awareness

- Involved in groups that talk about, promote, or address specific health issues
 - Group: Congressional Hispanic Task Force on Health and Environment
 - “The Community Health Workers Act of 2007”
 - “Community Health Workers play a key role in the battle against health disparities.”
U.S. Representative Hilda L. Solis (D- California)¹

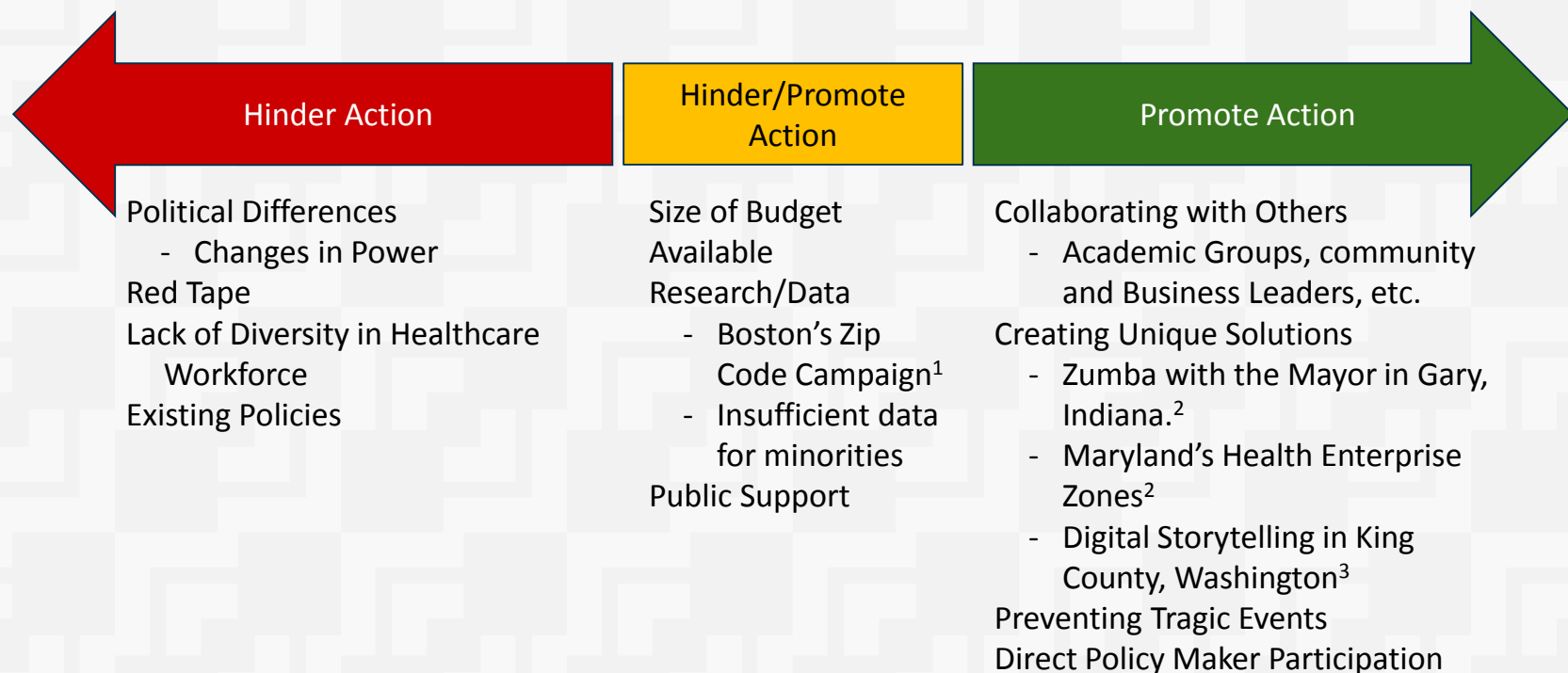
1. (2007). Congress, Media, Experts Come Together to Target Health Disparities at National Hispanic Medical Association Briefing. PR Newswire.

RQ 2 - Policymaker Awareness

- Takeaway

- Policymakers who were informed on SDH placed SDH higher on their agenda

RQ 3 – Factors Influencing Action on SDH



1. Mayor Menino Announces Awareness Campaign on Health Disparities. 2010.
2. Where You Live: The Making of Healthy Communities. Republic, Inc., vol. 21. 2013.
3. Exploring Digital Storytelling Applications in the Community: Implementation and Impact of Four Community Forums in King County, WA. Benson S. ProQuest Dissertations and Theses. 2012.

RQ 3 – Factors Influencing Action on SDH

The Importance of Data/Research

- "Data drives so many decisions in our lives. Data drives decisions on the best educational policies to implement and how to implement them."

Former Lt. Governor of Maryland, Anthony Brown (D)¹

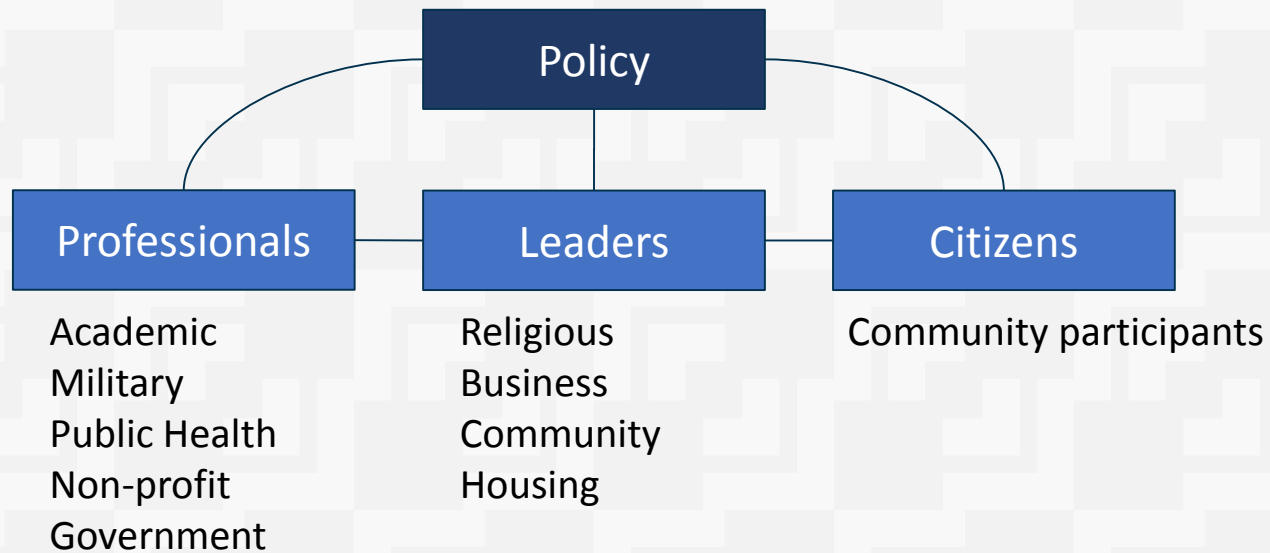
More research is needed on ethnic/racial minorities.²



1. (2013). Where You Live: The Making of Healthy Communities., Republic, Inc., vol. 21.
2. Kennedy. E. M. (2005).The role of the federal government in eliminating health disparities. Health Affairs, 24(2), 452-458.

RQ 3 – Factors Influencing Action on SDH

Collaborating for Policy: Thinking Collectively



What Does this Mean for Utah?

Lessons Learned

LESSON 1

Collaborate for Health – Build Relationships

Collective thinking and effort are critical for action.
Engage policymakers who can champion health causes that they can personally connect with and act upon.

LESSON 2

Health, Social Determinants, & Policy

Use health as a unifying factor across policies & sectors to address the social factors that result in inequities in health.

LESSON 3

Public Health as a Policy Priority

Health & access to quality health is a concern that resonates with policymakers & their constituents.

LESSON 4

Use Science as a Bridge to Policy

Use data and research to narrow the gap between science and policy decision-making.

LESSON 5

Create Effective Health Messages

Communicate health information effectively to non-scientific audiences.

Questions?