

Addressing Health Care Disparities – Why is it Important?

Baretta R Casey, MD, MPH, FAAFP

Regional Vice President

ACGME CLER Program

Context of disparities in the U.S. population.

- In 2008, the U.S. **population** was estimated at 304 million people.
- In 2008, approximately **33%**, or more than 100 million people, identified themselves as belonging to a **racial or ethnic minority** population.
- In 2008, **51%**, or 154 million people, were **women**.
- In 2008, approximately **12%**, or 36 million people not living in nursing homes or other residential care facilities, had a **disability**.
- In 2008, an estimated 70.5 million people lived in **rural areas** (**23%** of the population), while roughly 233.5 million people lived in **urban areas** (**77%**).
- In 2002, an estimated **4%** of the U.S. population ages 18 to 44 identified themselves as **lesbian, gay, bisexual, or transgender**.

<https://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities>

2010 National Healthcare Quality Report

- Health care quality and access are suboptimal, especially for minority and low-income groups.
- Quality is improving; access and disparities are not improving.
- Urgent attention is warranted to ensure improvements in quality and progress on reducing disparities with respect to certain services, geographic areas, and populations, including:
- Disparities in preventive services and access to care.
- Progress is uneven with respect to eight national priority areas:
 - Two are improving in quality: (1) Palliative and End-of-Life Care and (2) Patient and Family Engagement.
 - Three are lagging: (3) Population Health, (4) Safety, and (5) Access.
 - Three require more data to assess: (6) Care Coordination, (7) Overuse, and (8) Health System Infrastructure.
 - All eight priority areas showed disparities related to race, ethnicity, and socioeconomic status.

2010 NHQR and 2010 NHDR

The National Institutes of Health

- Defines health disparities as:
- the “differences in the incidence, prevalence, mortality, and burden of diseases and other adverse health conditions that exist among specific population groups in the United States.”

National Institutes of Health. Addressing Health Disparities: The NIH Program of Action. What are health disparities? Available at: <http://healthdisparities.nih.gov/whatare.html>. Accessed January 14, 2002.

Definitions of Health Disparities in the Literature

Health disparities are not the result of specific populations experiencing a different set of illnesses than those affecting the general population.

Rather, the overall susceptibility to disease is greater and illness rates are higher due to a broad range of environmental conditions.

The chief underlying cause of health disparities is increasingly understood to be social and economic inequality; i.e., social bias and institutional racism, limited education, poverty, and related environmental conditions that either directly produce ill health or promote unhealthy behaviors that lead to poor health.

Moss N. Socioeconomic disparities in health in the US: an agenda for action. Social Science and Medicine. 2000;51:1627-1638. 10
Pincus T, Esther R, DeWalt DA, Callahan LF.

Social conditions and self-management are more powerful determinants of health than access to care. Annals of Internal Medicine. 1998;129:406-411. 11

Murray-Garcia J, Herd D, Morello-Frosch R, Smith S. An Annotated Bibliography: Multicultural Health: Setting the Stage for Innovative and Creative Approaches. Woodland Hills, Calif: The California Endowment; 1999:9,11

Healthy People Goals

During the past 2 decades, one of Healthy People's overarching goals has focused on disparities.

- -In Healthy People 2000, it was to **reduce** health disparities among Americans.
- -In Healthy People 2010, it was to **eliminate**, not just reduce, health disparities.
- -In Healthy People 2020, that goal was expanded even further: to achieve health **equity**, **eliminate** disparities, and **improve** the health of all groups

Healthy People 2020

Recognizing the need for clarity, Healthy People 2020 defined a health disparity as:

“... a particular type of health difference that is closely linked with economic, social, or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater social or economic obstacles to health based on their racial or ethnic group, religion, socioeconomic-status, gender, age, or mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

[Public Health Rep. 2014 Jan-Feb; 129\(Suppl 2\): 5-8.](#)
doi: [10.1177/00333549141291S203](https://doi.org/10.1177/00333549141291S203)

Healthy People 2020

Definition of the determinants of health:

- Powerful, complex relationships exist between health and biology, genetics, and individual behavior, and between health and health services, socioeconomic status, the physical environment, discrimination, racism, literacy levels, and legislative policies. These factors, which influence an individual's or population's health, are known as *determinants of health*.

Healthy People 2020: Determinants of Health

For all Americans, other influences on health include the availability of and access to:

- High-quality education
- Nutritious food
- Decent and safe housing
- Affordable, reliable public transportation
- Culturally sensitive health care providers
- Health insurance
- Clean water and non-polluted air

Healthy People 2020 Assessment

Throughout the next decade, Healthy People 2020 will assess health disparities in the U.S. population by tracking rates of illness, death, chronic conditions, behaviors, and other types of outcomes in relation to demographic factors including:

- Race and ethnicity
- Gender
- Sexual identity and orientation
- Disability status or special health care needs
- Geographic location (rural and urban)

Health Disparities verses Health Care Disparities

Disparities in “health” and “health care” are related, but not synonymous, concepts.

A “[health disparity](#)” refers to a higher burden of illness, injury, disability, or mortality experienced by one population group relative to another.

A “[health care disparity](#)” typically refers to differences between groups in health insurance coverage, access to and use of care, and quality of care received.

[Petry Uбри](#) and [Samantha Artiga](#), “Disparities in Health and Health Care: Five Key Questions and Answers.” Kaiser Family Foundation. Published: Aug 12, 2016

Health and Health Care Disparities

- As the population becomes more diverse, it is increasingly important to address health disparities.
- Disparities in health and health care not only affect the groups facing disparities, but also **limit overall improvements in quality of care and health** for the broader population and **result in unnecessary costs**.
- Today, many groups face **significant disparities in access to and utilization of care**.
- Additionally, some groups have **high rates of certain health conditions and experience poor health outcomes**.

*Disparities in Health and Health Care: Five Key Questions and Answers, [Petry Ubri](#) and [Samantha Artiga](#)
Published: Aug 12, 2016 Kaiser Family Foundation*

Health Equity

Health equity is the principle underlying a commitment to reduce—and, ultimately, eliminate—disparities in health and in its determinants, including social determinants. Pursuing health equity means striving for the highest possible standard of health for all people and giving special attention to the needs of those at greatest risk of poor health, based on social conditions.

Simple said: Equity can be defined as the quality of treating individuals fairly based on their needs and requirements.

Public Health Rep. 2014 Jan-Feb; 129(Suppl 2): 5–8. doi: [10.1177/003335491412915203](https://doi.org/10.1177/003335491412915203)

Health Equality

Equality can be defined as **treating each and every individual in the same manner** irrespective of needs and requirements.

Simple said: Whatever the necessity of the individual is, it is ignored to promote the ideals of fairness and equal treatment.

Difference Between Equity and Equality Posted on February 24, 2011 by [Nedha](#) Last updated on: June 22, 2015

Characteristics of Equity and Equality:

- **Principle:**

Equity: Equity is a principle that is based upon **justness and fairness**.

Equality: Equality demands everyone be **treated at the same level**.

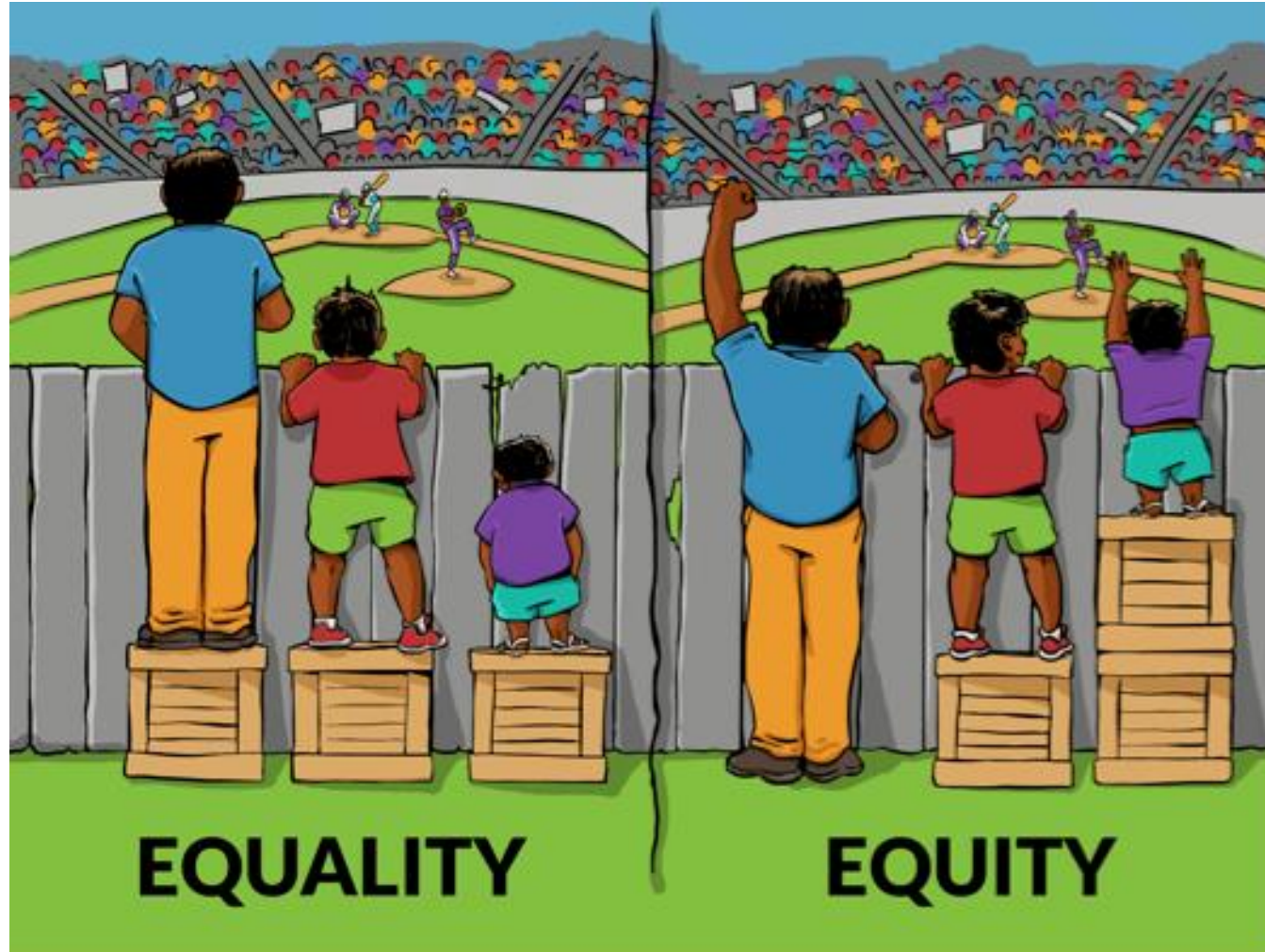
- **Needs and Requirements:**

Equity: Attention is paid to individual **needs and requirements**.

Equality: Individual **needs and requirements are ignored**.

Difference Between Equity and Equality Posted on February 24, 2011 by [Nedha](#) Last updated on: June 22, 2015

Equity versus Equality



Clinical Outcomes of Known Vulnerable Populations

Vulnerable populations require special attention in the **design of health care quality measurement strategies** for three distinct reasons:

1. **Focus on quality of care experienced:**

Can provide insight into health system problems or identification of problems that otherwise could go undetected

2. **Some vulnerable groups are more likely to fall through the cracks:**

Can affect their ability to safeguard their own needs & interests adequately

3. **Health care quality problems experienced:**

Are not well captured by measurement efforts designed for the general population

Variability of Care in Vulnerable Populations

- Care may need to be variable to assure that the outcomes are the same
- Or care may need to not have any variability so the outcomes are the same
- Populations vulnerable to health care disparities problems need to be accounted for:
 - in the design of effective systems for health care delivery
 - systemic assessments
 - preventive interventions
 - education
 - coordination and integration of care
 - psychosocial support
 - the choice of appropriate health care quality measures
 - must be accompanied by evaluation to determine effectiveness
i.e., is there evidence supporting improved functional status or other clinical outcomes resulting from the health care delivery approach

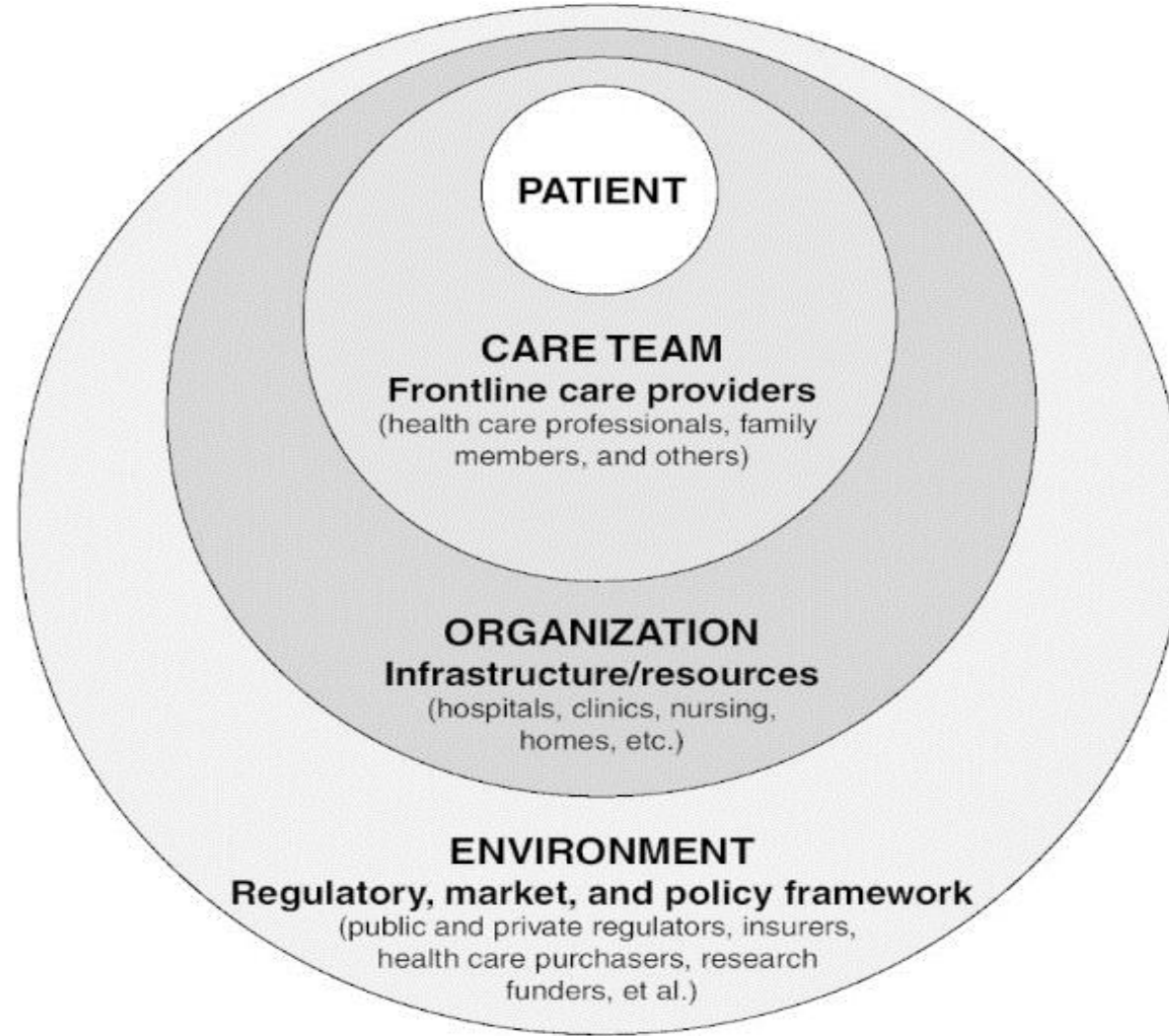
Applying this Inside the Walls of the Clinical Learning Environments

A Definition of Systems Thinking: A Systems Approach

Systems thinking (approach) is a set of **synergistic analytic skills** used to improve the **capability of identifying and understanding systems, predicting their behaviors, and devising modifications** to them in order to **produce desired effects**. These **skills work together as a system**.

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Four Level Model of a Health Care System



National Academy of Engineering (US) and Institute of Medicine (US) Committee on Engineering and the Health Care System; Reid PP, Compton WD, Grossman JH, et al., editors. Building a Better Delivery System: A New Engineering/Health Care Partnership. Washington (DC): National Academies Press (US); 2005. 2, A Framework for a Systems Approach to Health Care Delivery. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK22878/>

Quality Assurance vs Quality Improvement

Quality Assurance

- Individual focused
- Perfection myth
- Solo practitioners
- Peer review ignored
- Errors punished

Quality Improvement

- Systems focused
- Fallibility recognized
- Teamwork
- Peer review valued
- Errors seen as opportunities for learning

Module 4. Approaches to Quality Improvement. Content last reviewed May 2013. Agency for Healthcare Research and Quality, Rockville, MD. <http://www.ahrq.gov/professionals/prevention-chronic-care/improve/system/pfhandbook/mod4.html>

Additional References

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3. U.S. Department of Health and Human Services, Office of Minority Health. National Partnership for Action to End Health Disparities. The National Plan for Action Draft as of February 17, 2010 [Internet]. Chapter 1: Introduction. Available from:
<http://www.minorityhealth.hhs.gov/npa/templates/browse.aspx?&lvl=2&lvlid=34>.