

Health Inequities: A Call to Action

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"Of all the forms of inequality, injustice in health care is the most shocking and inhumane."

Dr. Martin Luther King, Jr.



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Definitions

Health Inequity

Disparities in health that are a result of systemic, avoidable and unjust social and economic policies and practices that create barriers to opportunity.

• Health Disparities

Preventable differences in the burden of disease, injury, violence, or in opportunities to achieve optimal health experienced by socially disadvantaged racial, ethnic, and other population groups, and communities. Health disparities exist in all age groups, including older adults.



Why focus on disparities?

FAMILY & PARENTING

Study Finds Black Babies Are More Likely To Survive When Their Doctors Are Black

NEWS



Researchers tracked 1.8 million childbirths for this study.

Serena Williams and the realities of the 'maternal mortality crisis'

The tennis superstar revealed her own health scare after having her first child, and is highlighting how US childbirth deaths



COVID Watch: Increase in obesity in Kentucky puts people at higher risk from COVID-19

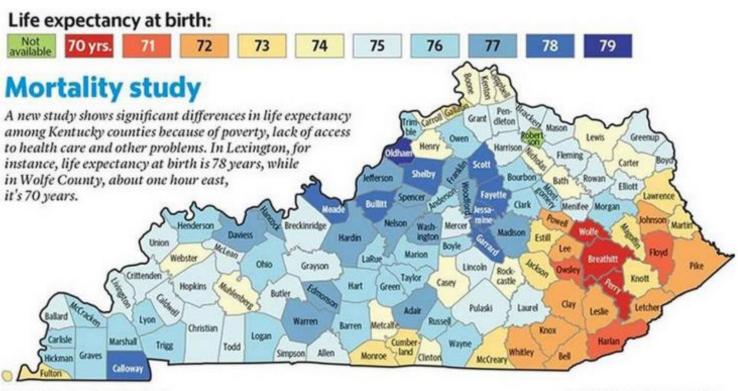
Deborah Yetter Louisville Courier Journal

Published 6:27 a.m. ET Sep. 21, 2020



Kentucky Life Expectancy

- Life expectancy in Kentucky ranks 45th at 75.8 years, compared to 78.6 nationally.
- Location is critical, with Wolfe, Perry and Breathitt with the lowest life expectancy.



Sources: VCU Center on Society and Health

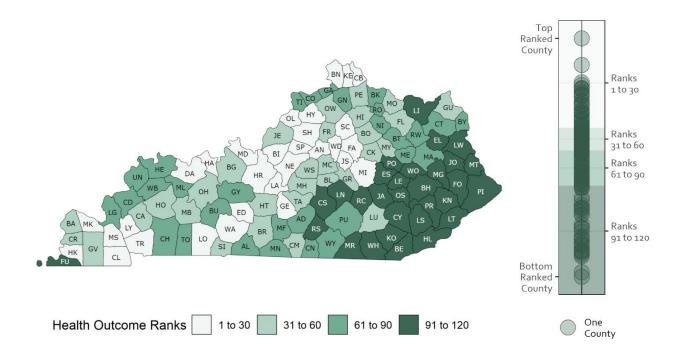
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Kentucky Health Disparities

- Ranks #1 cancer deaths with 185.7 per 100,000 people.
- Ranks #3 adults overweight/obese
- With 72% of adults self-reporting
- Ranks #4 drug overdoses with 37.2 per 100,000 people.
- Ranks #9 heart disease deaths with 195.9 per 100,000 people.
- Ranks #13 liver related deaths with 12.8 per 100,000.
- Ranks #21 suicides with 16.9 per 100,000 people.

2019 Kentucky Health Outcome Ranking #43





Kentucky Health Disparities: Children

KY LEGISLATURE

Kids Count: Kentucky drops to 37th in child well-being, Indiana unchanged at 29th

Deborah Yetter Louisville Courier Journal

Published 5:05 p.m. ET Jun. 22, 2020 | Updated 5:05 p.m. ET Jun. 22, 2020

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Metro Louisville: Changing Demographics

Uncovering the Root Causes of Our Health



TOTAL POPULATION	2000 693,604		2010 741,096		2015 763,623	
Other*	1,658	0.2%	1,921	0.3%	1,648	0.2%
Multiple Races**	7,120	1.0%	13,547	1.8%	16,226	2.1%
Asian	9,748	1.4%	16,393	2.2%	20,201	2.6%
Hispanic or Latino	12,370	1.8%	32,542	4.4%	37,359	4.9%
Black or African American	130,743	18.8%	153,036	20.6%	161,960	21.2%
White	531,965	76.7%	523,657	70.7%	526,229	68.9%
Female	362,005	52.2%	383,397	51.7%	394,885	51.7%
Male	331,599	47.8%	357,699	48.3%	368,738	48.3%



Metro Louisville: Health Disparities

- All Cause Mortality
 - Men have higher death rates than women; Black populations are dying at greater rates than their same gender population
- Life Expectancy
 - In general, East Louisville residents live longer than West Louisville residents, in some communities by 12.6 yrs
- Infant Health
 - Premature births, low birth weights and infant mortality disproportionally effect Black babies
- Asthma
 - More Black children are hospitalized with asthma than any other group
- Cancer
 - Overall Black and White men are dying at higher rates than women from any kind of cancer
- Diabetes
 - Black men are dying from diabetes at rates 2X higher than the rate of Metro Louisville
- Heart Disease
 - Black people die at higher rates than their white counterparts



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Kentucky COVID-19 as of 9.14

- Total cases 57,282
- Ever Hospitalized 8.56%
- Ever in ICU 2.54%

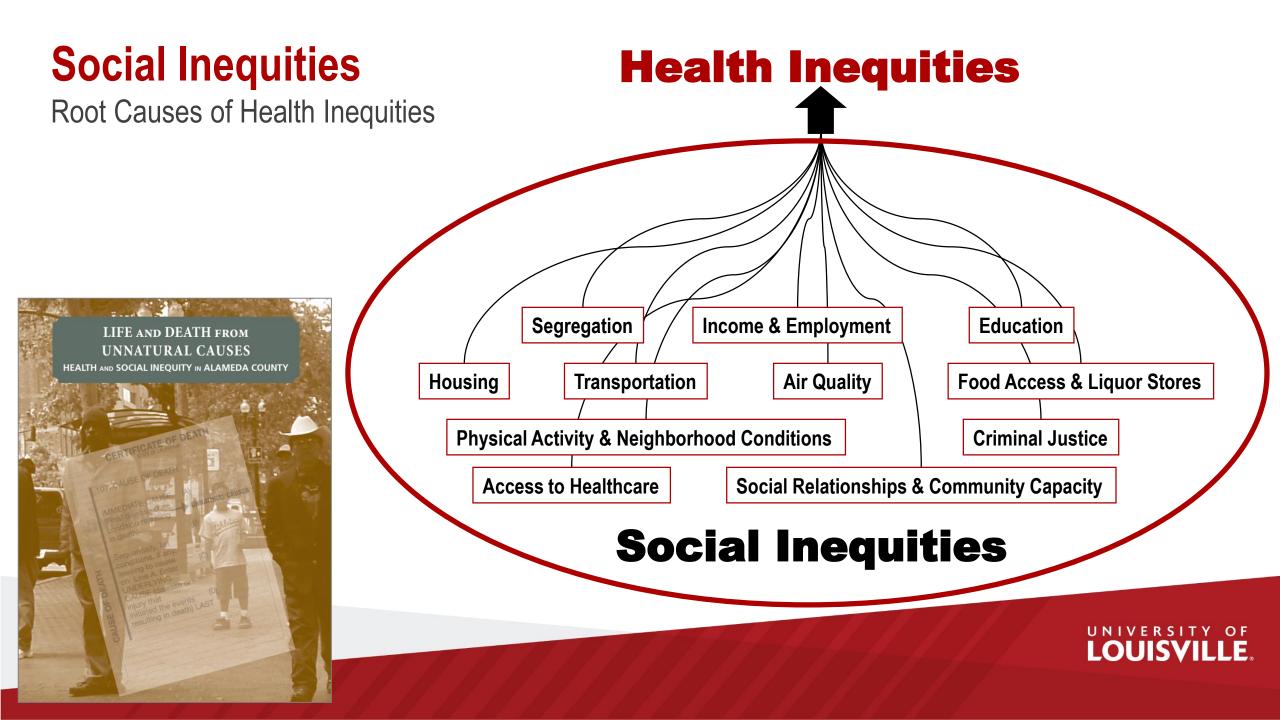
Ethnicity of Cases Where Ethnicity Known (63.20% of Total Known)		
Non-Hispanic	88.35%	
Hispanic	11.65%	

Ethnicity of Deaths Where Ethnicity Known (87.23% of Total Known)			
Non-Hispanic	96.23%		
Hispanic	3.77%		

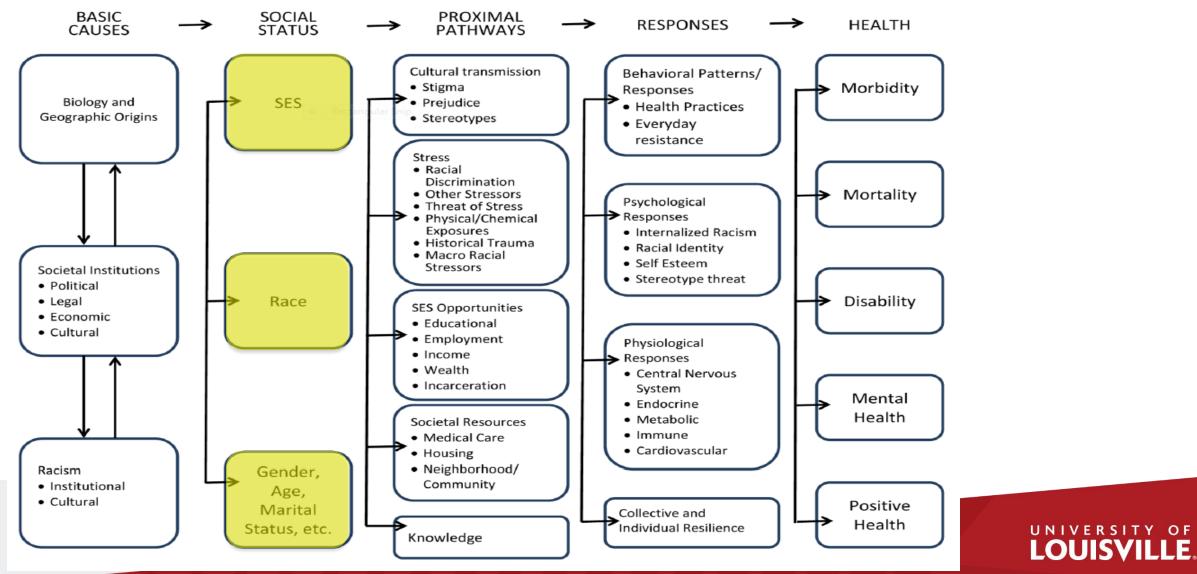
Race of Cases Where Race Known (68.43% of Total Known)				
White	80.34%			
Black	11.73%			
Multiracial	5.75%			
Asian	1.66%			
American Indian or Alaska Native	0.38%			
Native Hawaiian or Other Pacific	0.14%			

Race of Deaths Where Race Known (90.99% of Total Known)		
White	83.49%	
Black	13.00%	
Multiracial	2.37%	
Asian	1.14%	





A framework for the factors contributing to health outcomes



University of Louisville: Current Work

- Area Health Education Centers
- Investment in Hospital Systems
- Pipeline Programs
- Research
- Curriculum Changes for Health Professionals
- Trainings (Unconscious Bias)



Opportunities for Change

- Ensure health in all policies using an equity lens
 - Improves accountability of health impacts at all levels of policy-making
 - Emphasis placed on the consequences of public policies on health systems, determinants of health, and well-being
 - Contributes to sustainable development





Opportunities for Change

- Create community/institutional policies that address social determinates of health (i.e. housing, food deserts, environmental factors, access to health care; language barriers, etc)
- Research
 - Fund research that studies the long-term consequences of policies
 - Invest in research conducted for and by at risk populations this can help inform interventions
- Education
 - Cultural responsive care education as an ongoing requirement for healthcare providers
- Invest in enhancing digital capabilities in under-resourced communities (i.e., telemedicine; educational platforms, etc.)
- Diversify the healthcare workforce by investing in pipeline programs to prepare students for the field
- Invest in community health workers, educate communities and address issues of medical mistrust



Questions?

