Health Equity 101

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Introduction

Why are we talking about health equity at this conference?
This presentation represents the fulfillment of the required Association of Diabetes Care & Education Specialists' (ADCES') 2022 National Standards for DSMES (1) to emphasize person-centered services to promote health equity in the delivery of DSMES.

Learning Objectives:

1. Audience will learn about health equity in rural and frontier communities
2. Audience will learn about health disparities in diabetes data

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Definitions

What are the differences between social determinants of health, health disparities and health equity?

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What are Health Disparities?

Health disparities result from multiple factors, including:

•Poverty
•Environmental threats
•Inadequate access to health care
•Individual and behavioral factors
•Educational inequalities

We can improve health risks and reduce disparities and inequities by addressing social determinants of health.

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What are Social Determinants of Health?

•Income and social protection
•Education
•Unemployment and job insecurity
•Working life conditions
•Food insecurity
•Housing, basic amenities and the environment
•Early childhood development
•Social inclusion and non-discrimination
•Structural conflict
•Access to affordable health services of decent quality.

Social Determinants of Health - Healthy
People 2030 | health.gov

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What is 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.

What Are Health Disparities and Health Equity? We Need to Be Clear - PMC (nih.gov)

What is Health Equity? | Health Equity | CDC

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By the Numbers: Diabetes in America | Diabetes | CDC

Percentage of US Adults 18 or Older With Diagnosed Diabetes, by Race and Ethnicity, 2018–2019		US Adults 18 or Older With Diagnosed Diabetes, by Family Income Level, 2018–2019		Percentage of US Adults 18 or Older With Diagnosed Diabetes, by Education Level, 2018–2019	
Race and Ethnicity	Percentage	Family Income Level	Percentage	Education Level	Percentage
American Indian or Alaska Native	14.5	Less than 100% FPL	13.1	Less than high school	13.1
Asian, non-Hispanic	9.1	100%–299% FPL	10.3	High school	9.1
Black, non-Hispanic	12.1	300%–499% FPL	7.7	More than high school	6.9
Hispanic, overall	11.7	500% FPL or more	5.1		
White, non-Hispanic	6.9				

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What can we infer from data in Wyoming?
U.S. Census Bureau QuickFacts: Wyoming

- 11.8% of Wyomingites living in poverty
- 14% of Wyomingites under 65 do not have health insurance
- 6.1% of Wyomingites do not have a high school diploma
- 7.7% of Wyomingites are not identified as white
- **The average distance in Wyoming between DPP and DSMES programs is 200 miles.**

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The data tells a story about health equity, but you know your community best!

Diabetes is the eighth leading cause of death in the United States. It is more common among people who are members of some racial and ethnic minority groups and groups with lower socioeconomic status.

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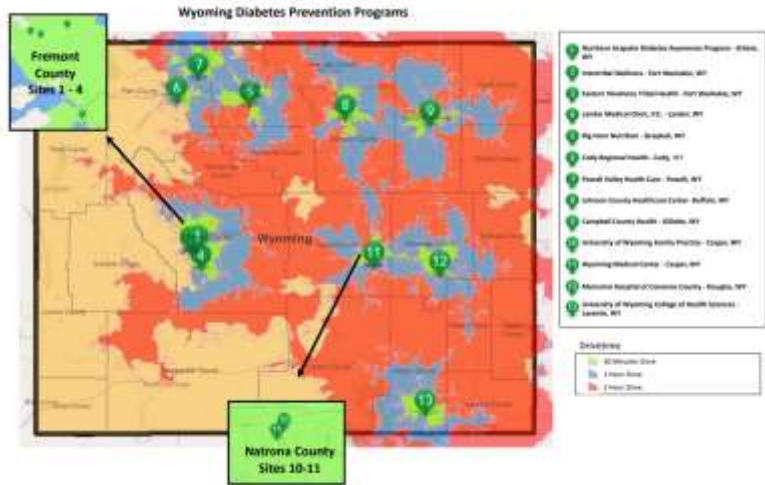
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Percent of Population Living in Poverty 2020 by County

Wyoming's Poverty Reality Snapshot

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Wyoming's Geographical Barriers

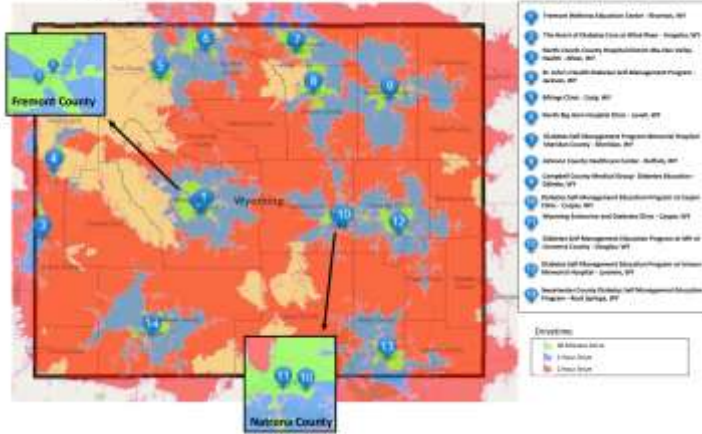The average drive time to a DPP in Wyoming is 2 hours.

How does this affect health equity in Wyoming?

What tools and resources might we use to mitigate these drive times?

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Wyoming's Geographical Barriers

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Health equity means everyone has a fair and just opportunity to be as healthy as possible. This requires:

Removing health disparities and barriers to health:

- Poverty
- Discrimination and Bias
- Power Imbalances
- Geographic Region

CDC Health Disparities & Inequalities Report (CHDIR) - Minority Health - CDC

Addressing SDOH improves the conditions where we live, work, and play:

- Good jobs with a livable wage and benefits
- Quality education
- Affordable, quality housing
- Safe environments
- Access to quality, affordable healthcare
- Address social determinants of health, health disparities and health equity

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Real World Examples of Barriers

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Unsafe Sidewalks

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Differences in access and quality of public education

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Low wage jobs

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Medical bias and discrimination

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Lack of green space and fresh foods

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Inability to engage in community activities
Health & Democracy Index (hdhp.us)

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Poverty: hard choices between cost of care and other needs

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Thoughts on Creating Safe Spaces for Care

-Equality vs. Equity
-Inclusion vs. Belonging
-Acceptance vs. Tolerance

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Final tips and takeaways

What is one takeaway that you will take with you today from this presentation?

- Catch 'Em Upstream!
- Others?

Additional Resources from the CDC

- Health Equity Fact Sheet | Health Equity | CDC
- Conversations in Equity | Blogs | CDC
- Health Equity In Action | Health Equity (cdc.gov)
- Health Equity Intervention and Action Principles | Health Equity Projects | CDC
- Health Equity Information and Resources - Wyoming Department of Health
- Healthier Wyoming | Wyoming Center on Aging | University of Wyoming (uwyo.edu)

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Thank you!

Stay in Touch!

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