Health Impacts of Structural Racism

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February 10, 2022
“Of all the forms of inequality, injustice in health care is the most shocking and inhuman.”

The Rev. Martin Luther King Jr. at the Second Annual Convention of the Medical Committee for Human Rights, Chicago, March 25, 1966
Equality

The assumption is that everyone benefits from the same supports. This is equal treatment.

Equity

Everyone gets the supports they need (this is the concept of "affirmative action"), thus producing equity.

Justice

All 3 can see the game without supports or accommodations because the cause(s) of the inequity was addressed. The systemic barrier has been removed.
When did you first notice that people did not have the same things?

Some areas to consider:
- Housing
- Food
- Clothes
- Education
- Healthcare
- Jobs
Why do we need to understand and consider health disparities and health inequities?

What social determinants are contributing to COVID-19 outcomes?
Health

“Health promotion is the process of enabling people to increase control over, and to improve, their health. To reach a state of complete physical, mental and social well-being, an individual or group must be able to identify and to realize aspirations, to satisfy needs and to change or cope with the environment. Health is, therefore, seen as a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities. Therefore, health promotion is not just the responsibility of the health sector, but goes beyond healthy life-styles to well-being.”

Requires a secure foundation in:

- peace
- shelter
- education
- food
- income
- a stable eco-system
- sustainable resources
- social justice and equity

WHO The 1st International Conference on Health Promotion, Ottawa, 1986
Health Disparities

- Health disparity: higher burden of illness, injury, disability, or mortality experienced by one group relative to another.
- Health care disparity: differences between groups in health insurance coverage, access to and use of care, and quality of care.
- Contributors:
  - Individual
  - Healthcare provider
  - Healthcare system: financial, delivery of care
  - Social and environmental factors
# Health Disparities are Driven by Social and Economic Inequities

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**Health and Well-Being:**
- Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations
COVID-19 Risk Factors

- Black and Latinx populations are being disproportionately impacted
- Disparities are seen in the local, national, international levels
- Likely an underestimate of the disparities given incomplete data
- Health disparities may fuel an unsupported argument that there are inherent biological differences
- Occupational and social risk of exposure
- Access to quality healthcare
- Food and housing security
COVID-19 Morbidity and Mortality Data

- Population vs. infection, hospitalization, mortality – race and ethnicity
- Disproportionately increased rates
  Blacks people dying 3.4x the rate of white people from COVID-19
- Examples across the US:
  - Louisiana: 77% of hospitalizations and 70% deaths from COVID-19 are Black, but population only 31% in the state
  - Milwaukee County, Wisconsin, Black residents comprise 27% of population, 41% of county cases and 53% of COVID-19 death.
  - Chicago: Black residents represent 30% of population but 46% of cases and 57% of death. In Illinois, Black residents make up 15% of population and 40% of deaths.
Figure 1

COVID-19 Cases, Deaths, and Total Population in the United States by Race/Ethnicity, as of October 5, 2021

NOTE: Totals may not sum to 100 due to rounding. Persons of Hispanic origin may be of any race but are categorized as Hispanic; other groups are non-Hispanic. Other race includes multiple race individuals.

Racial Gaps in COVID-19 Cases Narrow Among White, Black and Hispanic People in September 2021

COVID-19 Weekly Cases in the United States per 100,000 by Race/Ethnicity, June 2020 to September 2021
Many Americans are facing substantial economic hardship during the pandemic. Latino and Black people experience these hardships at significantly higher rates than white people.
Latino and Black people, women, and people with lower incomes are most at risk of mental health concerns because of the pandemic.

Percent of respondents who reported experiencing stress, anxiety, or great sadness that they found difficult to cope with on their own since the COVID-19 pandemic began
Social Determinants of COVID-19 Disparities

Social Determinants of Health

- Education Access and Quality
- Health Care Access and Quality
- Economic Stability
- Neighborhood and Built Environment
- Social and Community Context
Residential Segregation and COVID-19

- In pandemics, conditions in which you live/work impact risk of exposure
  - Public transportation
  - 1 in 5 Black, 1 in 6 Hispanic, 1 in 3 white workers able to work remotely
  - Higher density – harder to physically distance
    - Multi-generational homes
    - Other
  - Workplace exposures: public-facing service industry
    - Jason Hargrove: 50yo bus driver in Detroit
- Health care access
Occupational Segregation

- Higher service industry workers
- Health benefits lacking – less likely to have insurance, increased exposure due to nature of work, less likely to have sick leave, working remotely not an option
- Increased unemployment at every level of education
"Racism is 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, and saps the strength of the whole society through the waste of human resources."

-- APHA Past-President Camara Phyllis Jones, MD, MPH, PhD
Racism and COVID-19 Health Disparities

- Individual racism: Bigotry or discrimination by an individual based on race.
- Institutional racism: Policies, practices and procedures that favor white people over people of color, often unintentionally or inadvertently.
- Structural racism: A history and current reality of institutional racism across all institutions, combining to create a system that negatively impacts communities of color.
  - Points to multiple institutions
  - Ways in which institutions interact to produce barriers to opportunity and perpetuate racial disparities.
Disproportionate COVID-19 Mortality

Higher COVID related mortality in the Black population

Increased COVID exposure
1. Poverty
2. Residential Crowding
3. Frontline Occupation
4. Public Transportation

Higher burden of recognized comorbidity not effectively treated
1. System failure
2. Patient distrust

Higher burden of unrecognized comorbidity
1. Lack of access to healthcare
2. Lack of patient expectation that engagement would be meaningful
"I put forth and maintain, if I was white, I wouldn't have to go through that. This is how Black people get killed, when you send them home, and they don't know how to fight for themselves."
Healthy People Goals

- 2000: reduce health disparities among Americans
- 2010: eliminate, not just reduce, health disparities
- 2020: achieve health equity, eliminate disparities, and improve the health of all groups
- 2030: How Does Healthy People 2030 Address SDOH?
  - One of Healthy People 2030’s 5 overarching goals is specifically related to SDOH: “Create social, physical, and economic environments that promote attaining the full potential for health and well-being for all.”
  - In line with this goal, Healthy People 2030 features many objectives related to SDOH. These objectives highlight the importance of "upstream" factors — usually unrelated to health care delivery — in improving health and reducing health disparities.
“We are concerned about the constant use of federal funds to support this most notorious expression of segregation. Of all the forms of inequality, injustice in health is the most shocking and the most inhuman because it often results in physical death.

“I see no alternative to direct action and creative nonviolence to raise the conscience of the nation.”
If you can’t fly, then run.
If you can’t run, then walk.
If you can’t walk, then crawl, but by all means, keep moving.

- Martin Luther King Jr.