

# Ethics and Health Disparities: A Journey Toward Justice

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# Objectives:

- Define health disparities, healthcare disparities, and health inequity.
- Discuss why it is important to understand these disparities as they relate to bioethics and social justice.
- Exchange best practices among multidisciplinary stakeholders to eliminate health disparities and build a culture of health in our communities.

# What are Health Disparities?

Health disparities are differences in the quality of health and health care across different populations. They exist when disease and death affect some communities at a higher rate than others.

*(Maryland Department of Health and Mental Hygiene)*

Health disparities are closely linked with social, economic, and/or environmental disadvantage.

*(Healthy People 2020)*

# What are Healthcare Disparities?

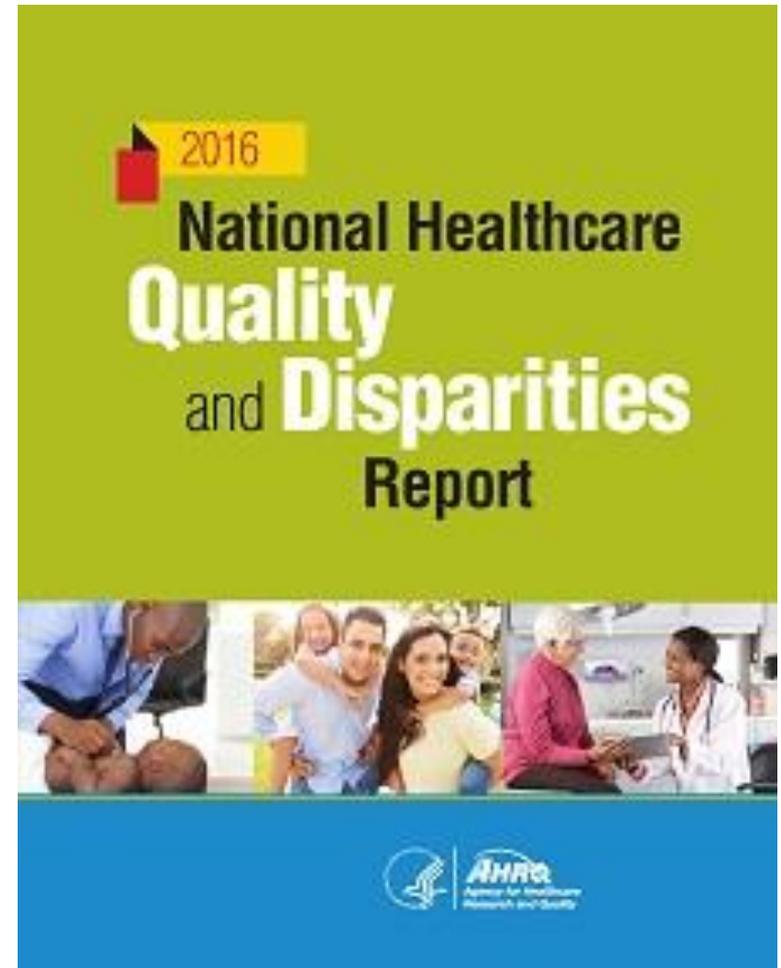
Racial or ethnic differences in the quality of healthcare that are **not due to access-related factors or clinical needs, preferences, and appropriateness of intervention.**

An **Institute of Medicine** report shows that “racial and ethnic minorities tend to receive a lower quality of healthcare than non-minorities, even when access related factors, such as patients insurance status and income, are controlled.”

*(Institute of Medicine, 2003. Unequal Treatment)*

# AHRQ - Quality and Disparities Report (2016)

- Agency for Healthcare Research and Quality
- Trends in Disparities Overall
  - Access
  - Quality (Person-centered Care)



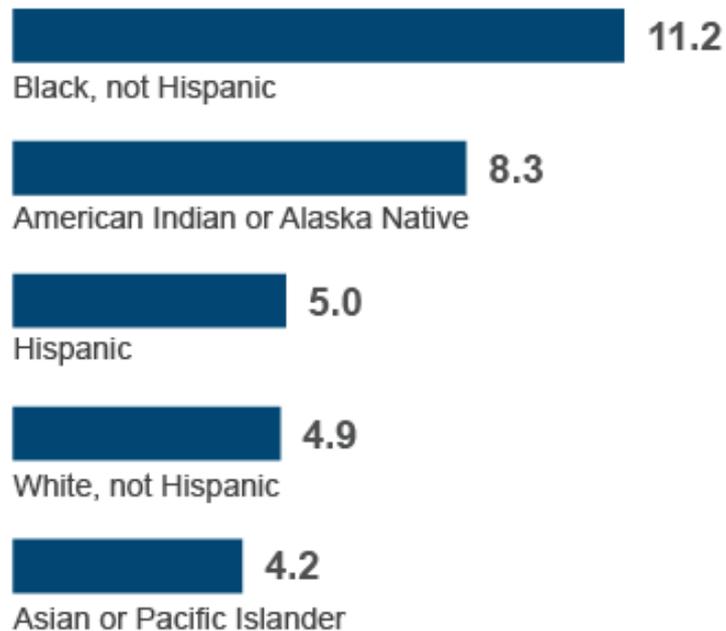
# Maternal, Infant, and Child Health

## Infant Mortality Rate by Race and Ethnicity of Mother, 2015

The infant mortality rate experienced by infants born to non-Hispanic black mothers was **more than 2.5 times** the rate experienced by infants born to Asian or Pacific Islander mothers (11.2 and 4.2 deaths under 1 year of age per 1,000 live births, respectively).



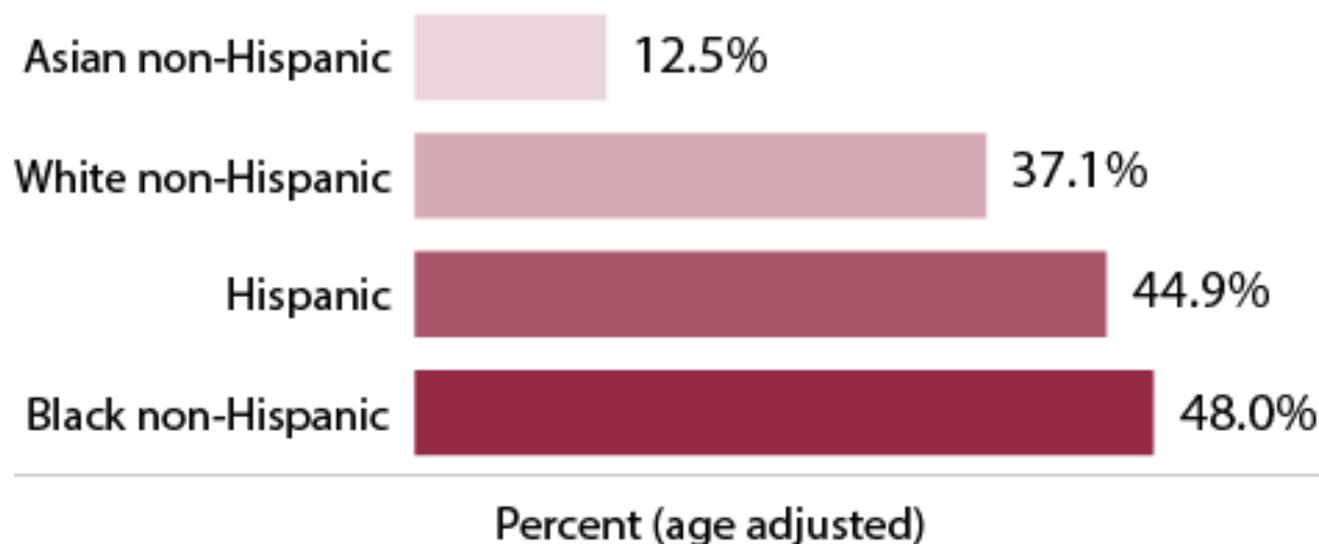
Infant deaths per 1,000 live births



# Nutrition, Physical Activity, and Obesity

## Adult Obesity by Race/Ethnicity, 2013–2016

The obesity rate for black non-Hispanic adults aged 20 years and over was **more than 3.5 times** the rate for Asian non-Hispanic adults.



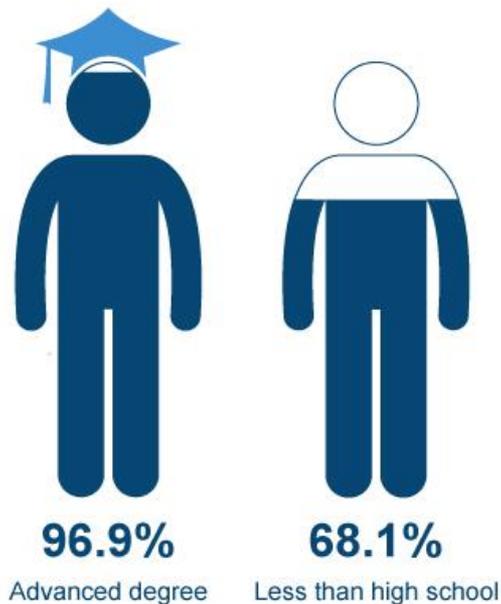
Data source: National Health and Nutrition Examination Survey (NHANES), CDC/NCHS

# Access to Health Services

Access to health services may affect a person's health and well-being. Health insurance coverage is important for the achievement of health equity and for increasing the quality of life for everyone. Health insurance facilitates entry into the health care system.<sup>1</sup> Populations with a usual source of care (a provider or facility where one regularly receives care) generally experience improved health outcomes and reduced disparities and health care costs.<sup>2</sup>

## Persons with Health Insurance by Educational Attainment, 2015

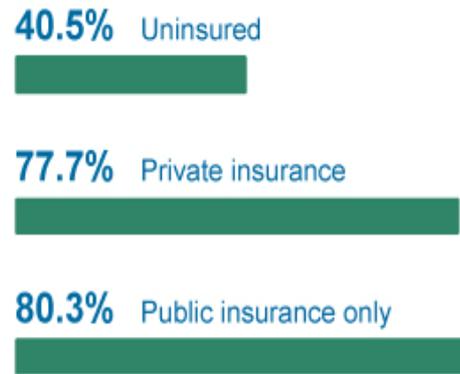
For persons aged 25–64 years, the health insurance rate for those with an advanced degree was **42.3% higher** than the rate for those without a high school education.



Data source: National Health Interview Survey (NHIS), CDC/NCHS.

## Persons with a Usual Primary Care Provider by Health Insurance Status, 2014

For persons aged less than 65 years, the rate of having a usual primary care provider for those with public insurance was **twice** that for uninsured persons.



Data source: Medical Expenditure Panel Survey (MEPS), AHRQ.

# The Cost of Health Disparities

- Excess health care utilization and expense
- Excess death
- Lost productivity
- **Cost of racial disparities in health to insurers:**
  - ~\$337 billion (Urban Institute, 2009)
  - Disparities in access to care and quality of care account for part of the cost.
- **Eliminating health disparities for minorities:**
  - ~\$229 billion in reduced medical care expenditures

# Examples

# Efforts to Reduce Health Disparities

- HHS Action Plan to Reduce Racial and Ethnic Health Disparities
- Robert Wood Johnson Foundation Culture of Health Action Framework
- *For Hospitals: AHA Equity of Care Pledge Campaign*

# Healthy Montgomery

## Montgomery County, Maryland: Community Health Improvement Process

*Our mission is to achieve optimal health and well-being for  
Montgomery County residents.*

- <http://www.healthymontgomery.org/#>



# Community Health Improvement Plans

## Shady Grove Medical Center

**Goal:** Increase access to diabetes education and care for uninsured and underinsured patients and community members.

- *Diabetes Self Management Program (DSMP)*
- *Diabetes Cooking Class*
- *Living Well with Diabetes*

## Washington Adventist Hospital

**Goal:** Increase knowledge of and access to skills and resources around nutrition and physical activity to better prevent and manage chronic disease.

- *Long Branch Healthy Food Access Program (LBHFAP)*
- *Hungry Harvest*

# Culturally Competent Care

The ability of systems to provide care to patients with diverse

- Values
- Beliefs
- Behaviors

including tailoring health care delivery to meet patients'

- Social
- Cultural
- Linguistic needs

*(HRET, 2011)*



# Best Practices in Health Care

- Accessible health care services across settings
- Plain language communication
- Effective patient-provider communication
- Culturally-sensitive care coordination and navigation
- Essential practices for hospitals
  - Embrace **cultural competence** as a priority
  - Ensure that hospital leadership and staff reflect **diversity** of local population
  - Achieve a **culture of inclusion** that provides the right environment for patients to receive culturally appropriate care

# Achieving Health Equity

Goal: Attain the highest level of health for all

**EQUALITY**

**EQUITY**



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# Dr. Martin Luther King, Jr.

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

— *Martin Luther King Jr.*



Medicine



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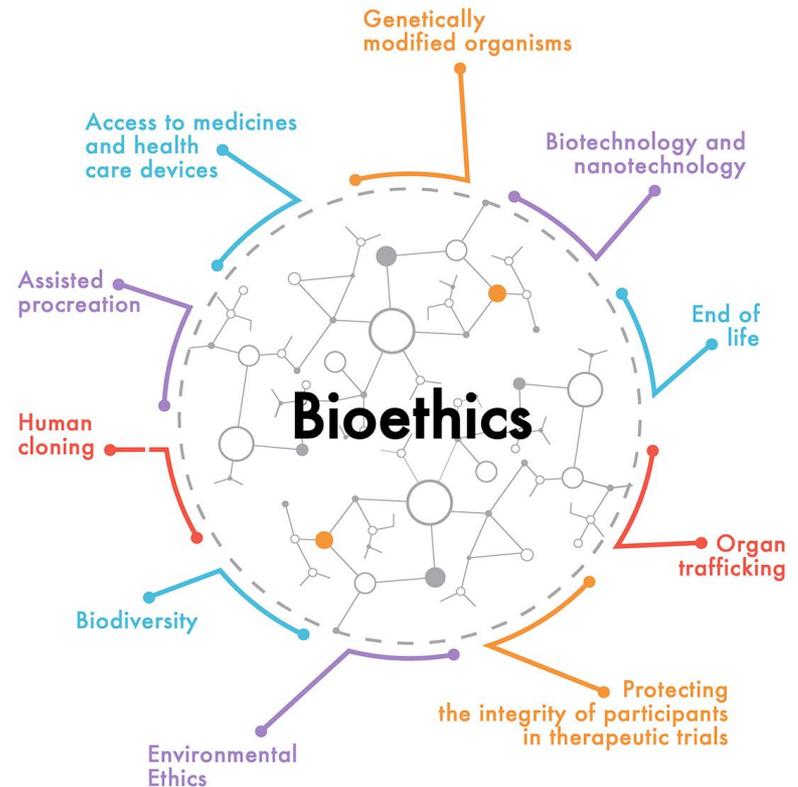


Martin Luther King Jr.



# What is Bioethics?

- “Ethics is a philosophical discipline pertaining to notion of good or bad, right and wrong-our moral life in community.”
- **“Bioethics is the application of ethics to the field of medicine and healthcare.”**



*Center for Practical Bioethics*

[www.practicalbioethics.org/what-is-bioethics](http://www.practicalbioethics.org/what-is-bioethics)

# Bioethics

- Bioethics is an interdisciplinary field that emerged mid-Twentieth Century
- Demand for ethical reflection in medicine after the revelation of
  - Nazi doctors war crimes
  - Tuskegee Syphilis Study



## The Tuskegee Study of Untreated Syphilis

*The 30th Year of Observation*

DONALD H. ROCKWELL, MD; ANNE ROOF YORS, MD;  
AND M. BRITTAIN MOORE, JR., MD, ATLANTA

Year 1963 marks the 30th year of the evaluation of the effect of untreated syphilis in the male Negro conducted

tion such as this offered an opportunity to follow and study the disease long period of time. In 1932, a tot

## The New York Times

### Syphilis Victims in U.S. Study Went Untreated for 40 Years

By JEAN HELLER  
THE ASSOCIATED PRESS

WASHINGTON, July 25—For 40 years the United States Public Health Service has conducted a study in which human beings with syphilis, who were induced to serve as guinea pigs, have gone without medical treatment for the disease and a few have died of its late effects, even though an effective therapy was eventually discovered.

The study was conducted to determine from autopsies what the disease does to the human body.

Officials of the health service who initiated the experiment have long since retired. Current officials, who say they

have serious doubts about the morality of the study, also say that it is too late to treat the syphilis in any surviving participants.

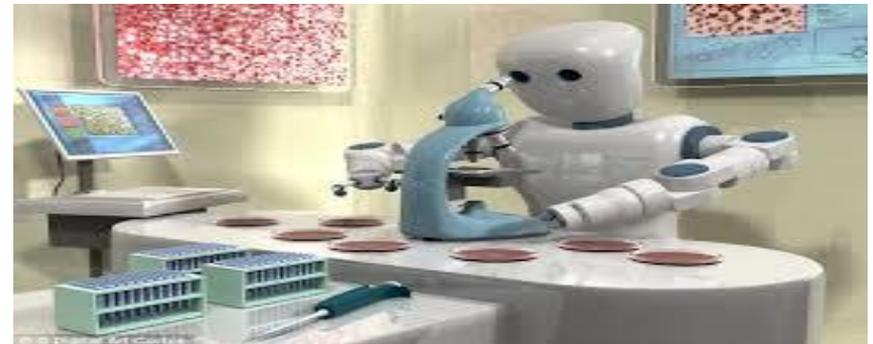
Doctors in the service say they are now rendering whatever other medical services they can give to the survivors while the study of the disease's effects continues.

Dr. Merlin K. DuVal, Assistant Secretary of Health, Education and Welfare for Health and Scientific Affairs, expressed shock on learning of the study. He said that he was making an immediate investigation.

The experiment, called the Tuskegee Study, began in 1932 with about 600 black men.

# Bioethics

- Much of bioethical discourse is about ethical dilemmas raised by the availability of new technologies and novel interventions
- Discipline faces criticism for neglected area of concern:
  - Access to healthcare
  - Quality of care received
  - Concerns of medically weak and vulnerable
  - Social Justice in health care



# Health Disparities and Social Justice

- Health Disparities represent a significant challenge for bioethics and social justice



- Health disparities function as a sentinel to flaws in our social arrangement



# Social Justice

- “Social Justice generally refers to the idea of creating a society or institution that is based on the principles of equality and solidarity, that understands and values human rights, and that recognizes the dignity of every human being”
- Social Justice in health care is Health Equity
  - attainment of the highest level of health for all people”
- Is anti-racism, anti-sexism, anti-ageism, ...

*(Understanding Cross-Cultural Management, 2008)*



# Health Equity

- “Health equity means social justice in health (i.e., no one is denied the possibility to be healthy for belonging to a group that has historically been economically/socially disadvantaged).”

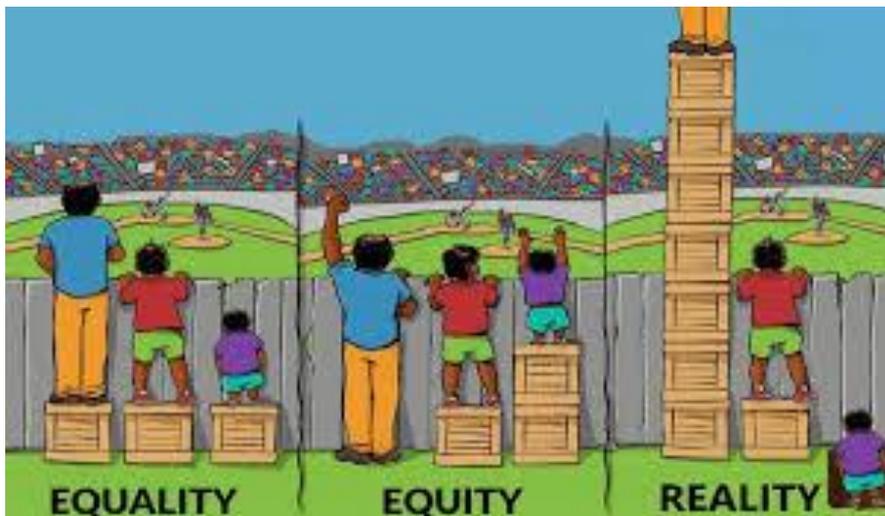
*“What Are Health Disparities and Health Equity? We Need to Be Clear,” Braveman, 2014, Public Health Reports, Jan-Feb; 129 (Suppl.) 5-8.*



# Health Equity

“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 risks of poor health, based on social condition.”

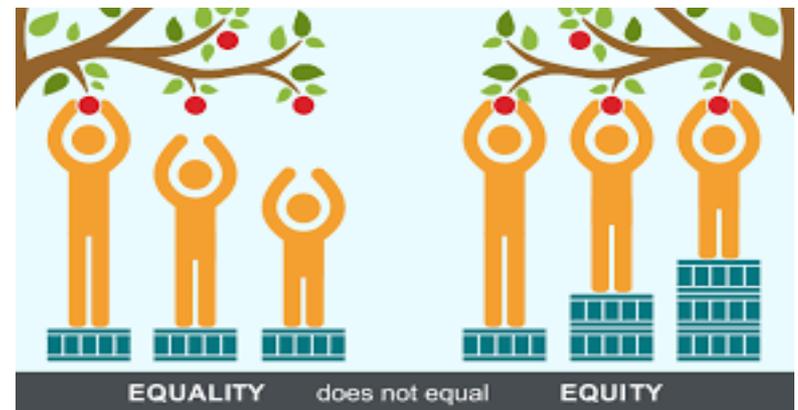
*“What Are Health Disparities and Health Equity? We Need to Be Clear,” Braveman, 2014, Public Health Reports, Jan-Feb; 129 (Suppl.) 5-8.*



# Health Equity

- “Health Equity is achieved when every person has the opportunity to ‘attain his or her full health potential’ and no one is ‘disadvantaged from achieving this position because of social position or other socially determined circumstances”

“The Healthiest Nation 2030, Nation Public Health Week,” American Public Health Association – [www.nphw.org](http://www.nphw.org)



# Values Underlying Health Equity

- Health equity is grounded in:
  - American social values
  - Internationally recognized ethical and human rights principles
  - Pragmatic considerations



# Christianity

- Christians are called to care for the sick and minister to outcast
- Jesus' strong identification with sick and afflicted



*Truly, I tell you,  
whatever you did for one of  
the least of these  
brothers and sisters of mine,  
you did for me.*  
~MATTHEW 25:40

**"For I was hungry and you gave Me something to eat; I was thirsty, and you gave Me something to drink. I was a stranger and you invited Me in. I was naked and you clothed Me; I was sick, and you visited Me, I was in prison, and you came to Me."**

Matthew 25:35-36

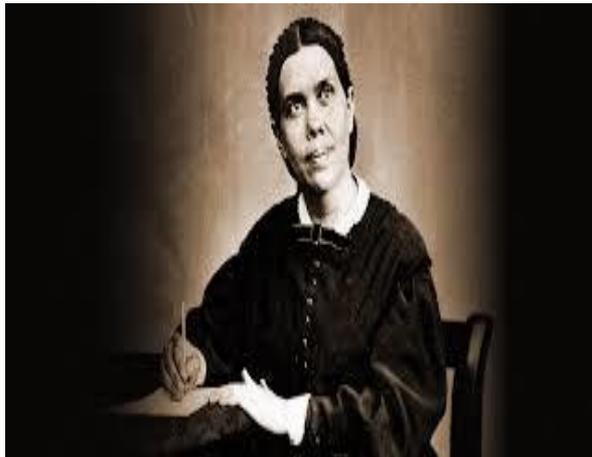
# Good Samaritan

- Parable of the Good Samaritan calls Christians to:
  - Worship God
  - Act without violence or prejudice
  - Care for sick, hungry, or poor



# Reasons to Promote Health Equity

- It's the right thing to do!
- The consequences are needless suffering, wasted potential, and premature death
- It serves God's children and benefits humanity
- Healing is a part of our heritage and calling



# Dr. King on the Good Samaritan

The first question which the priest and the Levite asked was: **If I stop to help this man, what will happen to me?**

But... the good Samaritan reversed the question:

**If I do not stop to help this man, what will happen to him?**

- Martin Luther King Jr.



I admire the good samaritan, but I don't want to be one. I don't want to spend my life picking up people by the side of the road after they have been beaten up and robbed. I want to change the Jericho road, so that everybody has an opportunity for a job, education, security, health.

*— Martin Luther King —*

AZ QUOTES

True compassion is more than flinging a coin to a beggar. It comes to see that a system that produces beggars needs to be repaved. We are called to be the Good Samaritan, but after you lift so many people out of the ditch you start to ask, maybe the whole road to Jericho needs to be repaved.

*Martin Luther King, Jr.*

# “King Berates Medical Care Given to Negros” – Chicago AP

- “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 inhumane because it often results in physical death. I see no alternative to direct action and creative nonviolence to raise the conscience of the nation.”

Dr. Martin Luther King Jr.

# Questions and Discussion

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# References and Resources

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# Thank You!

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