

Health Equity Definition

Health Equity Committee (HEC)

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Office of
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The need for a health equity definition



HEC is tasked with making recommendations to OHPB, OHA, and the broader health systems in Oregon using an equity lens (HEC Charter, 2017)



Development of an equity framework starts from a common working definition of health equity.



Consensus around a definition of health equity helps foster dialogue and bridge divides.



Lack of clarity on the definition can pose a barrier for effective engagement and action

Health Disparities v/s Health Inequities

Health Disparities

- Health disparities mean the same thing as health inequalities. They are simply differences in the presence of disease, health outcomes, or access to health care between population groups.

Health Inequities

- Health inequities are differences in health that are not only unnecessary and avoidable but, in addition, are considered unfair and unjust. Health inequities are rooted in social injustices that make some population groups more vulnerable to poor health than other groups.

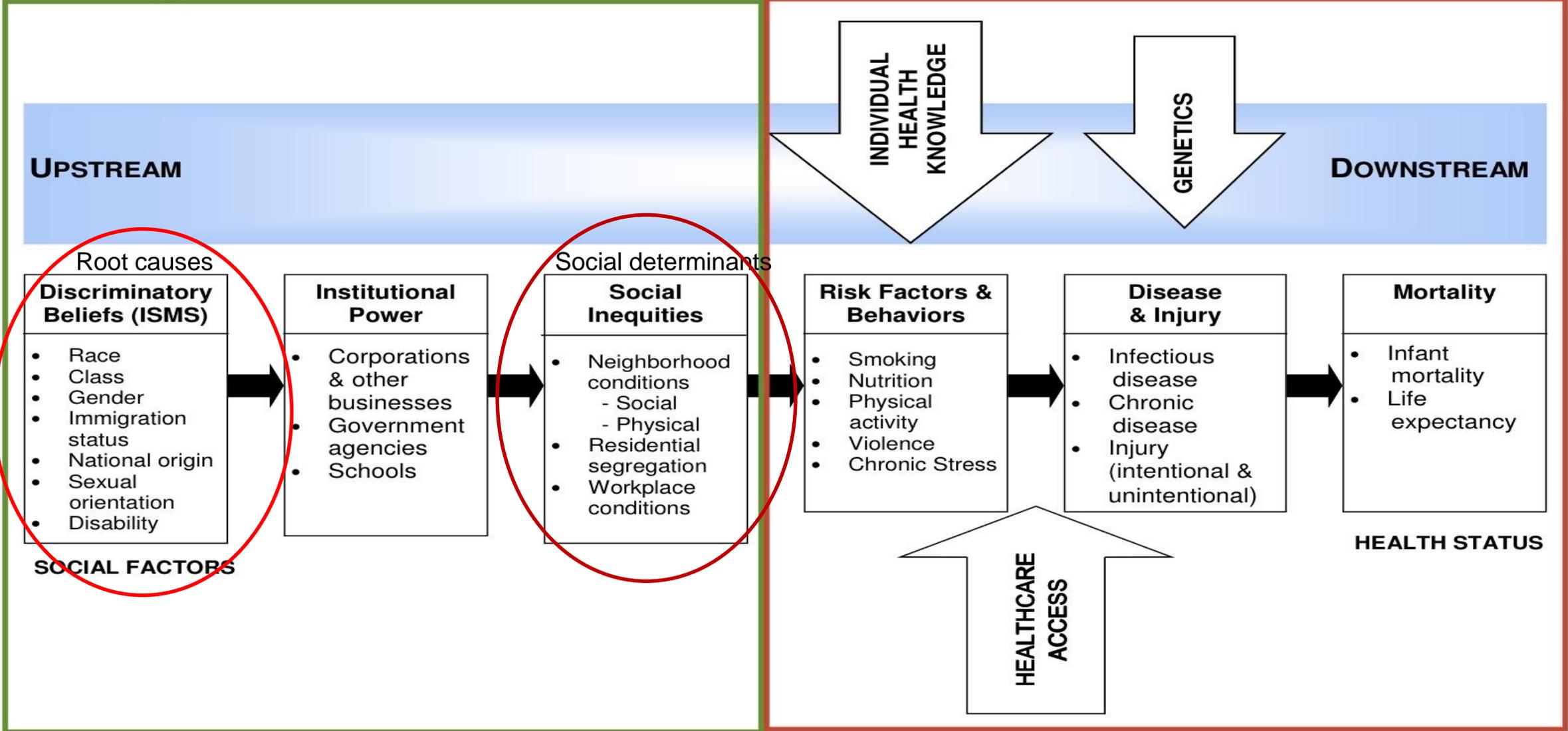
For example

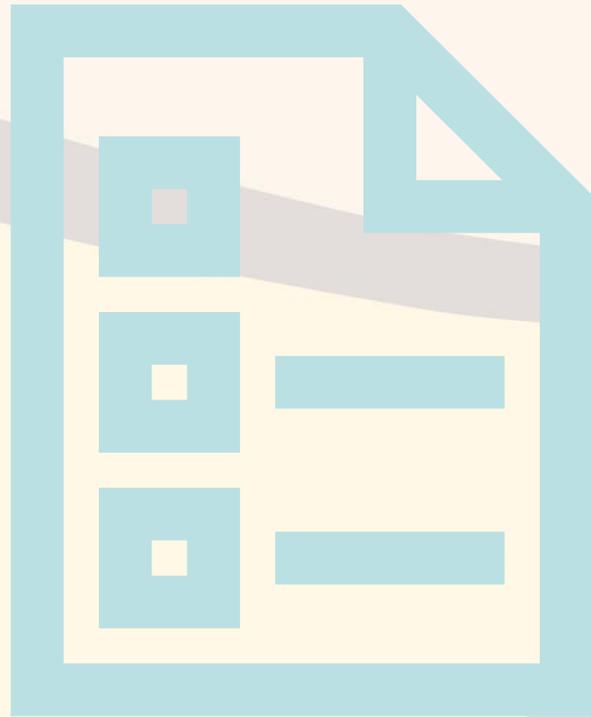
- Male babies are generally born at a heavier birth weight than female babies. This is a health disparity.
- We expect to see this difference in birth weight because it is rooted in genetics. Because this difference is unavoidable, it is considered a **health disparity**.
- Babies born to Black women are more likely to die in their first year of life than babies born to White women.
- A higher percentage of Black mothers are poor and face hardships associated with poverty that can affect their health.
- However, we find differences in the health of Black and White mothers and babies comparing Blacks and Whites with the same income.
- Research has shown links between the stress from racism experienced by Black women and negative health outcomes. **This is a health inequity** because the difference between the populations is unfair, avoidable and rooted in social injustice.

A Framework for Health Equity

Socio-Ecological

Medical Model





FEEDBACK OVERVIEW

Health Equity Definition Feedback Period

May to July 2019

Source of Feedback

Content/Themes

Tribes	<ul style="list-style-type: none">• Addition of “political relationship”
Community Advisory Councils	<ul style="list-style-type: none">• Clarify meaning of terms used such as : “all sectors”• Consider geographic diversity• Consider housing status• Consider literacy level of the definition• Consider economic status
Community Based Organizations	<ul style="list-style-type: none">• General sentiment definition is welcomed and gives a positive signal• Consider “Intersectionality”• Consider focus on racial equity
OHPB/Committees of the Board	<ul style="list-style-type: none">• Consider using the Community Advisory Councils (CACs) as a source for feedback.• Consider engaging other OHPB subcommittees• Consider addressing rurality/geography• Address intersectionality of list of inequities and geographic isolation, community building and power differences
CCOs	<ul style="list-style-type: none">• Consider literacy and readability• Definition should be accessible and understandable• Consider concern between too prescriptive and leaving areas to interpretation

Assumptions and Values



Health is broadly defined as a positive state of physical, mental, and social well-being and not merely the absence of disease.



Everyone has the right to a standard of living adequate for health, including nutrition, education, housing, medical care, and necessary social services.



Rural racial/ethnic minority populations have substantial health, access to care, and social determinants of health challenges that can be overlooked when considering aggregated population data .



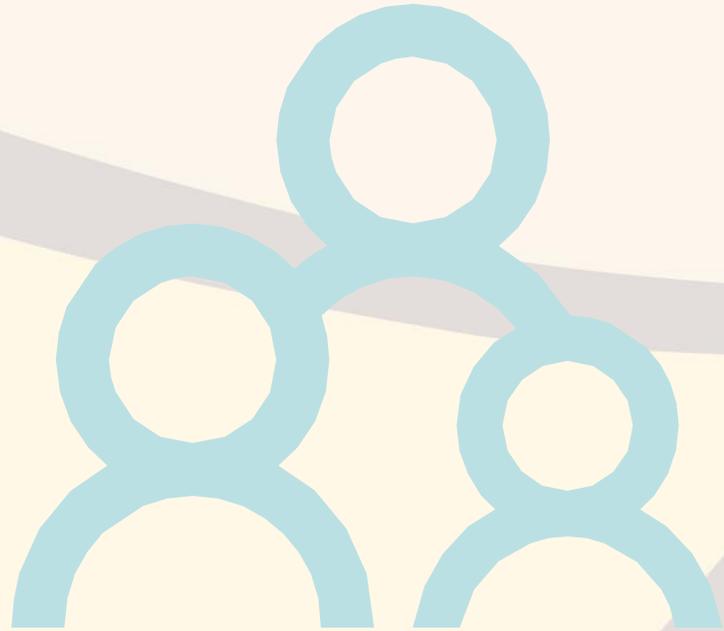
Inequities in population health outcomes are primarily the result of social and political injustice, not lifestyles, behaviors, or genes



Addressing health inequities means addressing differences that are not only unnecessary and avoidable but also, unjust and unfair.



Equity must be intentionally pursued as a strategy; it will not necessarily happen as a byproduct of other development efforts.



HEC - HEALTH EQUITY DEFINITION

Oregon will have established a health system that creates health equity when all people can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.

Achieving health equity requires the ongoing collaboration of all regions and sectors of the state, including tribal governments to address:

- The equitable distribution or redistributing of resources and power; and
- Recognizing, reconciling and rectifying historical and contemporary injustices.

Health Equity Definition Framework

The Health Equity Committee definition framework draws attention to the concepts of fairness and justice in the distribution of resources. Furthermore, it highlights the idea that social inequities in health are avoidable through collective action and that inaction is no longer acceptable.

Identifying and implementing effective solutions to move the dial on health equity demands:

- Recognition of the role of historical and contemporary oppression and structural barriers facing Oregon communities.
- Engagement of a wide range of partners representing diverse constituencies and points of view.
- Direct involvement of affected communities as partners and leaders in change efforts.

OHPB and OHA

Opportunities to advance health equity

There are specific opportunities to build the structure and advance health equity through:

- Breaking down current silos and considering health equity in every policy and business decision.
- Adopting a shared vision for health equity.
- Aiming for greater alignment and amplification of existing efforts to advance health equity.
- Building collective capacity and infrastructure at the organization and committee level for change.
- Create and advance systems changes and policies that result in reallocation of resources and power.

The background features a central intersection of four thick, light gray curved lines that divide the space into four quadrants. The top-left quadrant is light yellow, the top-right is light orange, the bottom-left is light green, and the bottom-right is light pink. The entire composition is framed by a black border, with a decorative horizontal bar at the top and bottom consisting of segments in red, yellow, brown, and orange.

Closing Comments