

HEALTH EQUITY

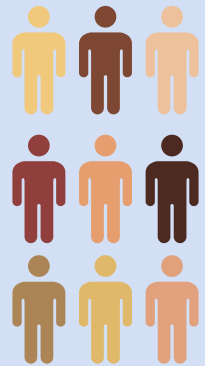
SOCIAL DETERMINANTS OF HEALTH

- Social Determinants of Health (SDOH) are conditions in the environment in which we live that affect quality of life, health, outcomes and risks.
- Addressing SDOH is a primary approach to achieving health equity.

WHAT CAN YOU DO?

Collect race and ethnicity data for your patients.

Race and ethnicity data can impact funding decisions that affect equal access to healthcare.



HEALTH DISPARITIES IN POPULATIONS

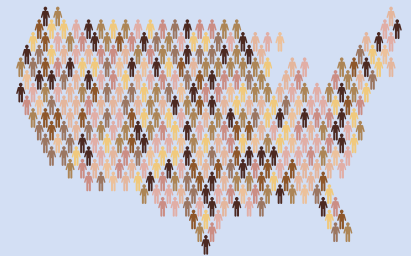
- Disparities exist when health outcomes differ among populations.
- Contributing factors may include: race or ethnicity, sex, sexual identity, age, disability, socioeconomic status and geographic location.

Progress toward eliminating health disparities requires widespread, consistent, and reliable population data.

WHAT CAN YOU DO?

Collect race and ethnicity data for your patients.

- Race and ethnicity data helps in addressing health care disparities
- Data is used to monitor and ensure quality of care for all patients
- Data is private and confidential



WHY DISPARITY DATA IS IMPORTANT

In 2019, **17.1%** of Non-Hispanic Black adults and **11.8%** of Non-Hispanic White adults were diagnosed with diabetes

The 2018 life expectancy was highest for Non-Hispanic White females at **81.5** and lowest for Non-Hispanic Black males at **71.8**

Rate of female breast cancer deaths/100,000: Non-Hispanic Black **28.2**, Non-Hispanic White **20.1**, Hispanic **13.8**

Rate of cervical cancer deaths/100,000: Non-Hispanic Black **3.4**, Hispanic **2.6**, Non-Hispanic White **2.0**

Between 2015-2019, 5 year infant mortality rates/100,000 live births: Non-Hispanic Black **12.5**, compared to Non-Hispanic White **4.2**

Non-Hispanic Black females are **more likely to be diagnosed** with breast cancer at a younger age and are **more likely to die** from breast cancer when compared to Non-Hispanic White females

Rate of colorectal cancer deaths /100,000: Non-Hispanic Black **18.5**, Non-Hispanic White **13.6**, Hispanic **10.9**

HELP PROVIDE BETTER PROGRAMS AND SERVICES FOR EVERYONE

An informational FAQ on answering patient's questions:

www.hcup-us.ahrq.gov/datainnovations/raceethnicitytoolkit/ca6.pdf

HEALTH DISPARITIES IN AMERICAN HEALTHCARE

As demonstrated by the statistics shared on the opposite side of this page, racial and ethnic health disparities continue to be a chronic issue in the United States. In order to make meaningful strides to correct this, the American Hospital Association's Institute for Diversity and Health Equity (AHA IFDHE) recommends that all providers collect accurate race and ethnicity data for their patient population.

The Importance of Collecting Race and Ethnicity Data

The COVID-19 pandemic has further highlighted health disparities between different races and ethnicities. In order to address these disparities, practices should work to properly document a patient's race/ethnicity, thus allowing the practice to:

- Identify the need to develop diverse patient materials
- Provide more culturally appropriate care and education
- Recognize areas where care disparities exist
- Develop quality care initiatives to ensure equitable care



When “Good Enough” Isn’t Good Enough

In order to address any hesitancy, the AHA's IFDHE recommends that team members provide patients with reasons why the practice is collecting this information. In the toolkit, they provide an example of consistent wording your staff can employ, such as:

“We want to make sure that all our patients get the best care possible. We would like you to tell us your racial/ethnic background so that we can review the treatment that all patients receive and make sure that everyone gets the highest quality of care.”

They also stress the importance of training staff to not push patients if they choose to not self-report their race/ethnicity. Documented race/ethnicity should strictly come from the patient or caregiver or be listed as “Declined.”

Disparity Toolkit

This handout was created with the intention to educate practices on the importance of race/ethnicity data collection. For in-depth materials and resources, please consult the full [Disparity Toolkit](#). The toolkit provides a plethora of resources for data collection and staff training to ensure that a practice is successful in beginning the journey to mitigate racial health disparities.

HEALTH EQUITY RESOURCES

- www.cdc.gov/socialdeterminants/archive/index.htm
- www.ncbi.nlm.nih.gov/pmc/articles/PMC4834895/
- www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health
- www.hpoe.org/resources/webinars/2732
- www.ncbi.nlm.nih.gov/pmc/articles/PMC4441661/
- www.hcup-us.ahrq.gov/datainnovations/raceethnicitytoolkit/ca6.pdf
- www.ncbi.nlm.nih.gov/pmc/articles/PMC1797091/
- www.healthypeople.gov/2020/about/foundation-health-measures/Disparities
- cancerstatisticscenter.cancer.org/#/
- www.cdc.gov/nchhstp/socialdeterminants/faq.html#addressing-role
- www.ncbi.nlm.nih.gov/books/NBK215740/
- dhss.delaware.gov/dhss/dph/hp/annrepvs.html
- www.cancer.gov/about-cancer/understanding/disparities
- www.dhss.delaware.gov/dhss/dph/dpc/diabetes02.html
- www.dhss.delaware.gov/dhss/dph/dpc/files/cancerdisparitiesrpt2010-2014v2.pdf
- www.dhss.delaware.gov/dhss/dph/dpc/files/iandm2011-2015.pdf
- gis.cdc.gov/Cancer/USCS/DataViz.html