Equity’s Role in Social Determinants of Health (SDOH) Interventions: Advocacy and Systems Change

June 4, 2020
12:00pm – 1:15pm ET
A Moment of Silence in Honor of:

George Floyd
Breonna Taylor
Ahmaud Arbery
Tony McDade

The Countless Faces Seen and Unseen Who Fall Victim to Police Brutality and Racism
WHO WE ARE
Health Leads is an innovation hub that unearths and addresses the deep societal roots of racial inequity that impact health.

OUR MISSION
We partner with communities and health systems to address systemic causes of inequity and disease. We do this by removing barriers that keep people from identifying, accessing and choosing the resources everyone needs to be healthy.

OUR VISION
Health, well-being and dignity for every person, in every community.
Illustration of total demand for social services as compared to social service capacity over time through the COVID-19 crisis

- Social distancing and shelter in place policies begin. Non-essential businesses close. Unemployment claims spike. Increased need for food, childcare for essential workers. Increase in abuse and domestic violence.

- Increased shelter demand as evictions and foreclosures rise. Public benefits regulations re-enacted. Some people will lose access. Longer-term economic recession leads to more job loss.

- Workforce shortage. Some organizations close or reduce hours for quarantine and because of lack of funding.

- Some organizations close permanently.

- Shelter in place lifted and non-essential businesses can reopen. Some people are rehired, return from furlough or can quickly find a new job, but unemployment remains elevated.

- Longer term recovery and rebuild

[Full post: https://healthleadsusa.org/communications-center/blog/flattening-the-next-covid-19-curve/]
Panelists

Rhea Boyd, MD, MPH, FAAP
Chief Medical Officer
San Diego 211
Clinician
Palo Alto Medical Foundation

Daniel Jones, MD
Sanderson Chair in Obesity, Metabolic Diseases and Nutrition and Professor of Medicine and Physiology
The University of Mississippi Medical Center

Lauren Powell, MPA, PhD
Founding Executive Director
TIME’S UP Healthcare
President & CEO
The Equitsit, LLC

Artair Rogers, MS
Director of Programs, California Health Leads
Question One

What types of power dynamics have you had to address as you sought to tackle structural or system change?
**Recommendations & Takeaways**

- **Shift the current Return on Investment (ROI) narrative**
  Using the results-based accountability (RBA) framework with a racial equity lens allows you to ask: (1) How much did we do? (2) How well did we do it? (3) Is anyone better off?

- **Communities, particularly communities of color, should own and drive their data narratives**
  How are you including communities of color in the evaluation process? What is their role in sharing the results of the interventions you have created (often for them, without them)?

- **Healthcare organizations should leverage all their assets, including hiring, purchasing, and investment for equitable, local economic impact**
  Recommended source: Healthcare Anchor Network [https://healthcareanchor.network/](https://healthcareanchor.network/)

- **Develop accountability structures, even checklists, to monitor and prevent SDOH intervention’s perpetuation of bias (implicit and explicit), systemic racism, and white supremacy**
Question Two

How does it look for you to actively address power or systemic injustice, especially if you consider yourself to be part of the power structure?
Question Three

What strategies have you used to ensure that you are being proactive in tackling systemic inequities rather than reactive?
Question Four

How can we be more proactive with individual resource navigation interventions?
**Recommendations & Takeaways**

- **White allies must yield power to black and brown community members**
  - “Nothing about us, without us”
  - Involve community members in every aspect of the SDOH intervention: design, implementation, improvement, and evaluation

- **Create processes and structures that allow health systems to proactively hear and understand community priorities and nuances to inform the development of SDOH interventions**
  - How are your SDOH interventions’ design, implementation, and evaluation considering the local biases and discrimination present within your community?

- **Move SDOH interventions beyond resource navigation**
  - What policy issues does the SDOH intervention highlight?
  - Does your work go deeper to explore root causes of inequities (social inequities, institutional inequities, living conditions, and risk behaviors)?
Question Five

What are the emerging opportunities for systems change or policy change work during and post COVID-19?
“In the End, we will remember not the words of our enemies, but the silence of our friends.”
- Martin Luther King, Jr.

As we develop new SDOH interventions to meet the needs and aftermath of COVID-19, we must uplift racial equity as black and brown communities have been disproportionately affected by COVID-19.

Steward public health narratives that do not promote racial harm or systemic oppression.

Explore how health systems can use their power to addressing public health issues, like racism and police brutality.
Open Q&A

Submit your questions through the chat
Stay Tuned!

Part Three of Intentionally Integrating Equity Into SDOH Interventions:
Equity’s Role in SDOH Interventions: Evaluation

• More information coming soon!
Thank You!

Questions?

Send to:
Network@healthleadsusa.org

https://healthleadsusa.org/network/