

Place Matters

From Health and Healthcare Disparities to Equity

Sharrelle Barber, ScD, MPH

National Academy of Medicine

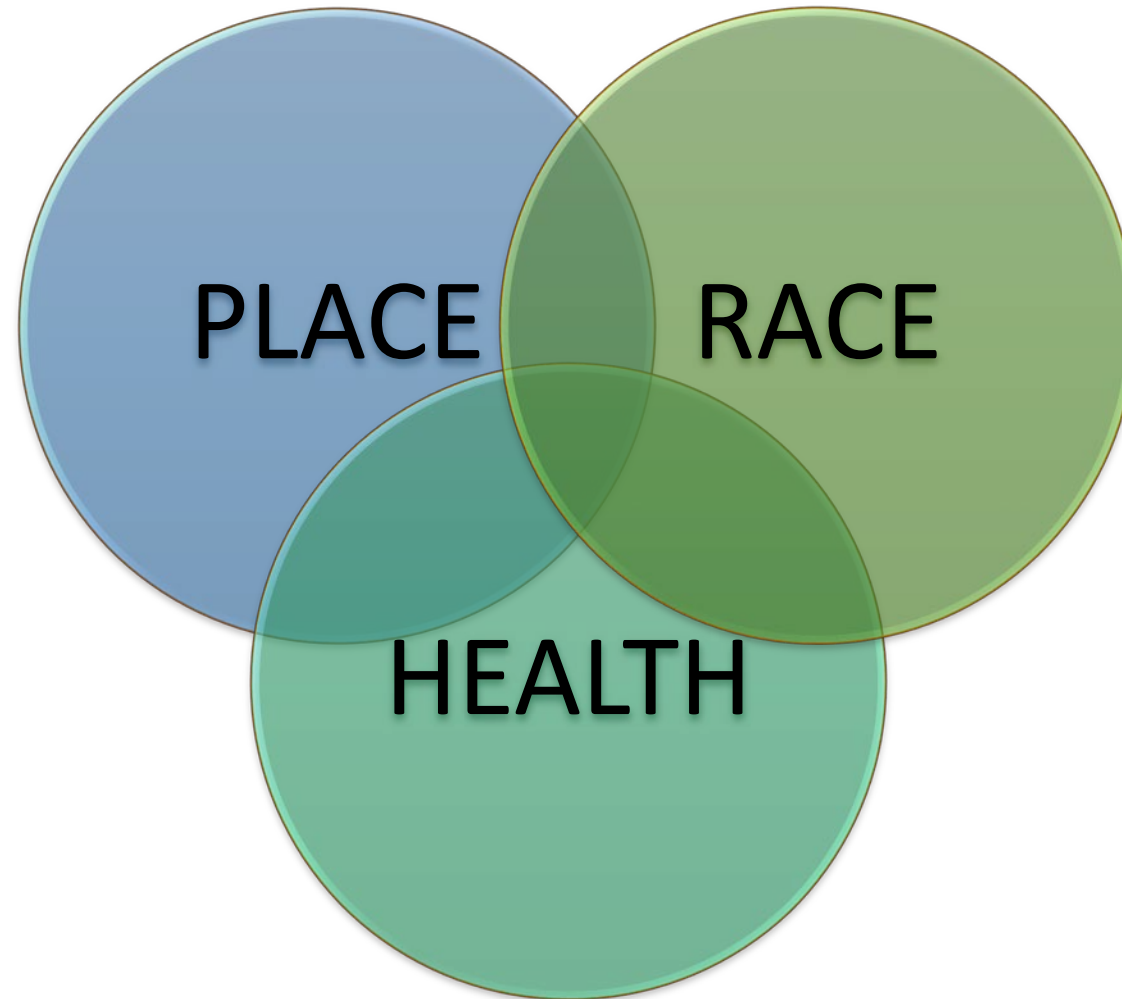
Vital Directions For Healthcare: The NC Experience

Thursday, November 21, 2019

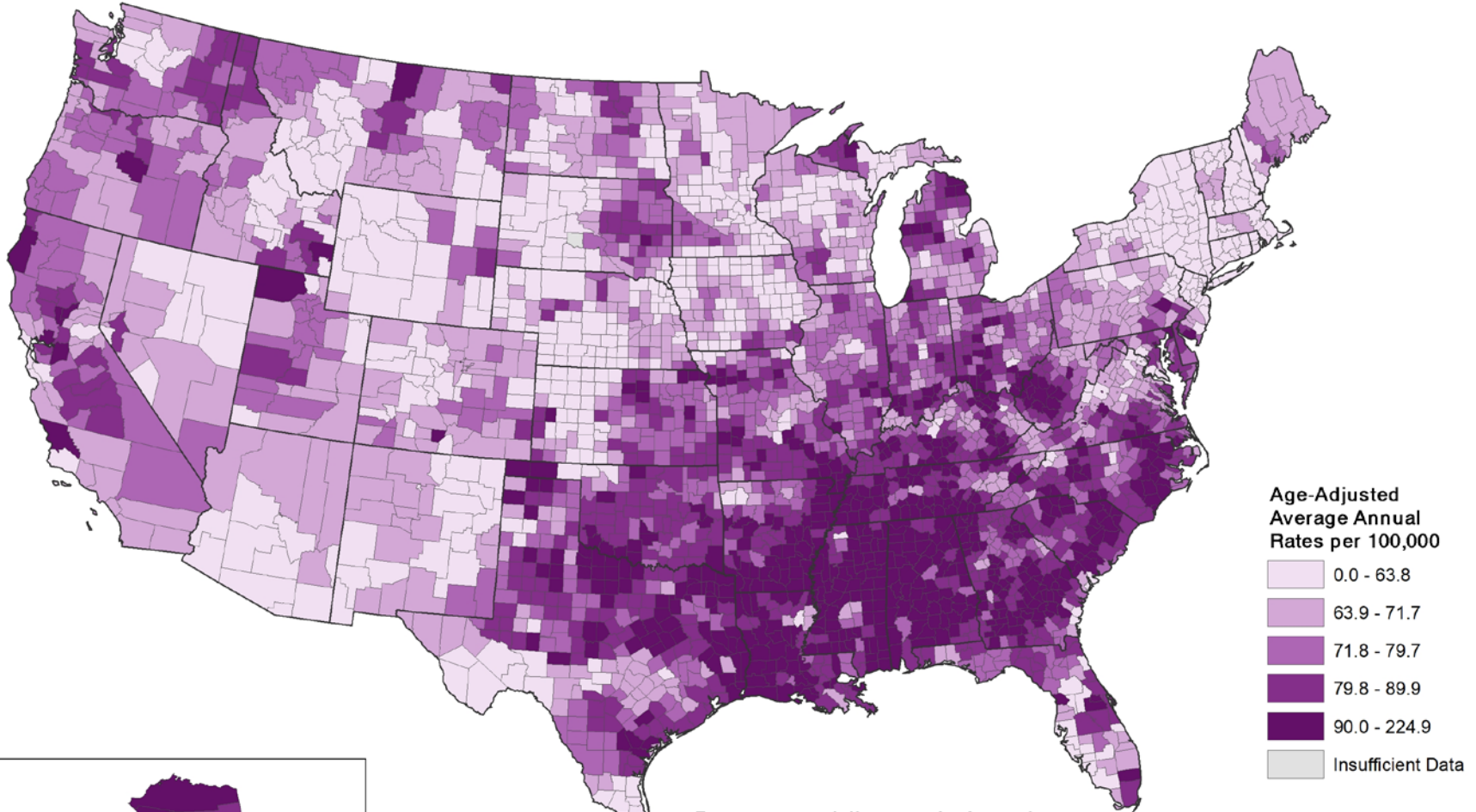
**“Tell me what is ailing you and I
will tell you where you are
from...”**

~Hippocrates, Father of Modern Medicine

At the Intersection of Place, Race(ism), and Health

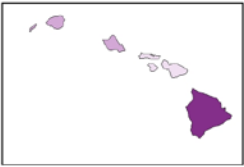
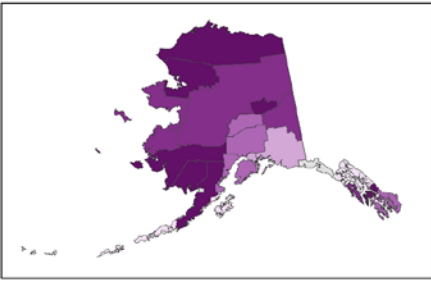


Stroke Death Rates, 2015 - 2017 Adults, Ages 35+, by County

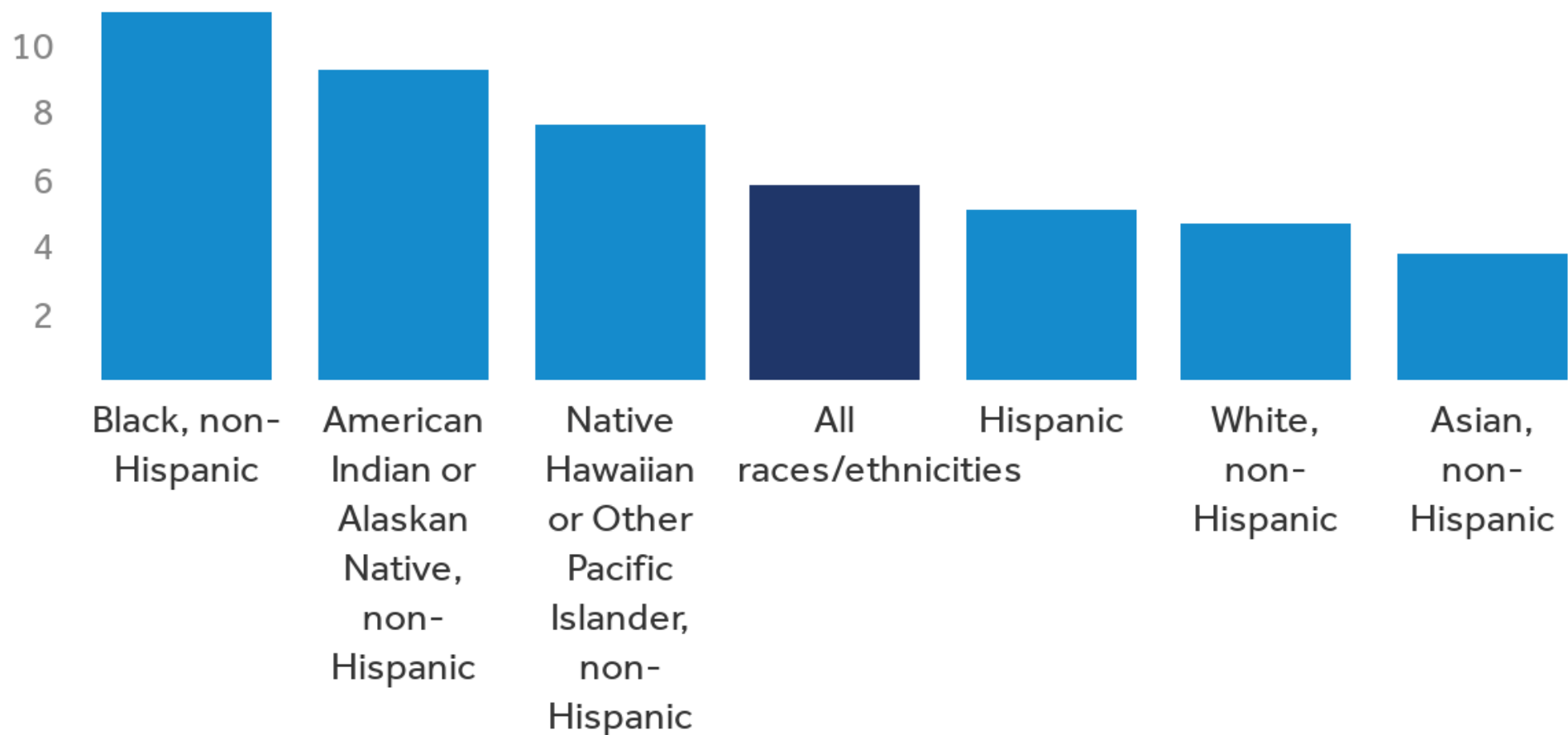


Rates are spatially smoothed to enhance the stability of rates in counties with small populations.

Data Source:
National Vital Statistics System
National Center for Health Statistics

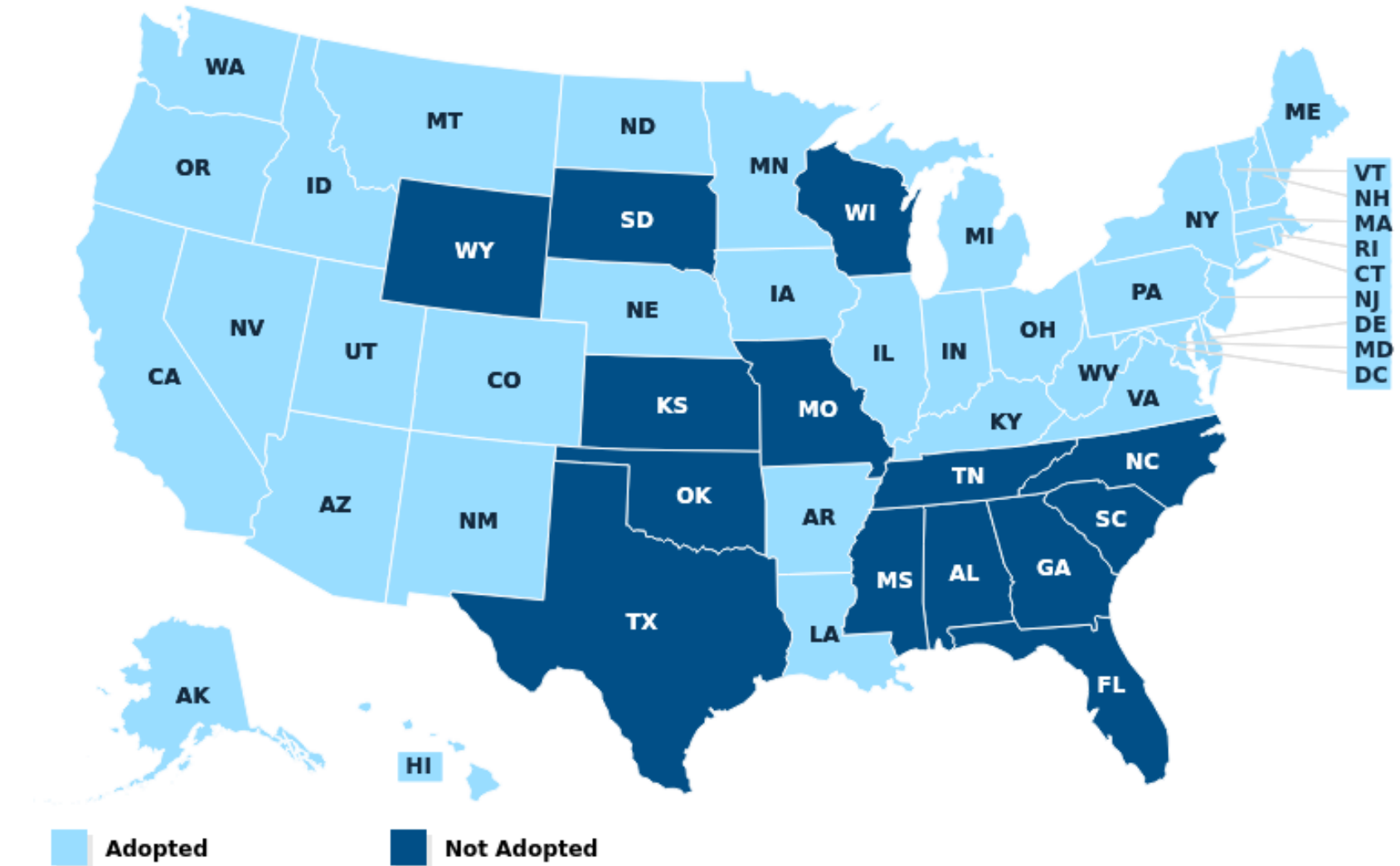


Infant mortality per 1,000 live births, by maternal race/ethnicity, 2017

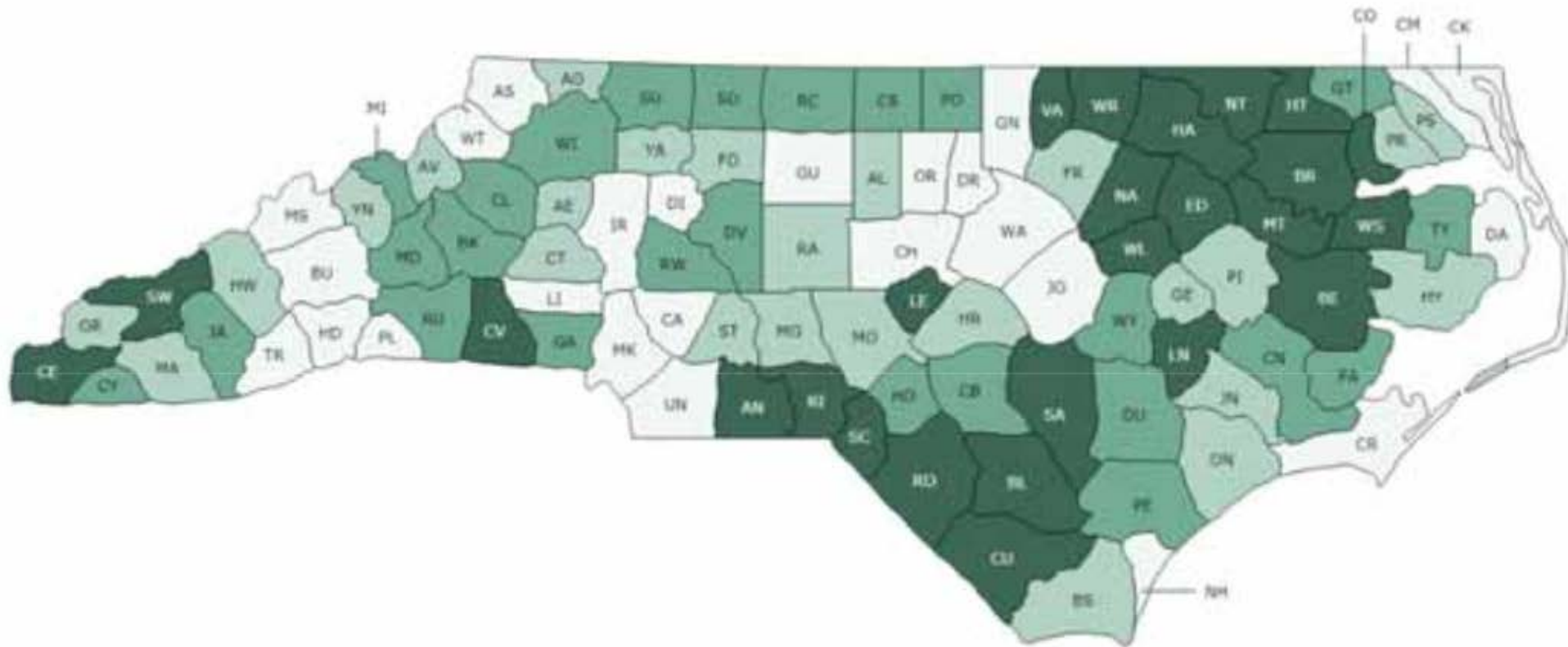


Source: CDC NCHS Period Linked Birth-Infant Death Data Files

Medicaid Expansion in the U.S. as of May 2019



RWJF County Health Rankings and Roadmaps Health Outcomes

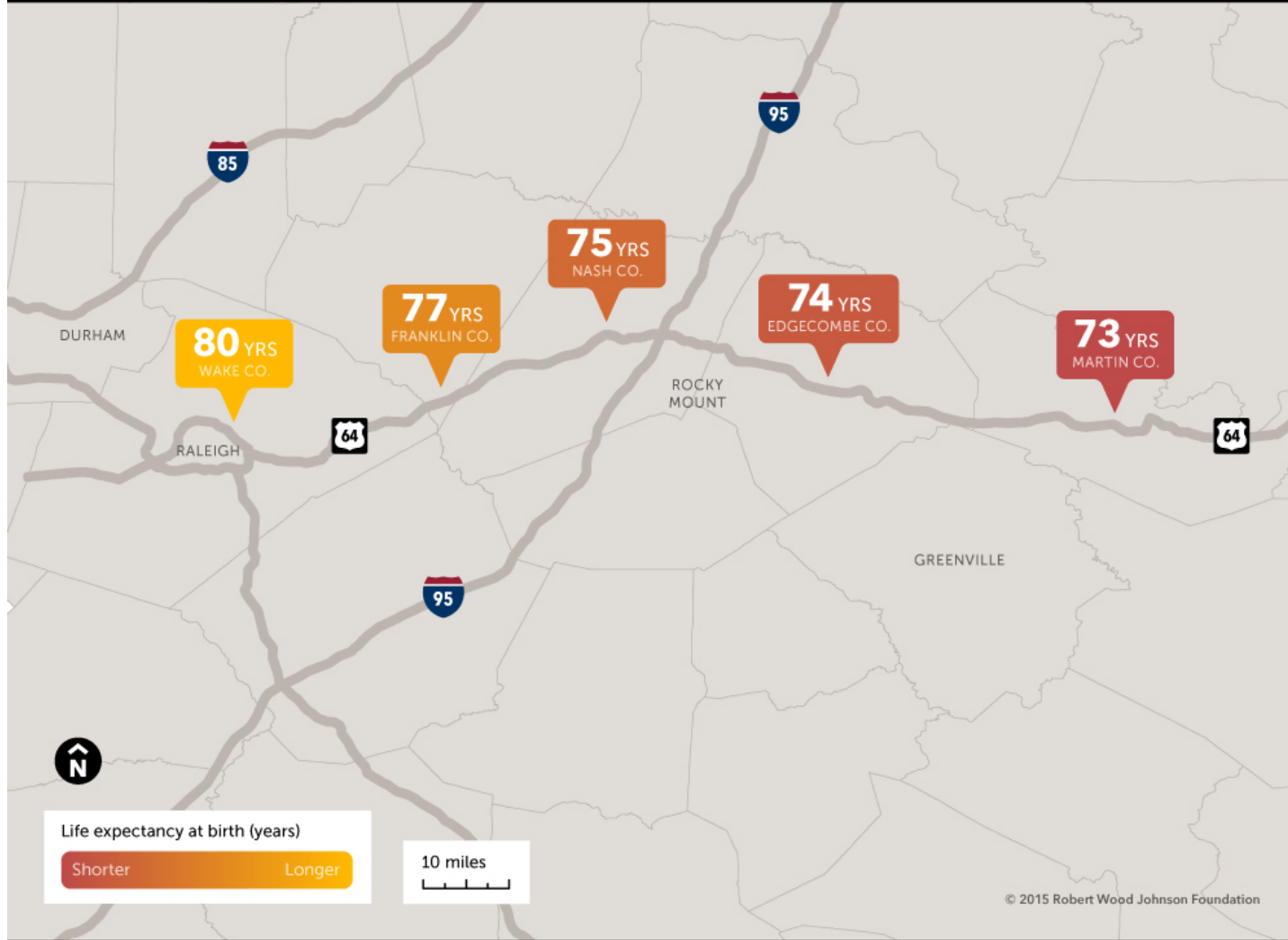


Rank 1-25 Rank 26-50 Rank 51-75 Rank 76-100

1 Highway, 5 Counties, 7 Years of Life

Follow the discussion

#CloseHealthGaps





Residential Segregation

A Fundamental Cause of Health Inequalities

VIEWPOINT

Racial Residential Segregation: A Fundamental Cause of Racial Disparities in Health

DAVID R. WILLIAMS, PhD, MPH*
CAROLINA COLLINS, PhD*

SYNOPSIS

Racial residential segregation is a fundamental cause of racial disparities in health. The physical separation of the races by enforced residence in certain areas is an institutional mechanism of racism that was designed to protect whites from social interaction with blacks. Despite the absence of supportive legal statutes, the degree of residential segregation remains extremely high for most African Americans in the United States. The authors review evidence that suggests that segregation is a primary cause of racial differences in socioeconomic status (SES) by determining access to education and employment opportunities. SES in turn remains a fundamental cause of racial differences in health. Segregation also creates conditions inimical to health in the social and physical environment. The authors conclude that effective efforts to eliminate racial disparities in health must seriously confront segregation and its pervasive consequences.



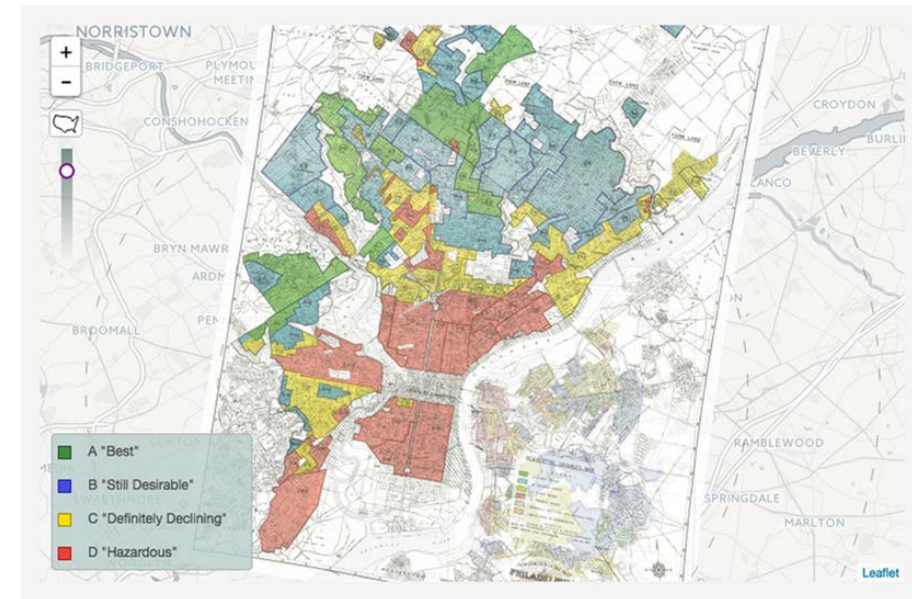
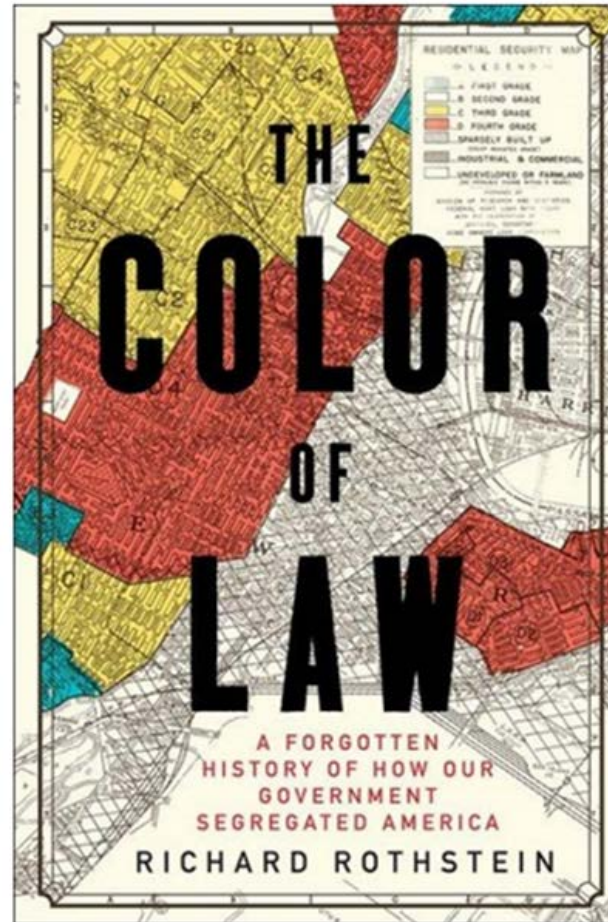
*Department of Sociology and Survey Research Center, Institute for Social Research, University of Michigan, Ann Arbor, MI

*Department of Sociology, University of Texas at Austin, Austin, TX

Address correspondence to David R. Williams, PhD, MPH, Institute for Social Research, Univ of Michigan, PO Box 1248, Ann Arbor, MI 48106-1248; tel: 734-936-0649; fax 734-647-6972; e-mail: ocdavid@umich.edu.

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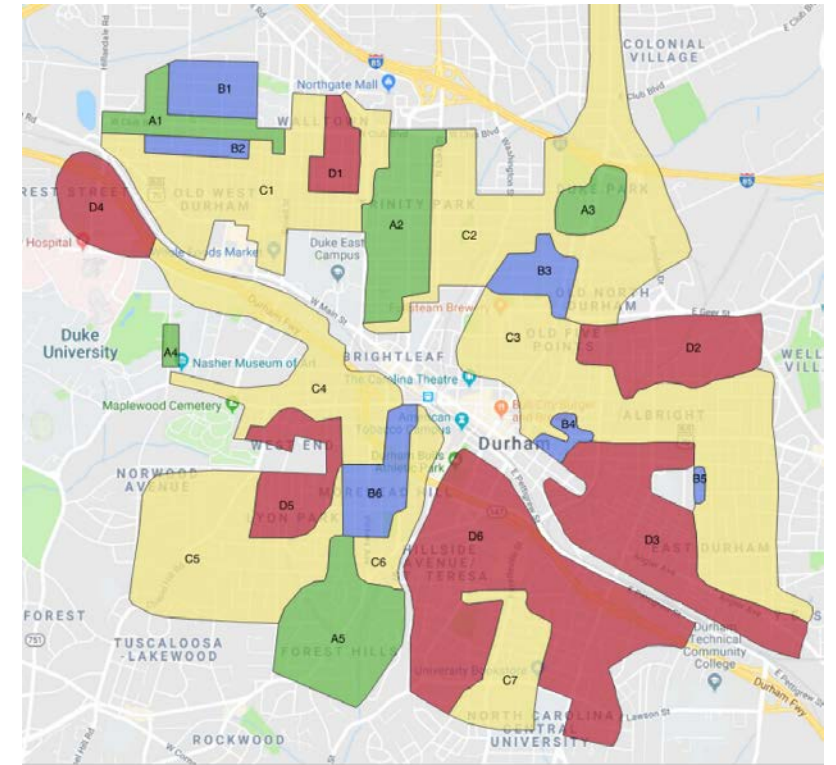
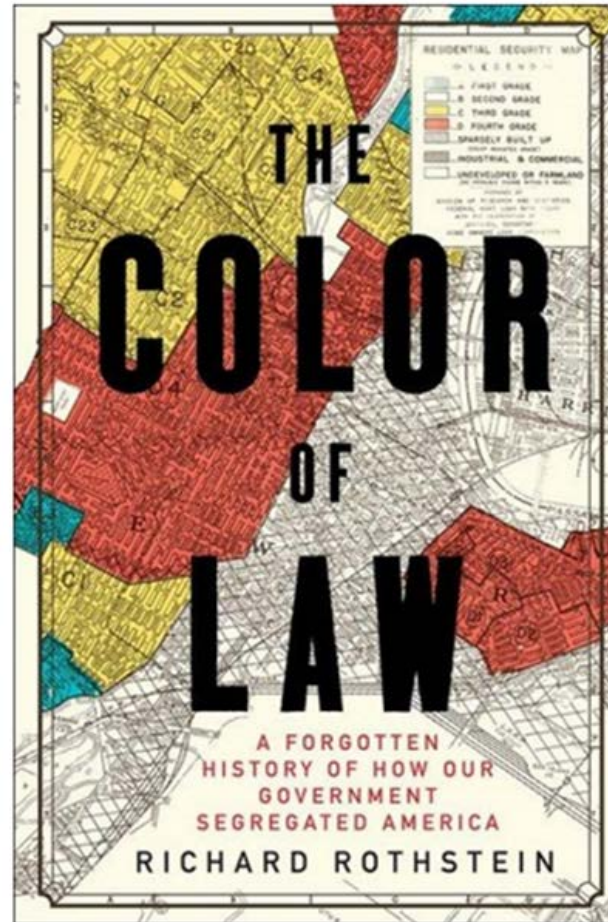
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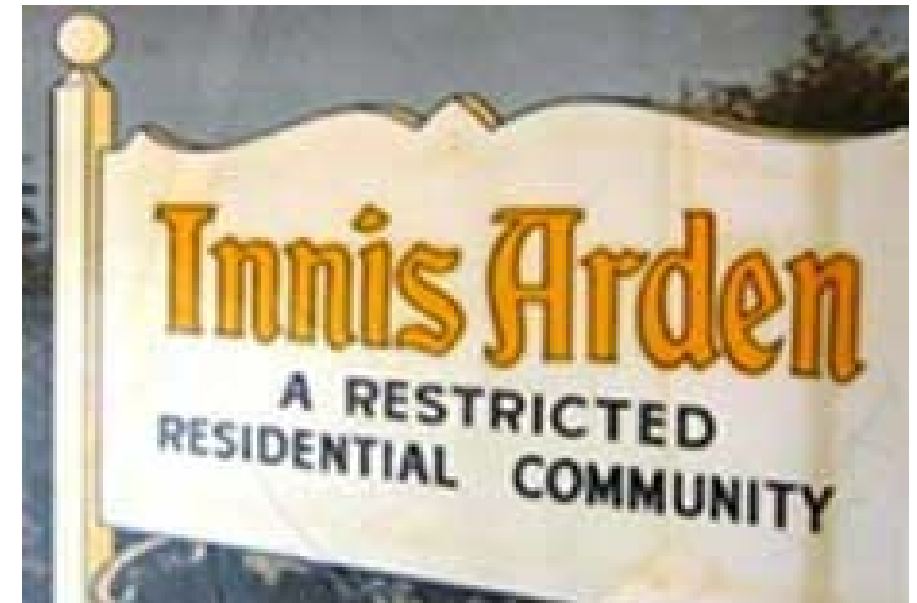
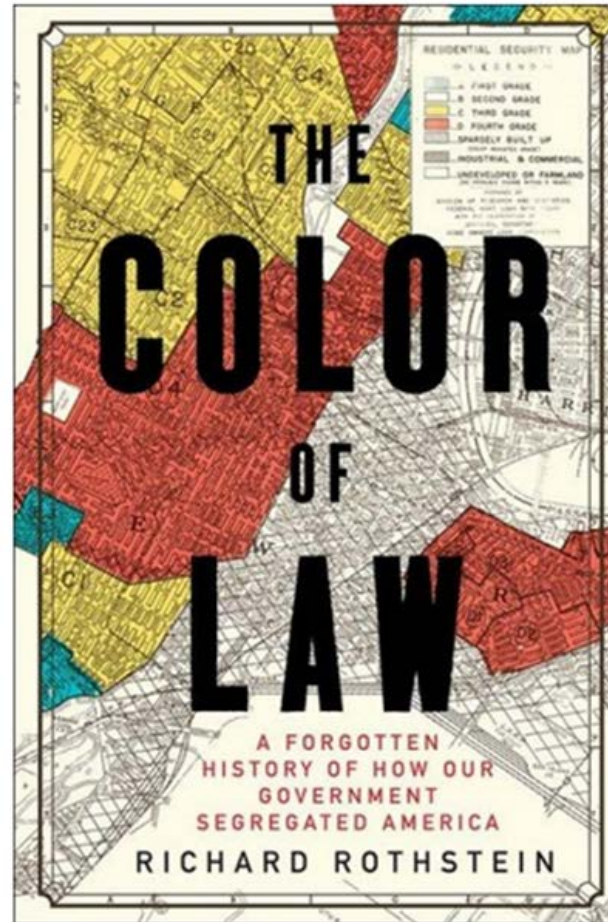
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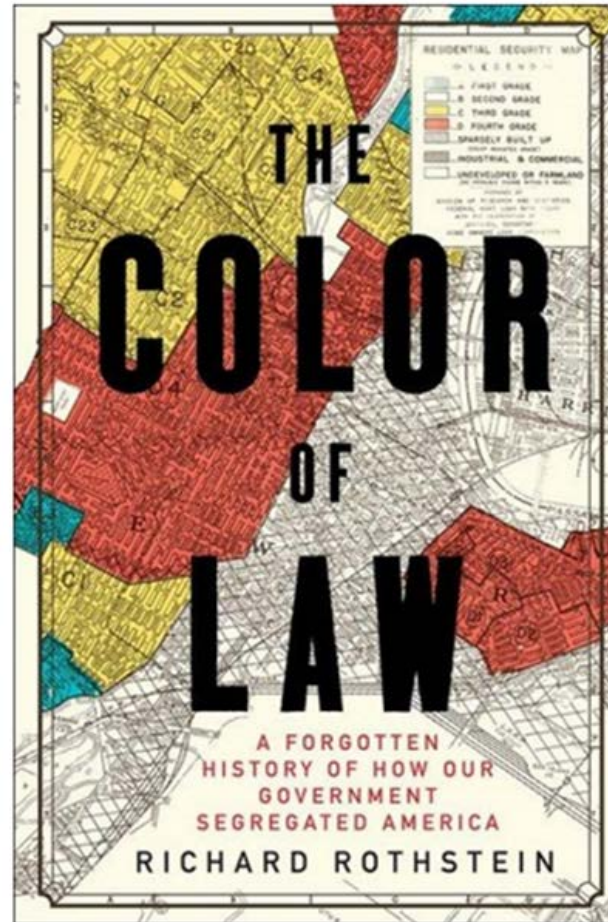
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POLICY

- I. [REDACTED]
- II. [REDACTED]
- III. [REDACTED]
- IV. [REDACTED]

FEDERAL

POLICY

- I. [REDACTED]
- II. [REDACTED]
- III. [REDACTED]
- IV. [REDACTED]

STATE

POLICY

- I. [REDACTED]
- II. [REDACTED]
- III. [REDACTED]
- IV. [REDACTED]

LOCAL

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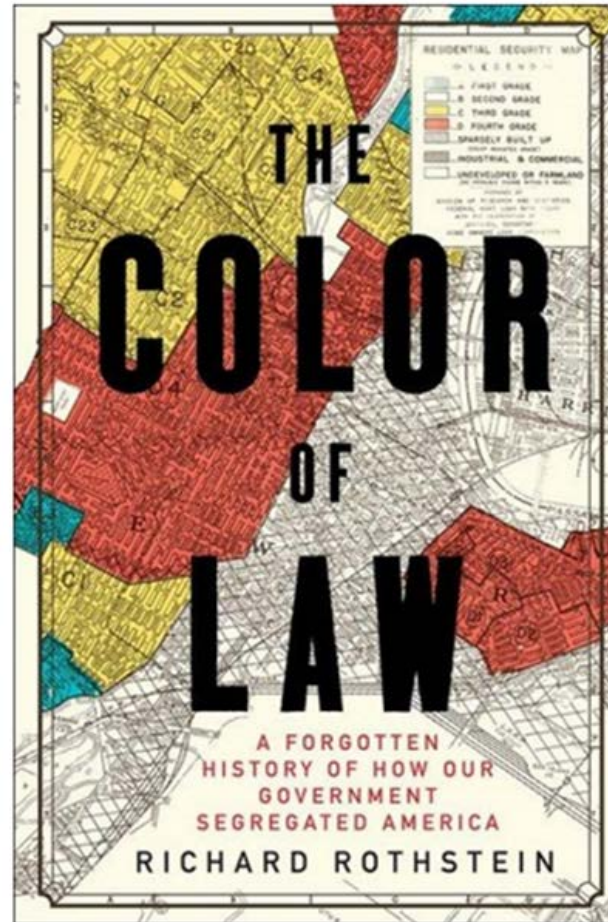
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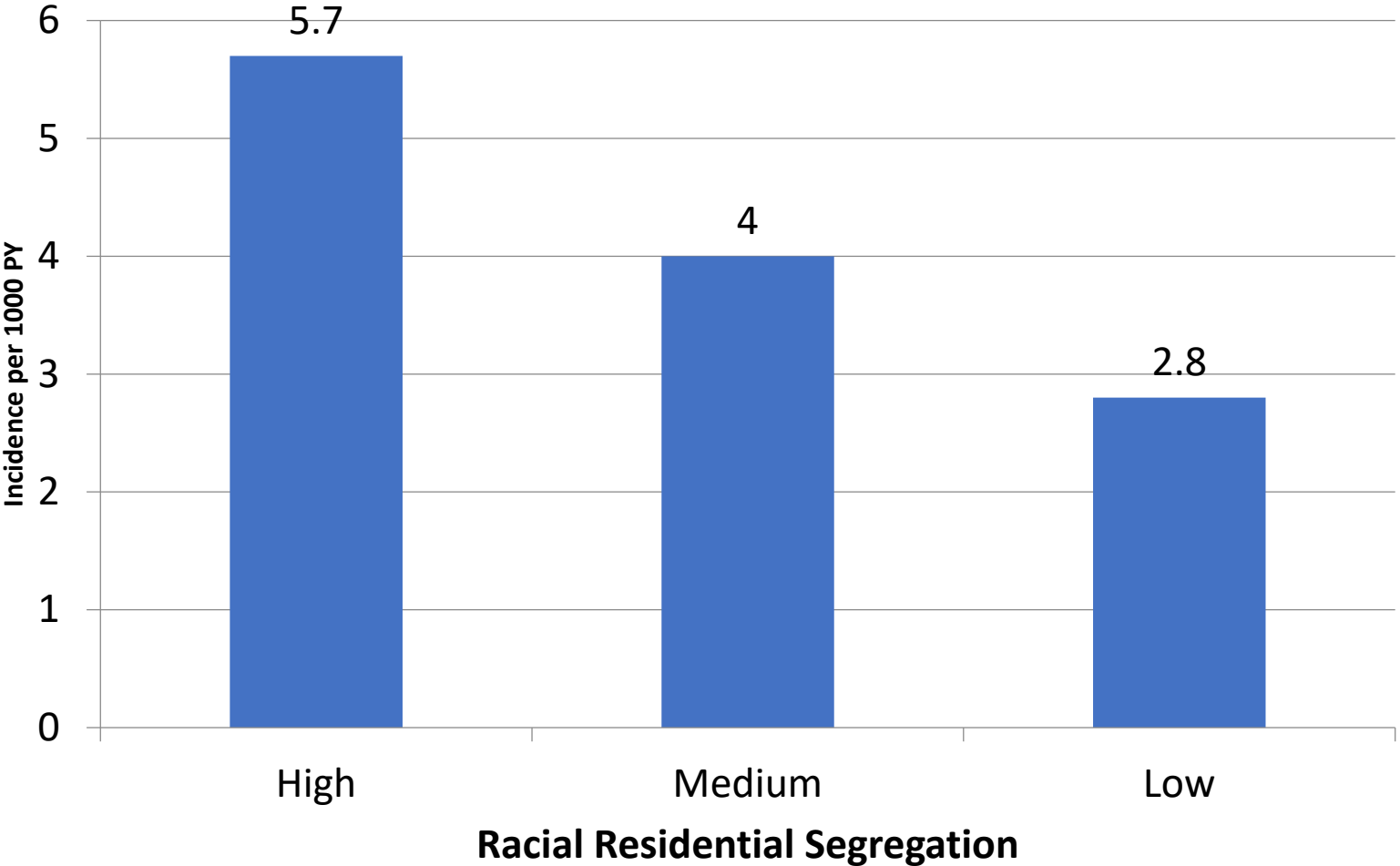
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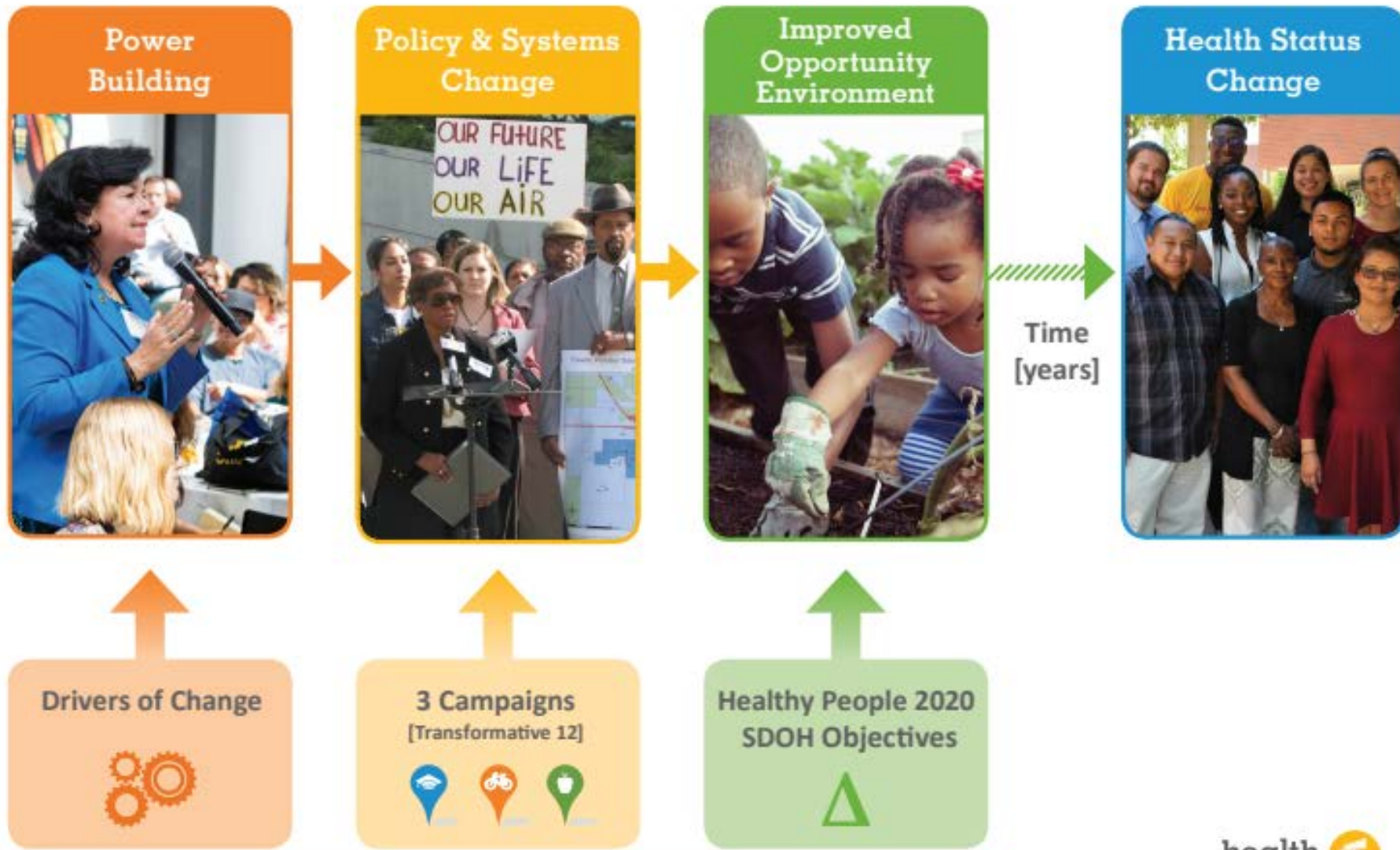


Adjusted CVD Incidence Rates by Racial Residential Segregation in Jackson, MS

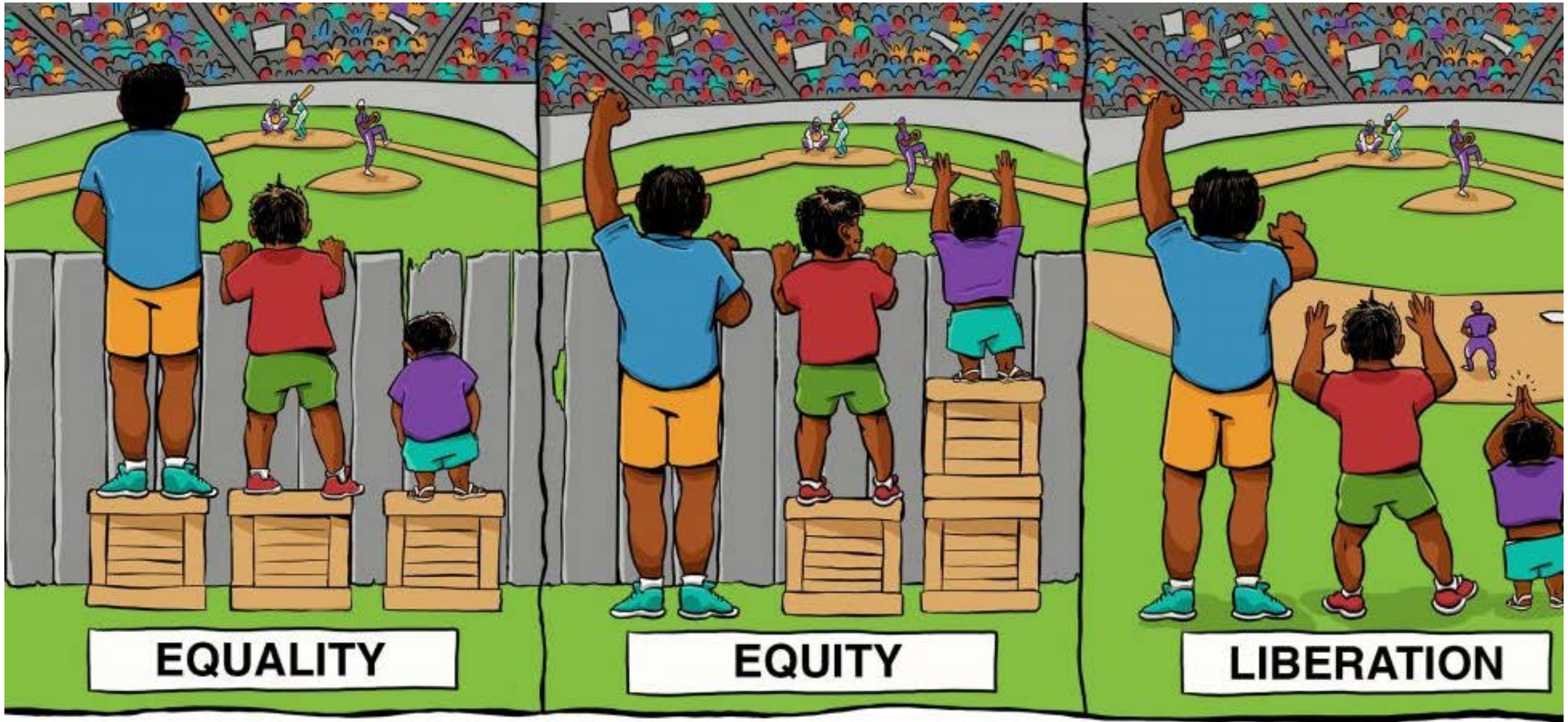
The Jackson Heart Study 2000-11



Building Healthy Communities | Theory of Change



North Star Goals & Indicators



EQUALITY

EQUITY

LIBERATION

Thank

You

smb483@drexel.edu

 @HealthEquityDoc



Dr. Mary Bassett

@DrMaryTBassett



Following

We must name racism as a cause of poor health. How we frame a problem is inextricable from how we solve it: bit.ly/2feUTbe



RETWEETS

20

LIKES

25



2:15 PM - 10 Nov 2016



 20

 25

