



Utilizing Social Justice Approaches via the Roots of Health Inequity Course to Help End the HIV Epidemic

2022 National Ryan White Conference on HIV Care and Treatment
August 23-26, 2022

HIV/AIDS Bureau (HAB), Office of Health Equity (OHE), Bureau of Primary Healthcare (BPHC) – HRSA
and National Association of County and City Health Officials (NACCHO)

Vision: Healthy Communities, Healthy People



Health Resources and Services Administration (HRSA)

Overview



Supports more than 90 programs that provide health care to people who are geographically isolated, economically or medically challenged



HRSA does this through grants and cooperative agreements to more than 3,000 awardees, including community and faith-based organizations, colleges and universities, hospitals, state, local, and tribal governments, and private entities



Every year, HRSA programs serve tens of millions of people, including people with HIV, pregnant individuals, mothers and their families, and those otherwise unable to access quality health care

HRSA's HIV/AIDS Bureau Vision and Mission

Vision

Optimal HIV care and treatment for all to end the HIV epidemic in the U.S.

Mission

Provide leadership and resources to advance HIV care and treatment to improve health outcomes and reduce health disparities for people with HIV and affected communities.



HRSA's Ryan White HIV/AIDS Program (RWHAP) Overview

- Provides a comprehensive system of HIV primary medical care, medications, and essential support services for low-income people with HIV.
- Funds grants to states, cities, counties, and local community-based organizations to improve health outcome and reduce HIV transmission.
 - Recipients determine service delivery and funding priorities based on local needs and planning process.
- Provided services to nearly 562,000 people in 2020—more than half of all people with diagnosed HIV in the United States.
- 89.4% of RWHAP clients receiving HIV medical care were virally suppressed in 2020, exceeding national average of 64.6%ⁱ.



Learning Objectives

At the conclusion of this presentation, you will be able to:

- Understand the purpose, design, functionality, use, and value of the *Roots of Health Inequity* course.
- Understand the connection between social determinants of health and its ongoing impact on the HIV epidemic.
- Understand how a social justice approach can be used in public health practice by a wide variety of RWHAP recipient staff and stakeholders.
- Consider how the course can be used to strengthen the development of internal and external strategic partnerships, with an emphasis on the integration of equity concepts into policy and programming.



HRSA's Office of Health Equity

Overview

HRSA's Office of Health Equity (OHE) works to reduce health inequities so that communities and individuals can achieve their highest level of health for all people. This is accomplished through the development of strategic partnerships, internally and externally, with an emphasis on the integration of equity concepts into policy and programming across all HRSA bureaus and offices to positively impact the people we serve.



HRSA's Office of Health Equity 2

Three Key Areas



Advance Health Equity Concepts, Achievements, and Cultural Competence



Develop and Sustain Internal and External Strategic Partnerships



Provide and Conduct Policy Consultation and Research

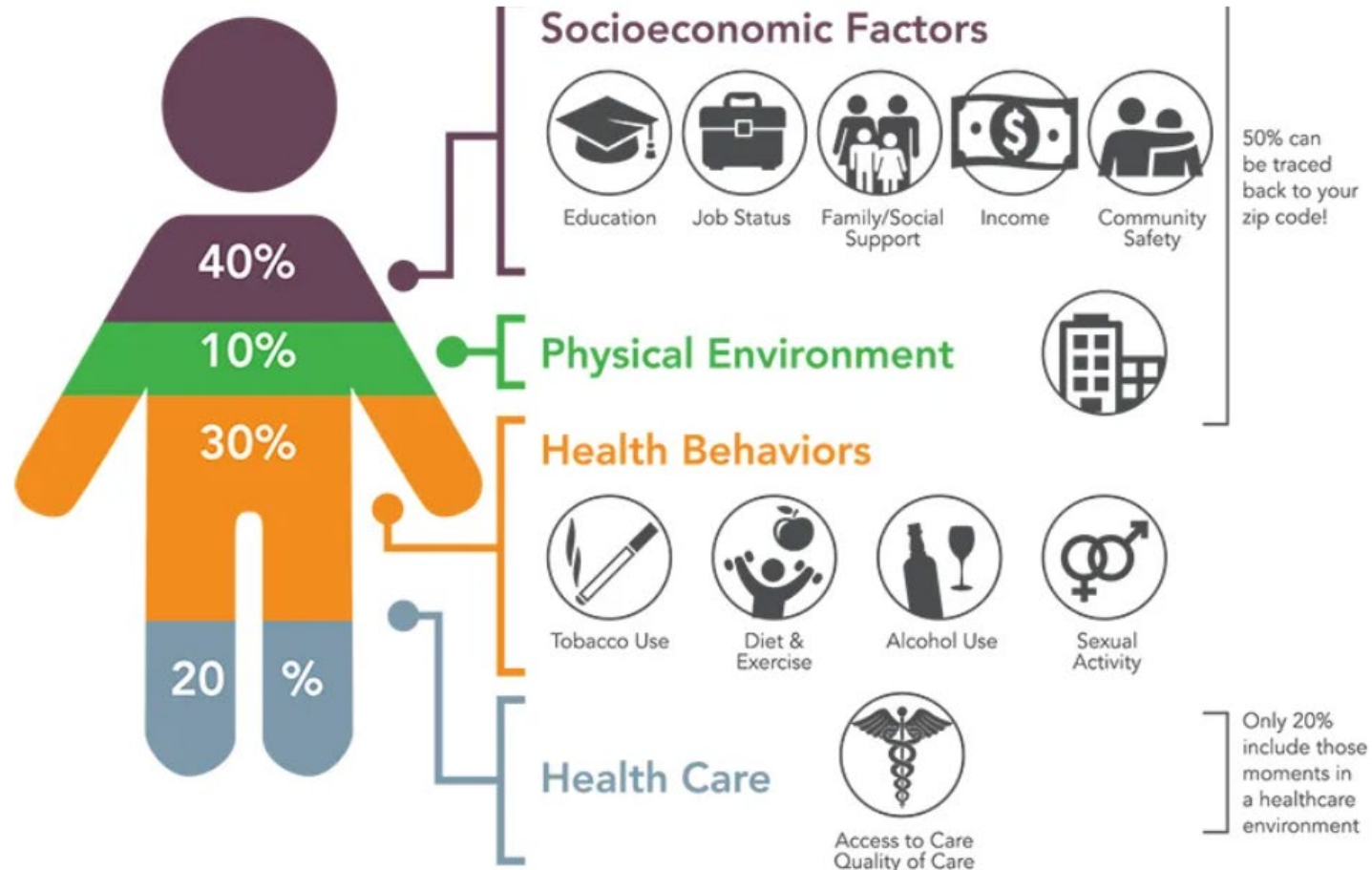
Mission: Reduce inequities and improve health equity, especially in vulnerable and disadvantaged populations

Social Determinants of Health

Social Determinants of Health



Factors



Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)

Social Determinants of Health and RWHAP

- Care coordination is a central component of Ryan White HIV/AIDS Program (RWHAP)
- In addition to the provision of core medical services, support services are also statutorily funded to address to meet the needs of different communities and people with HIV.
- Examples of Service Categories include:
 - Emergency Financial Assistance
 - Housing
 - Child Care Services
 - Transportation
 - Mental Health Services



Social Determinants of Health (SDOH) and EHE

- The Ending the HIV Epidemic in the U.S. (EHE) initiative focuses on reducing the number of new HIV infections in the United States by 90% by 2030.
- SDOH contribute to wide health disparities and inequities, including an individual's probability of acquiring an infectious disease, such as HIV, through influences on behavior, limited access to preventive measures, and limited access to healthcare providers or testing sites.
- Addressing SDOH through social justice approaches is a critical component of EHE.



Roots of Health Inequity

An Introduction to NACCHO's Health Equity and Social Justice Online Course

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National Association of County & City
Health Officials

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NATIONAL
RYAN WHITE
CONFERENCE
ON HIV CARE & TREATMENT

Disclosures

Jasmine Akuffo has no relevant financial interests to disclose.

Disclosure will be made when a product is discussed for an unapproved use.

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About NACCHO

- The National Association of County and City Health Officials (NACCHO) is the national organization representing the nearly 3,000 local health departments across the country.
- NACCHO strives to be a leader, partner, catalyst, and voice for local health departments.
- Our efforts focus on promoting health and equity, combating disease, and improving the quality and length of all lives.

Health Disparities vs Health Inequities

Health Disparities are...

- “...a particular type of **health difference that is closely linked with** social, economic, and/or environmental disadvantage”.

[Healthy People 2030](#)

Health Inequities are...

- “...differences in the distribution of disease, illness, and death that are ***systematic, unjust, actionable, and associated with imbalances in political power.***”

Source: Margaret Whitehead, “The Concepts and Principles of Equity and Health,” *Intl Jnl of Health Services* 3 (1992): 429. [paraphrased]

Root Causes

- Underlying social injustices that have accumulated over a long history that cause or drive health inequities
- Derive from fundamental social disadvantage, based on imbalances in political power or privilege¹
- Racism, class oppression, and gender inequity

Social Determinants of Health

- The results of injustice that produce the conditions in which people are born, grow, live, work, and age
- Examples: lack of education, limited access to transportation, accessibility of healthy foods

¹Richard Hofrichter, "Health Inequity: A Charge for Public Health," white paper, NACCHO Annual, July 2016.

About the Course 2

Origins

- In response to population health practitioner need for assistance tackling the root cause of health inequities

Funding

- National Center for Minority Health and Health Disparities at the National Institutes of Health, California Endowment, Kellogg Foundation and HRSA

The screenshot shows the homepage of the 'Roots of Health Inequity' website. At the top left is the 'NACCHO' logo. To its right are navigation links: 'LOGIN | FAQs | Resources | Site Requirements | Home'. Below this is a horizontal menu with links: 'ABOUT PROJECT', 'ABOUT COURSE', 'PREVIEW INTERACTIVES', 'HOW TO REGISTER', 'SITE CREDITS', and 'LEARN MORE CONTACT'. The main content area features a large, diverse group of people. On the left, a teal box contains the text 'ROOTS of HEALTH INEQUITY'. To the right, it says 'NACCHO presents The Roots of Health Inequity A Web-Based Course for the Public Health Workforce' followed by a 'LEARN MORE »' link. Below this is a pagination indicator '1 | 2 | 3 | 4 | 5 | 6'. At the bottom left, a section titled 'What's in this Online Learning Collaborative?' lists three bullet points: 'Explore social processes that produce health inequities in the distribution of disease and illness.', 'Strategize more effective ways to act on the root causes of health inequity.', and 'Form relationships with other local health departments who are working to ensure health equity.'. On the bottom right, there is a circular teal button that says 'ENTER ROOTS COURSE SITE' with a right-pointing arrow.

<http://www.rootsofhealthinequity.org/>

About the Course 3

- Addresses the root causes of health inequities and systemic differences in health and wellness that are actionable, unfair, and unjust
- Explores social processes that produce health inequities in the distribution of disease and illness
- Participants will be able to strategize more effective ways to act on the root causes of health inequity

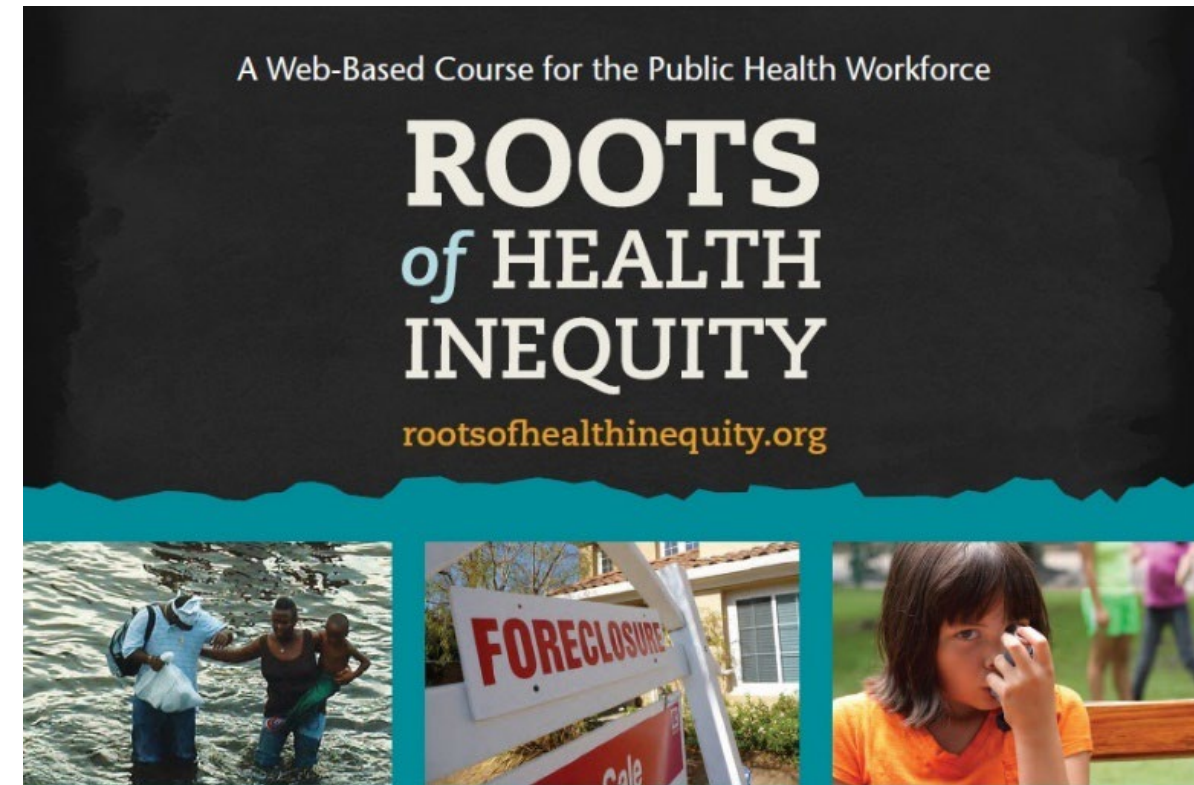
The screenshot shows the NACCHO website for the 'The Roots of Health Inequity' course. The page features a dark background with a large, diverse group of people. The title 'ROOTS of HEALTH INEQUITY' is prominently displayed in a teal box. Navigation links include 'ABOUT PROJECT', 'ABOUT COURSE', 'PREVIEW INTERACTIVES', 'HOW TO REGISTER', 'SITE CREDITS', and 'LEARN MORE CONTACT'. The main heading reads 'NACCHO presents The Roots of Health Inequity' followed by 'A Web-Based Course for the Public Health Workforce' and a 'LEARN MORE »' link. A pagination indicator shows '1 | 2 | 3 | 4 | 5 | 6'. A section titled 'What's in this Online Learning Collaborative?' lists three bullet points: 'Explore social processes that produce health inequities in the distribution of disease and illness.', 'Strategize more effective ways to act on the root causes of health inequity.', and 'Form relationships with other local health departments who are working to ensure health equity.' A circular button in the bottom right corner says 'ENTER ROOTS COURSE SITE' with a right-pointing arrow.

<http://www.rootsofhealthinequity.org/>

About the Course 4

Purpose & Audience

- A free educational website and collaborative learning course for current and future health professionals
- Offers a starting place for those who want to address systemic differences in health and wellness that are actionable, unfair, and unjust



About the Course 5

Design

- Interactive and customizable
- Participate as a group or an individual
- Signing-up is free; engage in it at any time
- Register at <https://members.rootsofhealthinequity.org>

The screenshot shows the registration page for the 'Roots of Health Inequity' course. The page header includes the NACCHO logo and the course title 'ROOTS of HEALTH INEQUITY: A Web-Based Course for the Public Health Workforce'. Navigation links for 'Create new account', 'Log in', and 'Request new password' are visible. The main content area features a 'Welcome, please log in.' message and a brief description of the course. On the right, there are sections for 'Help Guides' and 'About the Course'. The registration form is divided into 'Account Information' and 'Personal Information' sections.

Account Information

E-mail address *

A valid e-mail address. All e-mails from the system will be sent to this address. The e-mail address is not made public and will only be used if you wish to receive a new password or wish to receive certain news or notifications by e-mail.

Personal Information

First Name *

Enter your first name.

Last Name *

Enter your last name.

Organization *

Enter your organization.

Organization Type *

N/A

Choose an organization type.

Help Guides

Download these visual help guides to learn how to use this online course.

Main Features of this Course

- Create & Lead a Group
- Navigating the Units
- Index of Course Units
- Frequently Asked Questions (FAQs)

About the Course

Learn more about the course here.

- Technical Requirements
- Continuing Education
- About This Project
- Contact NACCHO
- Preview The Course
- How To Register

Course Overview

Roots of Health Inequity provides...

- A conceptual frame that links social justice to public health practice
- Resources and insights learners can share with others
- Reflections and actions for confronting health inequities
- Opportunities to collaborate and strategize with colleagues across the country

Course Overview 2

Roots of Health Inequity is organized into six units:



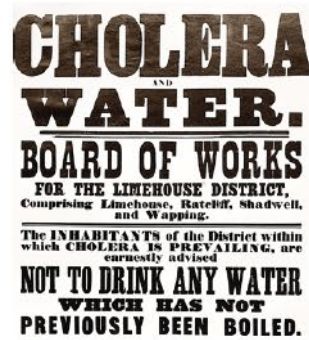
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Where Do We Start?



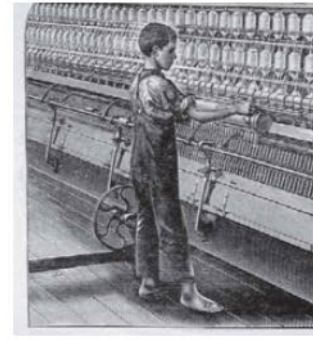
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Perspectives
on Framing



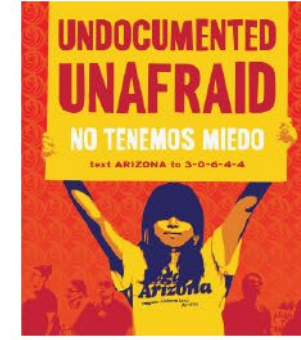
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Public Health
History



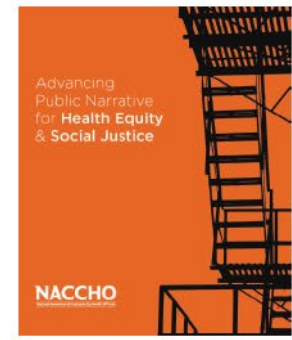
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Root Causes



5

Social Justice



6

Public Health
Narrative

And offers:

- Case studies, interactive/multimedia activities, voices from the field, and ways to move through the content at your own pace and design

Site Engagement

West Harlem's Battle for Clean Air

In the 1950's, the City of New York quietly decided to build a massive sewage treatment plant in West Harlem. The plant protected the Hudson River, but its air pollution made nearby residents sick. Fed up with the community's skyrocketing rates of asthma and other respiratory diseases, residents formed a coalition to confront the disturbing history behind the plant's placement and construction.



WE-ACT

Peggy Shepard, Chuck Sutton, and Vernice Miller (not pictured) co-founded the community group West Harlem Environmental Action (WE-ACT).

[Listen to Their Story](#)

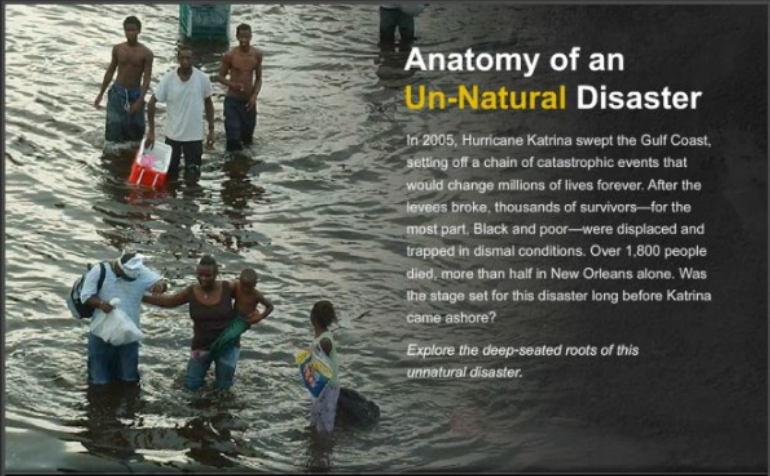
[Download Audio File](#) (MP3 File)

[Download Transcript](#) (PDF File)


Anatomy of an Un-Natural Disaster

In 2005, Hurricane Katrina swept the Gulf Coast, setting off a chain of catastrophic events that would change millions of lives forever. After the levees broke, thousands of survivors—for the most part, Black and poor—were displaced and trapped in dismal conditions. Over 1,800 people died, more than half in New Orleans alone. Was the stage set for this disaster long before Katrina came ashore?

Explore the deep-seated roots of this unnatural disaster.



1 2 3 4 5 6 7 8 9 10 Next




01 PUBLIC HEALTH OFFICIAL

ANSWER

The water is toxic because of the presence of chemical X. The LHD will investigate the health effects of this chemical X, closely monitor the levels of chemical X in the water, supply bottled water or filtering systems in places where the level poses a risk, and provide information to area physicians who will be the most likely to encounter patients suffering from the effects of chemical X.

[REVEAL QUESTION](#)




02 PUBLIC HEALTH OFFICIAL

ANSWER

Chemical X entered the water through a leak in a holding pond at the XYZ Mine. The LHD will work with other government agencies to require the company to fix the leak, fine them for the release, closely monitor future safety procedures, and ask the company to pay for the required cleanup.

[REVEAL QUESTION](#)



03 PUBLIC HEALTH OFFICIAL

ANSWER

The water is toxic because pressure for jobs allowed industry to develop without adequate government regulation, corporate structures valued short-term profits over long-term community safety. The people who lived nearby were poor and without the political power to draw attention to what was happening. The LHD will organize residents to research mining methods that do not use chemical X and facilitate a campaign to reduce reliance on energy sources that use chemical X in the mining process.

[REVEAL QUESTION](#)

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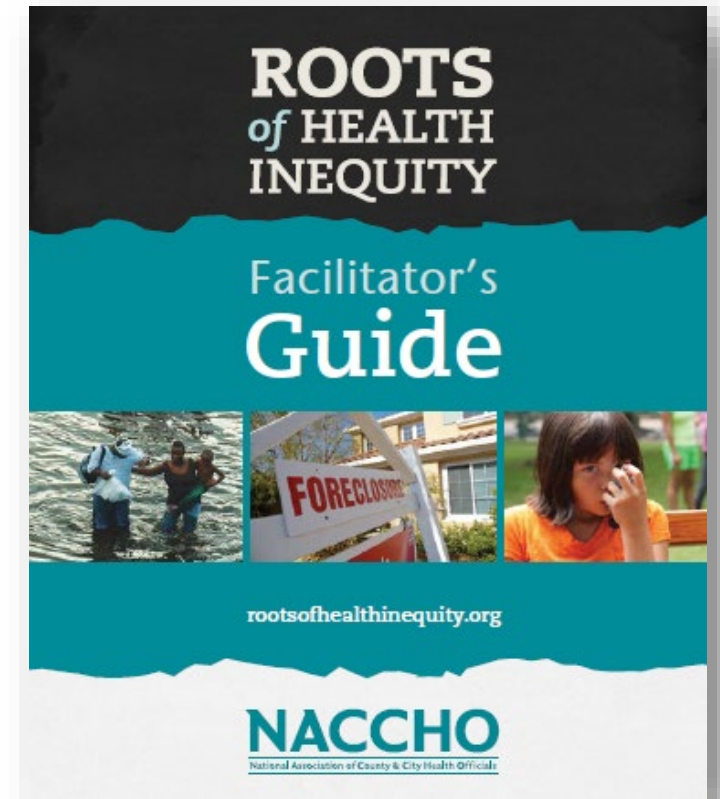
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 3 days 18 hours ago
[reply](#)
[Reset flags](#)

- The first two approaches to "water is toxic" are more remedial, the third is more of a social justice approach.
- In some ways, this reminds me of the "5 Whys" approach to problem-solving. Why-1: Why is the water toxic? Because there is a chemical in it. Why-2: Why is there a chemical in it? Because there was a leaky pipeline. Why-3: Why-4, eventually Why-5: Because of societal conditions that allow the chemical plant to be located in a poor neighborhood, have poor oversight, etc. etc. To me, public health has limited itself in the past to things that were clearly related to basic pathophysiology and epidemiology, but now with calls to go continually further "upstream" (social justice approach) it's clear that we must stop limiting ourselves in these regards, and claim the bigger, more upstream picture as a legitimate - and essential - part of our practice.

Course Overview 3

The *Facilitator's Guide* includes..

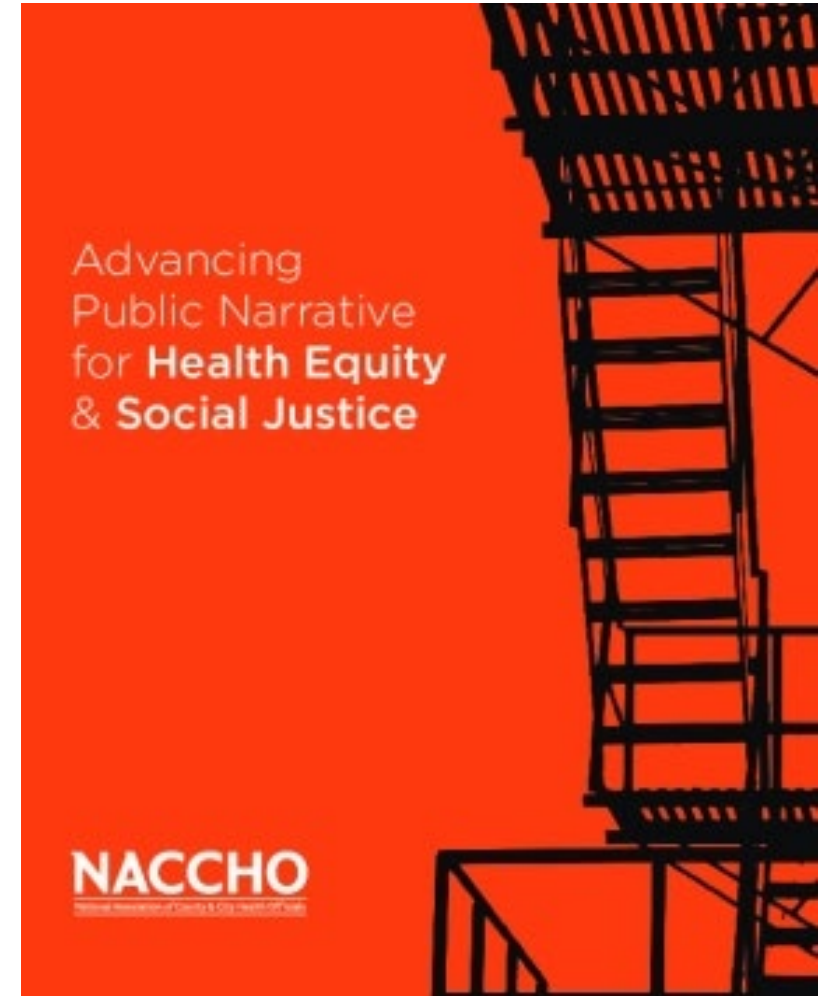
- Information for each unit of the course
- Tips for getting started
- Directions for forming a learning group
- Guidance and tools to support facilitation of social justice discussions



Course Overview 4

New companion resource, which...

- Provides overview of dominant public narratives that impact health;
- Aims to develop skills for recognizing and addressing these narratives;
- Looks to advance health equity through a social justice-based public narrative; and
- Includes facilitated dialogue strategies

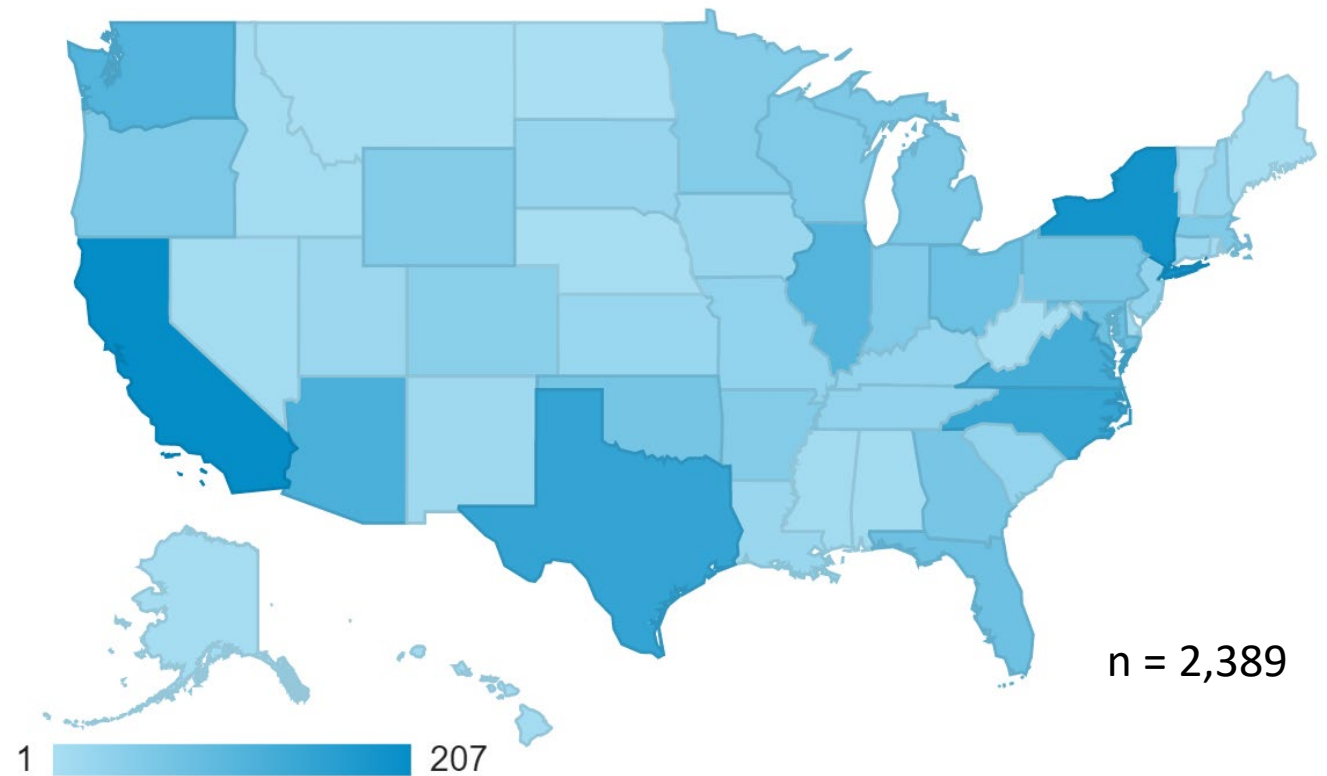


Course Participants

Over 2,300 new users every 3 months, including:

- Local and state health departments
- Healthcare organizations
- Academia
- Federal agencies (HRSA)
- Community-based organizations
- Faith-based organizations

New U.S. Users: May 5, 2019 - Aug 5, 2019



Course Results

As a Result of This Unit/Course	% who Agree or Strongly Agree
I gained new insights about the issue in relation to my work	81%
I am more aware of what needs to be done to tackle the root causes of health inequity in my jurisdiction or how to approach the issue	81%

As a result of this unit/course, I am likely to do the following in the near future:	% who Agree or Strongly Agree
Talk to my colleagues about it	76%
Change how I conduct my work, where applicable	75%

Some things to keep in mind...

- The *Roots* course can be conducted in-person or virtually
- There are several different ways to implement the course
 - E.g., 1 unit over 5 weeks, 1 hour per week
 - E.g., Pathways / sequencing
- NACCHO is here to provide guidance and technical assistance on how to implement and facilitate the course

NACCHO's Southern Initiative

- Was supported by the Secretary's Minority HIV/AIDS Initiative Fund and administered by HRSA's HIV/AIDS Bureau
- The purpose was to improve HIV outcomes and reduce disparities among minority populations in the South
- Staff from the four organizations that participated in the project took *Roots* to:
 - Increase awareness of health inequities and social injustices impacting health outcomes
 - Increase capacity to engage and serve minority populations
 - Address social, structural, economic, and environmental issues impacting implementation and success of clinical and behavioral interventions to improve HIV outcomes

Implementing the Roots of Health Inequity Course



Co-creators of Knowledge



HRSA Roots of Health Equity

Courses

- 18 cohorts since 2015
- Class size: 20-25
- Bureau/office specific offerings

Evaluations

- *“The course helped me understand some of the issues faced by populations served by my grantees, and the challenges they face in trying to close some of the disparity gaps.”*
- *“I appreciate hearing from other bureaus in HRSA and learning about the work that they do.”*
- *“As a Project Officer for HRSA this has made me think about the projects I manage and how can I support my grantees in improving the health care of Americans through the activities and programs being implemented.”*



Sample Activities from the Roots of Health Inequity Course



Activity 1 – The Social Justice Approach to Public Health



What are the characteristics of a social justice approach to public health practice?

In this activity you will:

- Reflect on some features of your overall approach to public health practice.
- Explore how a social justice perspective for eliminating health inequity might inform and influence that practice.

Activity 1 – The Social Justice Approach to Public Health

2



Public health practice area

- Assuring a competent workforce
- Involvement in decision-making processes
- Building effective alliances
- Enforce laws
- Establish leadership
- Monitoring and surveillance
- Developing public policies and policy analysis
- Working with community residents

Activity 2 - Dominant Public Narratives

- Stories, explanations, or cultural practices
- Deeply rooted and widespread
- Give preference to the interest of dominant social groups based on race, class, gender hierarchies
- Reinforce existing power relations, inequality

Dominant Public Narratives that Hinder Health Equity

- **Individualism:** The self-determining individual who makes right or wrong choices
- **Avoid structural racism:** Racism as overt discrimination, prejudice, and interpersonal bias
- **Prosperity=\$:** Equating prosperity with free, self-regulating markets
- **Government:** Inherently inefficient, corrupt, and authoritarian (weakening democracy and undermining political equality)

Dominant Public Narratives that Hinder Health Equity 2

- **Stigma** - Patterns of stigmatization and “othering” make it more likely that those groups will be treated as disposable and less valuable, potentially making their communities more likely targets for hazardous waste, fewer government services, and higher levels of housing discrimination.

Elements for Advancing Social Justice Through Narrative

- Provides a vision for a socially just society that is desirable, clear, and possible
- Makes social injustice visible
- Encourages incorporating the specific *language, beliefs, values*, and cultural representations of social justice, equality, and democracy as a normal feature of political objectives and practices
- Directs *attention to the root causes of health inequity*, distinguishing between action emphasizing mitigation vs. confronting social injustice through social change
- Demonstrates that oppression and inequality are *produced*, not random or the result of inevitable unnamed “forces”
- Acknowledges and reinforces the voices and stories of those who experience social injustice, and illustrates how they represent the shared experience of all people



Taking Action: HIV

How did/does a social justice approach promote health equity?

- Formed in 1987 as the AIDS Coalition to Unleash Power, ACT-UP fought successfully against stigmatization of People Living with HIV, lack of access to medications, and increased public understanding of the disease.
- ACT-UP worked to impact the lives of people with AIDS through legislation, medical research, treatment, and policies that will ultimately bring an end to the disease.
- Ending the HIV Epidemic in the U.S.



Implementing the Roots Course in the RWHAP

- Take inventory of community strengths with stakeholder input (Unit 1)
- Promote awareness events that recognize key moments in history that have contributed to legacies of social injustice (Unit 3)
- Link clients to support services that directly address the root causes of health inequity (Unit 4)
- Integrate social justice approaches in client case management (Unit 5)
- Discuss public narratives that hinder health inequity in staff meetings (Unit 6)



Summary

- Social Determinants of Health are critical components to address in order to improve health outcomes and specifically meet EHE goals.
- The Roots of Health Inequity Course can serve as a tool to address health inequities, facilitate social justice approaches and integrate them into your RWHAP and EHE initiatives.
- Course activities can be used internally or externally to spark conversation, engage in thoughtful dialogue and develop equitable policy and programming.

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Connect with the Ryan White HIV/AIDS Program

Learn more about our program at our new website:

ryanwhite.hrsa.gov



Sign up for the Ryan White HIV/AIDS Program Listserv:

<https://public.govdelivery.com/accounts/USHHSRSA/signup/29907>

Connect with HRSA

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