

How do economic inequality and racism create health inequality?

Conference on Inequality
Ohio State University, Columbus
September 23, 2016

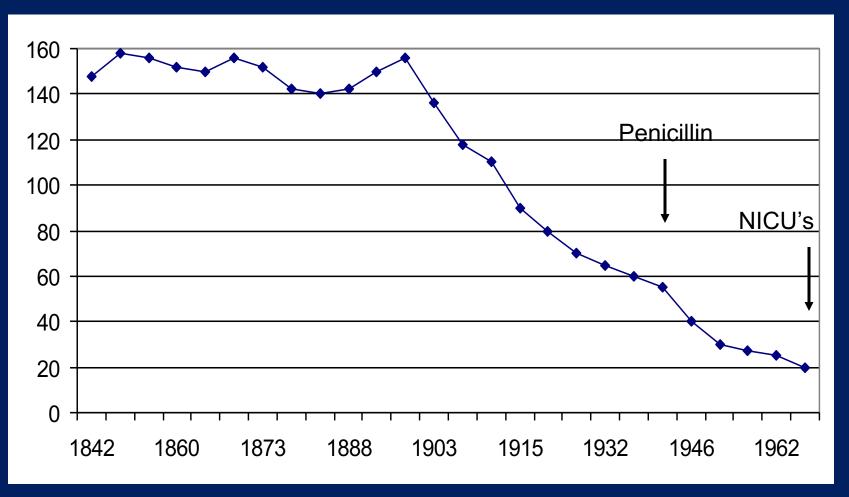
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More health care spending but less health: Life expectancy

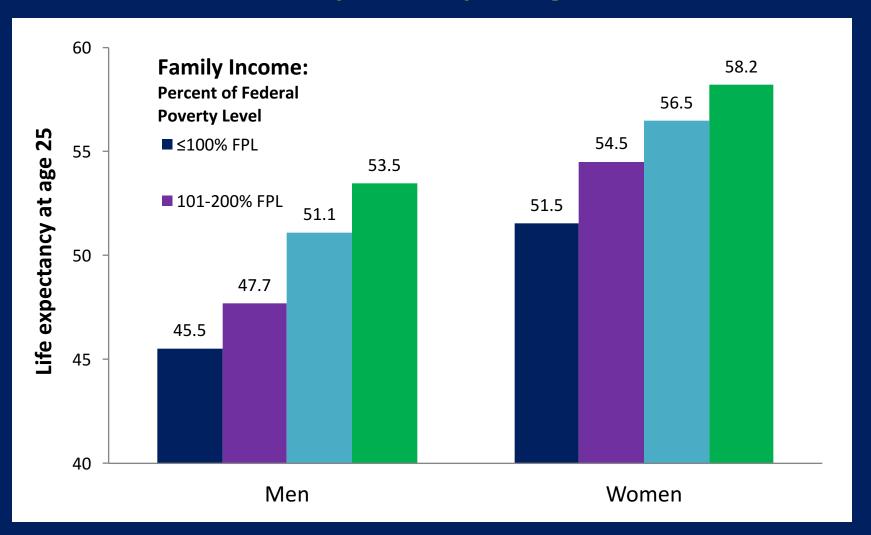
- 1 Japan (82.3 years)
- 2 Australia
- 3 Canada
- 4 Spain
- 5 Sweden/Switzerland
- 6 Israel
- 7 Iceland
- 8 New Zealand
- 9 Italy
- 10 Norway
- 11 Ireland
- 12 United Kingdom
- 13 Greece
- 14 Austria
- 15 Netherlands
- 16 Luxembourg
- 17 Germany
- 18 Belgium
- 19 Finland
- 20 Korea
- 21 Denmark
- 22 Portugal
- 23 United States (78.2 years)
- 24 Chile
- 25 Slovenia
- 26 Czech Republic

Source: CIA: *The World Factbook* online, January 2011 (2010 estimate).

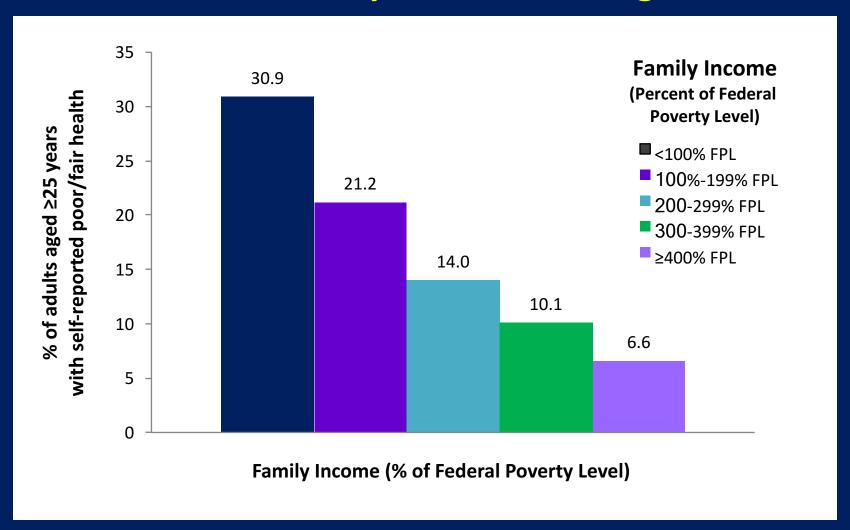
Improved living conditions, not medical care, explain infant mortality decline in England and Wales



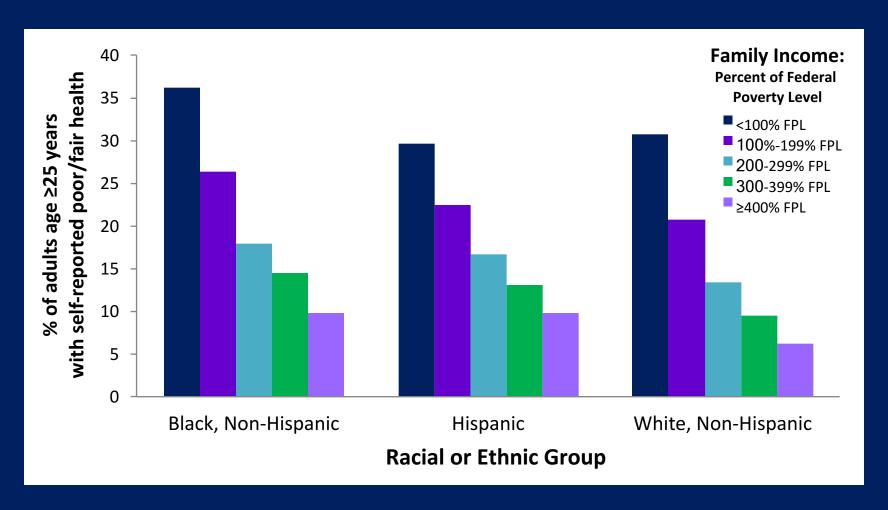
Higher income, longer life: Life expectancy at age 25



Higher income, better health: Poor/fair self-reported health, age 25+



Racial/ethnic differences do not explain differences in adult health by income



How could income affect health?

Income can shape:

- Medical care
- Nutrition & physical activity options
- Housing & neighborhood conditions
- Services

Which can affect:

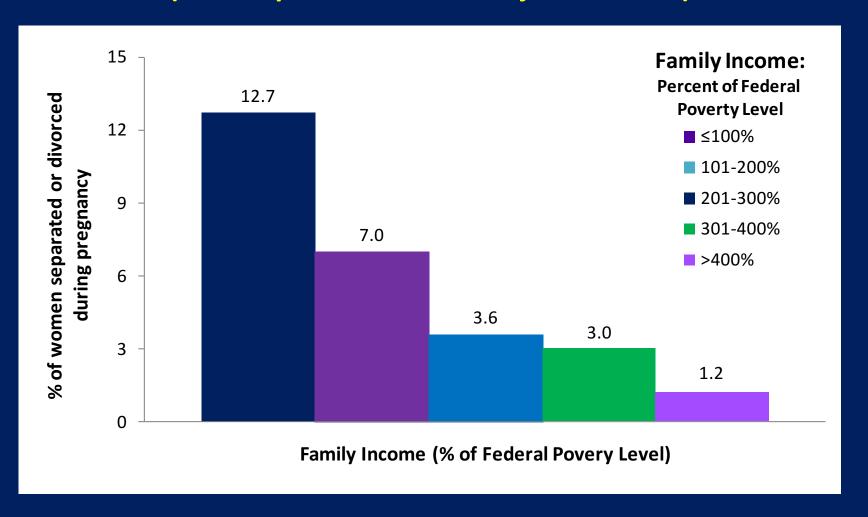
- Stress
- Family stability

Parents' income shapes offspring's:

- Education
- Occupation
 - Income
 - Work conditions

Less income, more stressors.

Separation or divorce during pregnancy (similar patterns for 11 major stressors)



Source: CA Maternal & Infant Health Assessment 2003-2006.

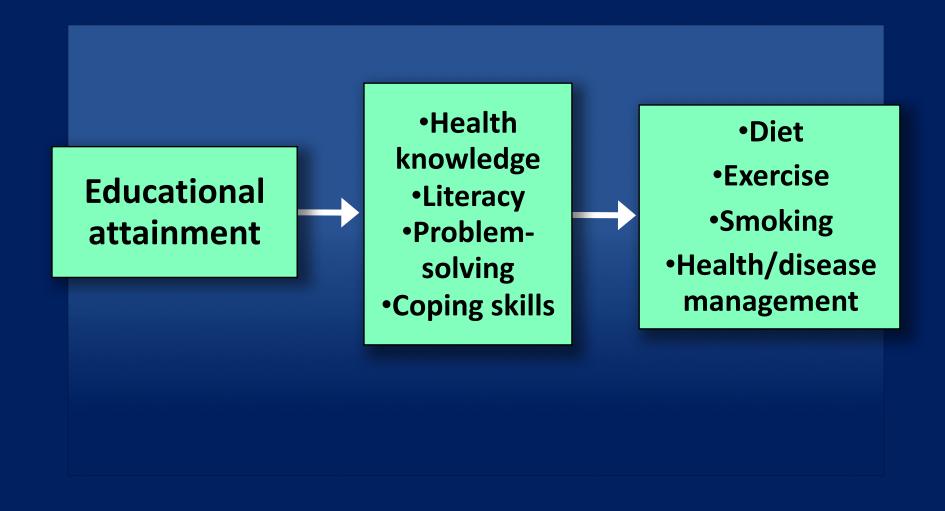
Income shapes neighborhood options. How could a neighborhood affect health?

- Pollution, toxic waste
- Safe places to exercise
- Access to healthy food
- Ads for harmful substances
- Social networks & support
- Norms, role models, peer pressure
- Quality of schools
- Racial segregation tracks
 Blacks & Latinos into poorer
 neighborhoods than Whites
 of similar income

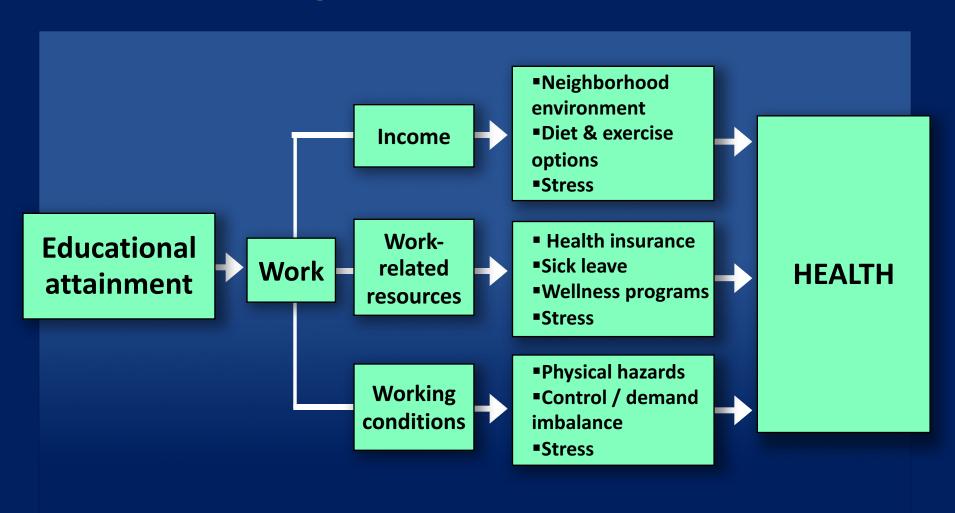


Image: http://www.seattlemet.com/news-and-profiles/publicola/articles/some-rich-architects-mansion.

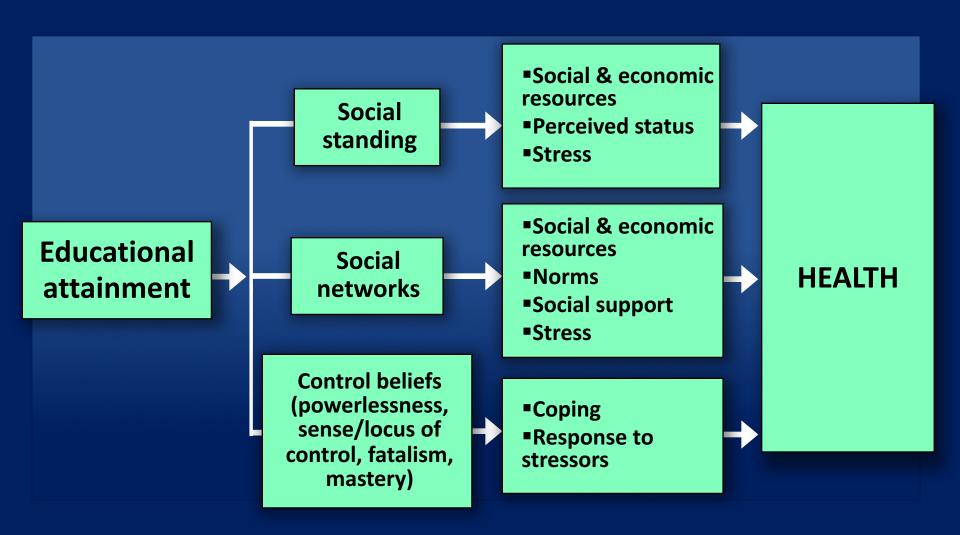
Education can shape health-related behaviors by determining knowledge and skills



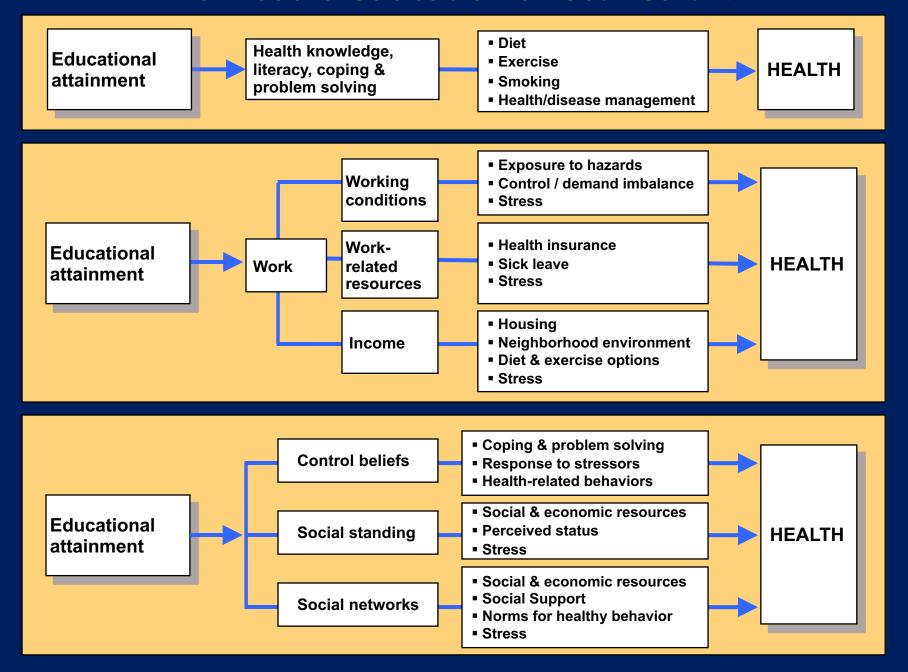
Other plausible pathways from education to health, e.g., via work & income



Psychosocial pathways from education to health



How could education affect health?



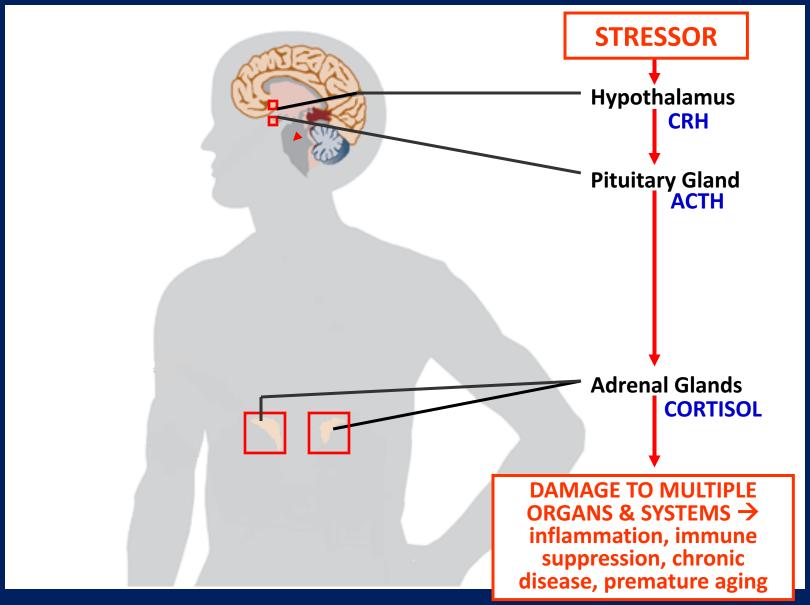
How could racial discrimination harm health?

- Socioeconomic effects: The legacy of formerly legal discrimination-- lower incomes, wealth, education, occupations & poorer neighborhoods
 - Race captures unmeasured socioeconomic factors
- Psychological effects: Chronically stressful experiences related to racial discrimination
 - Chronic vigilance & subtle experiences could harm health, even without overt incidents
 - Potential effects on self-esteem/self-doubt
 - Experienced by all socioeconomic groups

The stress-health link: Biologically plausible?

- Advances in neuro-science indicate how social factors like income, education, and racial discrimination "get into the body"
- Multiple pathways, mechanisms, & brain regions have been identified in stress response: HPA axis, ANS, immune system, metabolic & vascular responses
 - Cortisol, epinephrine, cytokines, telomerase...
 - Changes in brain architecture & function in young children exposed to adversity
- Chronic stress is likely a major contributor to both socioeconomic and racial/ethnic inequalities in health

How could stress affect health?

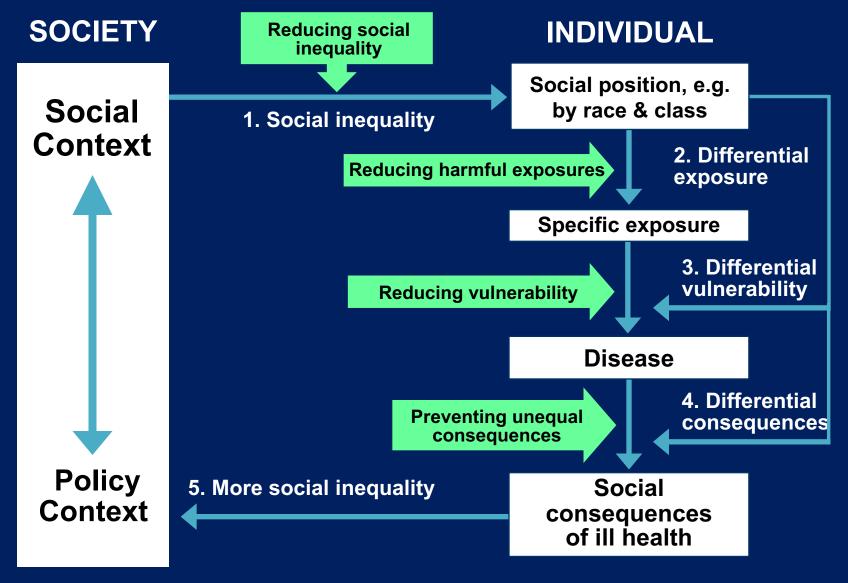


Source: Center on Social Disparities in Health, UCSF.

Major scientific advances re the social determinants of health

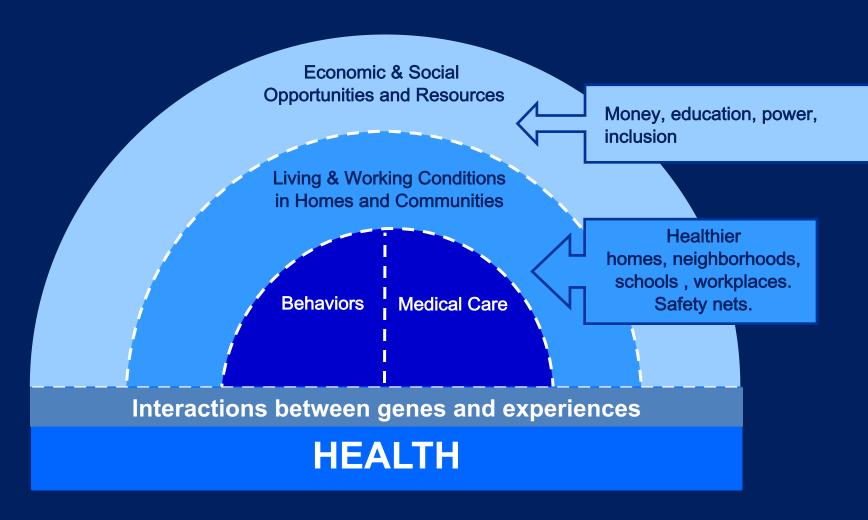
- Advances in neuro-science indicate how social factors like income, education, racial discrimination and stress "get into the body"
- Chronic stress is likely a major contributor to both socioeconomic and racial/ethnic inequalities in health
- Childhood experiences shape adult health
- Understanding how racism shapes health across generations
- Epigenetics: "Genes load the gun; the environment pulls the trigger" (J Stern, UC Davis)

What produces health disparities across the life course and across generations?





Reducing health inequality by addressing "the causes of the causes"

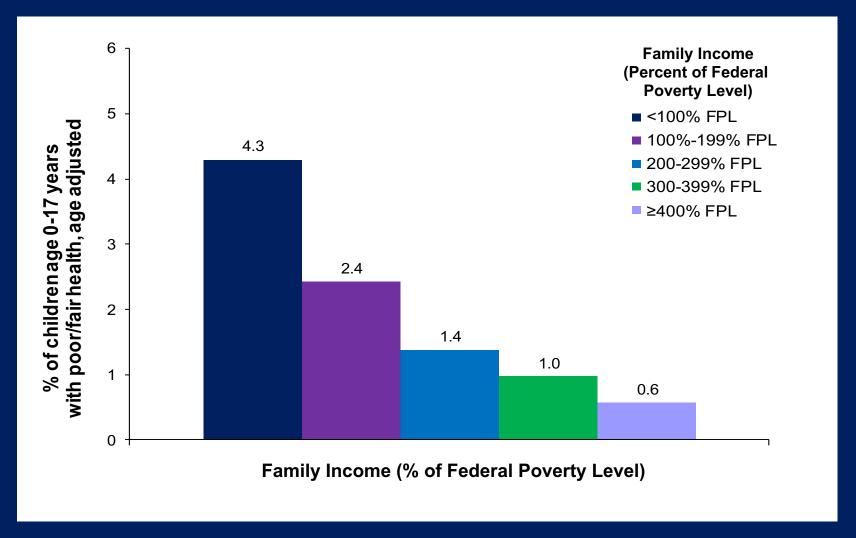


P Braveman et al., University of CA., San Francisco, adapted from version originally created for the Robert Wood Johnson Foundation Commission to Build a Healthier America www.rwjf.org

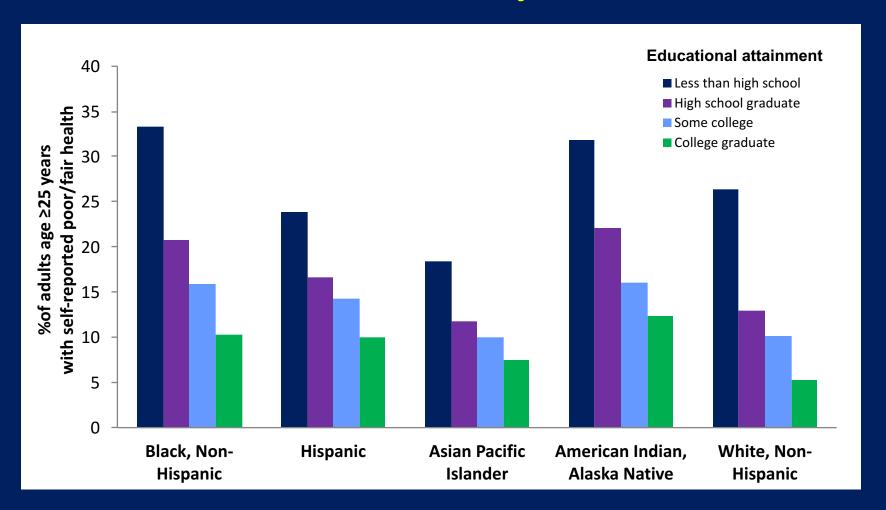


"Good news—I hear the paradigm is shifting."

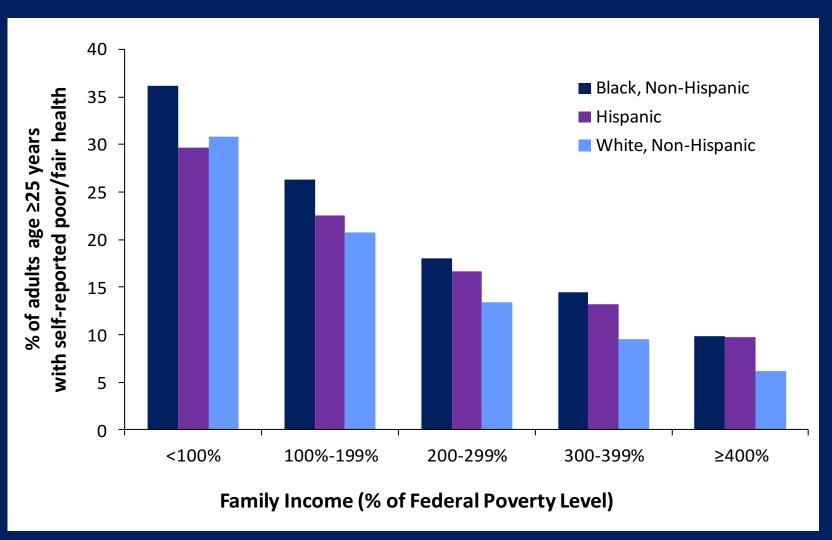
Higher income, healthier children: Poor/fair child health reported by parent

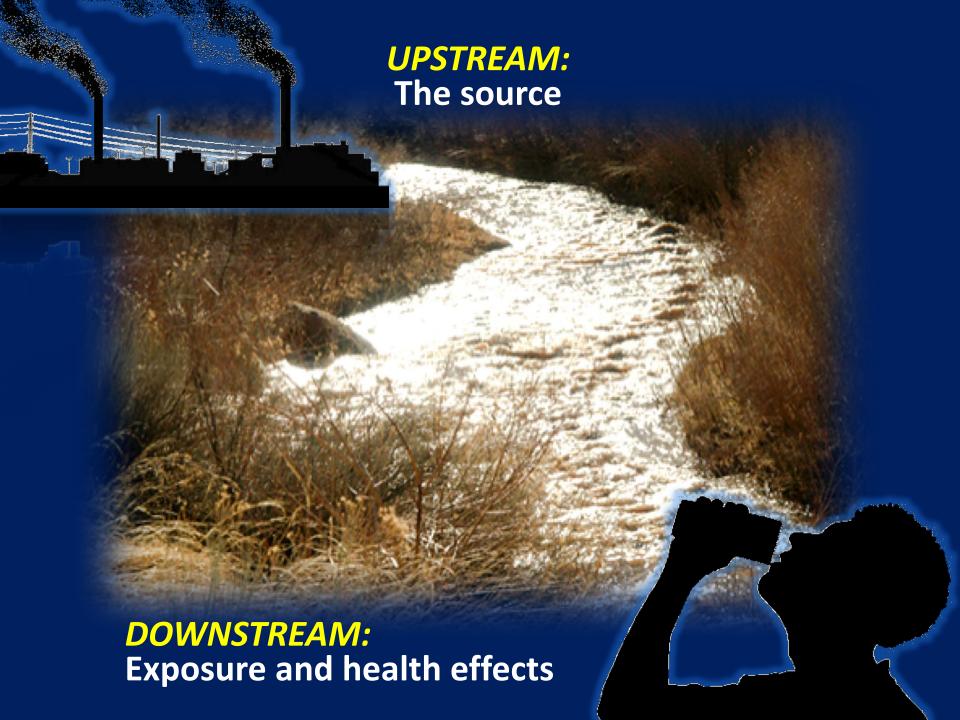


Racial/ethnic differences do not explain adult health differences by education

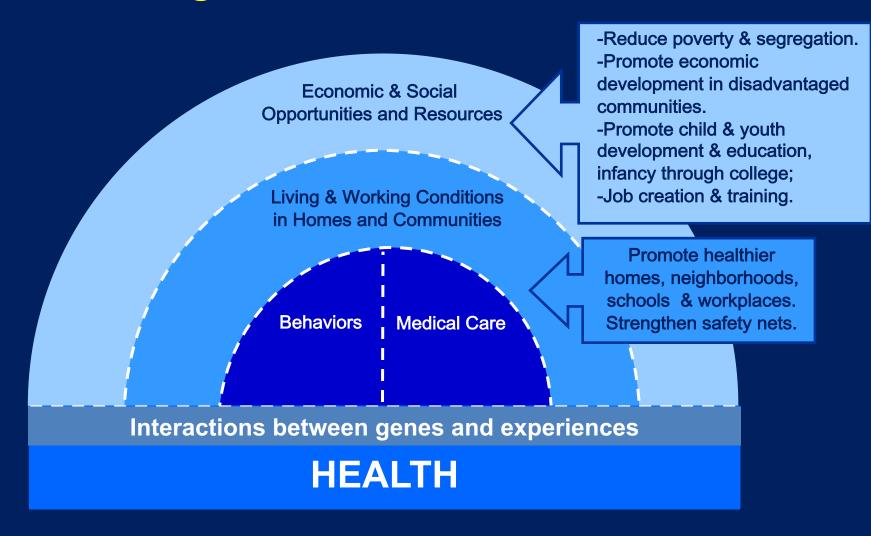


Both race and income matter





Reducing health inequality by addressing "the causes of the causes"



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