South Carolina Department of Alcohol and Other Drug Abuse Services

Health Disparities

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Outline

- Define Health Disparity

- Examples

- ECHO Grant

- Data Trends

- Breakout Session

Disparity

The lack of similarity or equality; the condition of being unequal

What is a Health Disparity?

• Differences in health outcomes that are closely linked with social, economic, and environmental disadvantage – often driven by the social conditions in which individuals live, learn, and work

• Disparities may be due to factors such as:
  • Poverty
  • Environmental threats
  • Inadequate access to health care
  • Individual and behavioral factors
  • Educational inequalities
  • Combination of any of the above or other

Source: CDC / WHO

It's been said:

"Of all the forms of inequality, injustice in healthcare is the most shocking and inhumane"
        - Rev. Dr. Martin Luther King

"Our inequality materializes our upper class, vulgarizes our middle class, brutalizes our lower class."
        - Matthew Arnold, English Essayist in the 1800's

Video

What is a health disparity/inequality? - NIHOD
Link: https://www.youtube.com/watch?v=roAQHn5rEoQ

Example of a health disparity-Michelle's Story
Link: https://www.youtube.com/watch?v=vlVZKZNXYBA

Figure 1

Social Determinants of Health

| Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	
Medical bills	Playgrounds	Higher education		Stress	Quality of care
Support	Walkability				
	Zip code / geography				

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

Example of Health Disparity
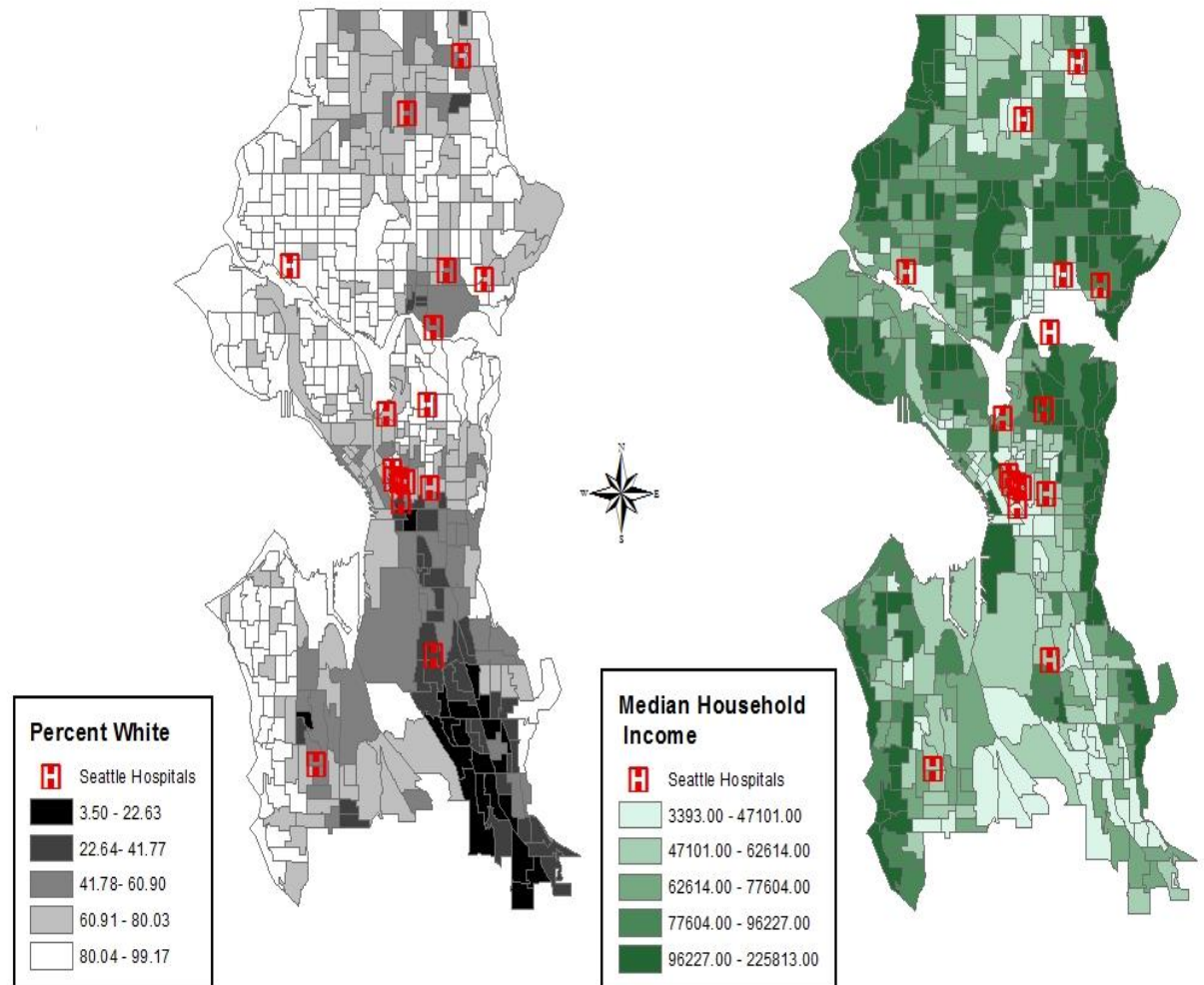

Chronic Disease Death Rates by Race and Ethnicity
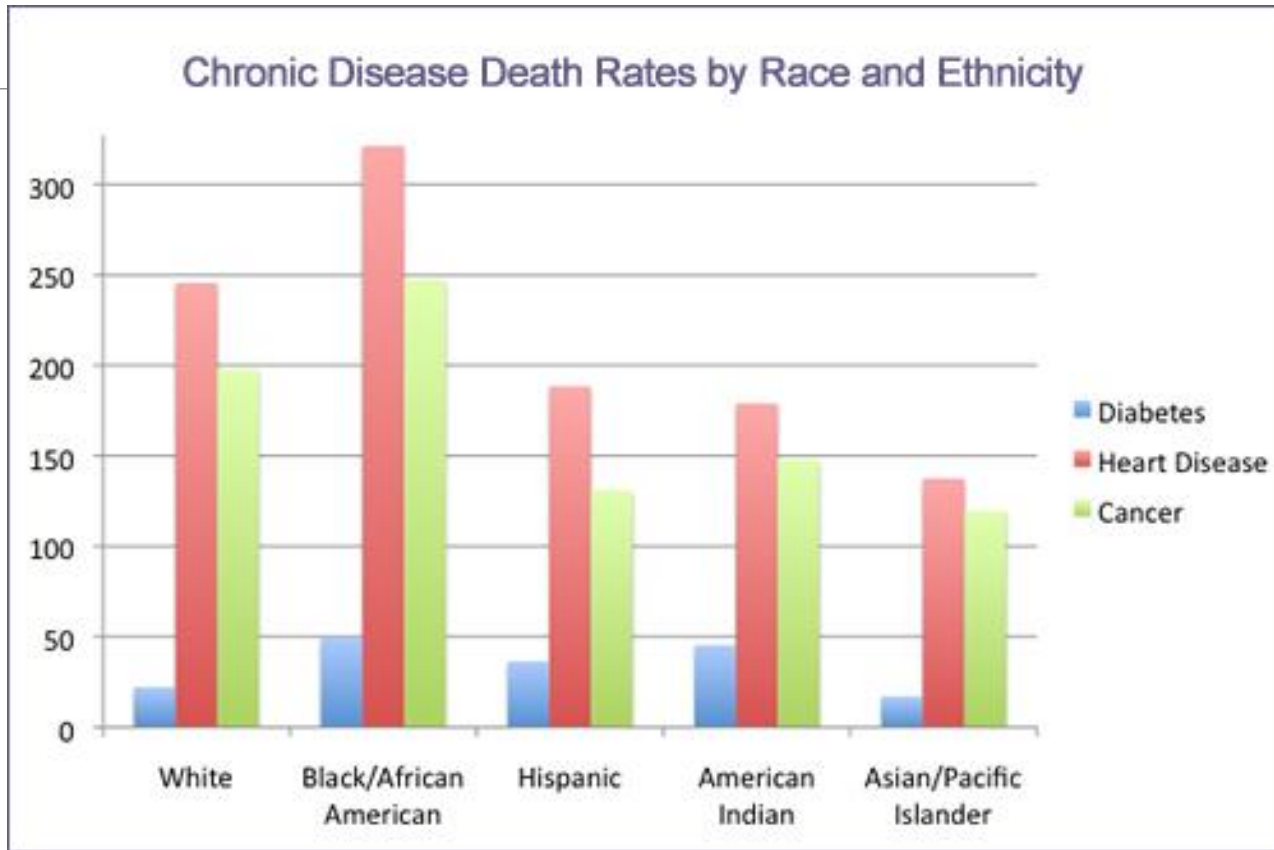
• There are health disparities for health outcomes such as chronic diseases (diabetes, heart disease and cancer) among different racial or ethnic groups based on a combination of the factors mentioned on the previous slides

Infographic Example of Health Disparities
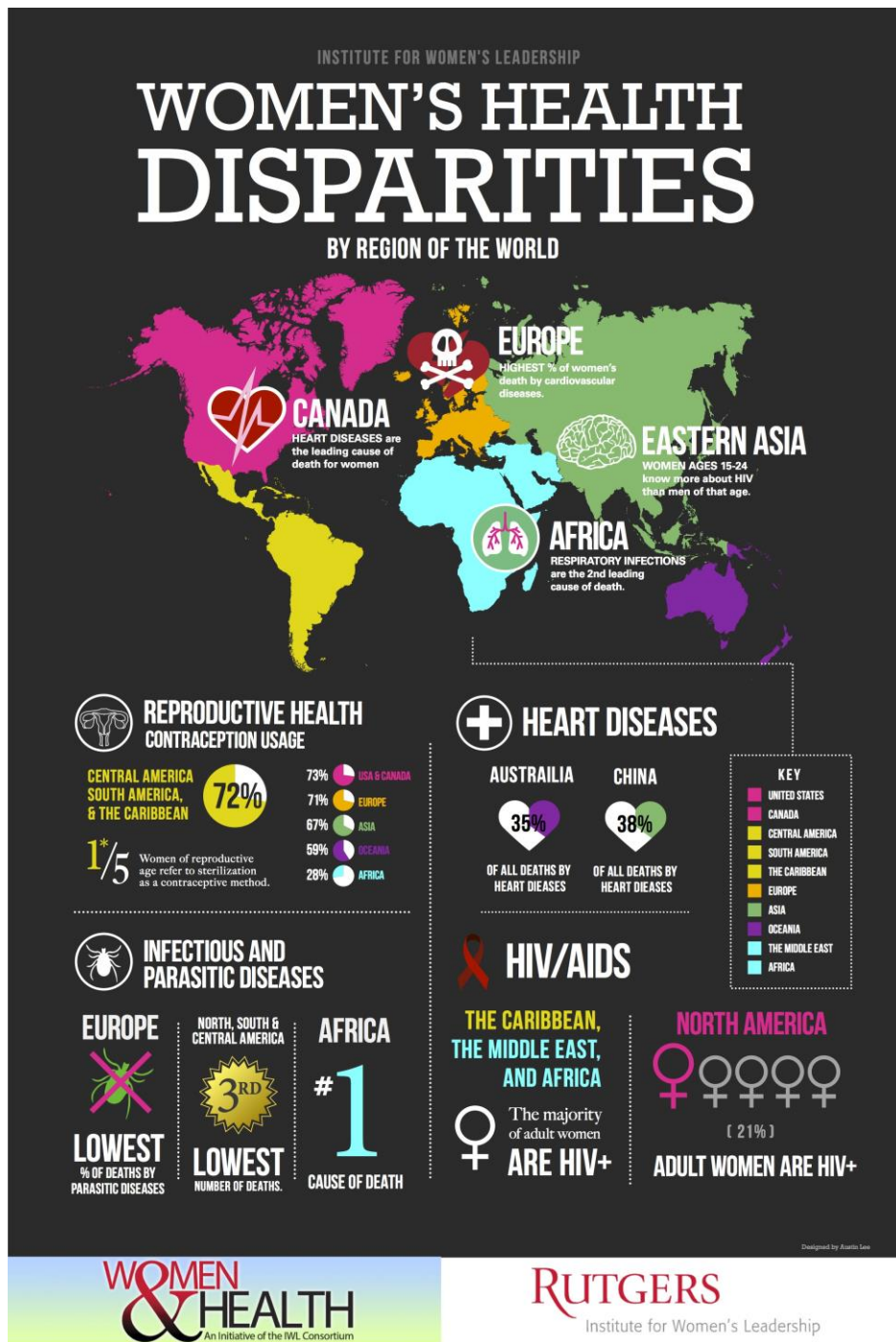
Infographic Example of Health Disparities

Comparing Race and SES with Location of Major Seattle Hospitals

Percent White

- H Seattle Hospitals
- 3.50 - 22.63
- 22.64 - 41.77
- 41.78 - 60.90
- 60.91 - 80.03
- 80.04 - 99.17

Median Household Income

- H Seattle Hospitals
- 3393.00 - 47101.00
- 47101.00 - 62614.00
- 62614.00 - 77604.00
- 77604.00 - 96227.00
- 96227.00 - 225813.00

Cartography by Brooke Byun, University of Washington, 2016

ECHO Disparity Statement Breakdown

- South Carolina is addressing the misuse of prescription drugs among those ages 12-25 and impaired driving through the Partnership for Success Grant (PFS).

- These priorities were selected based on the analysis after the data workgroup reviewed data related to alcohol and other drug misuse among all age groups.
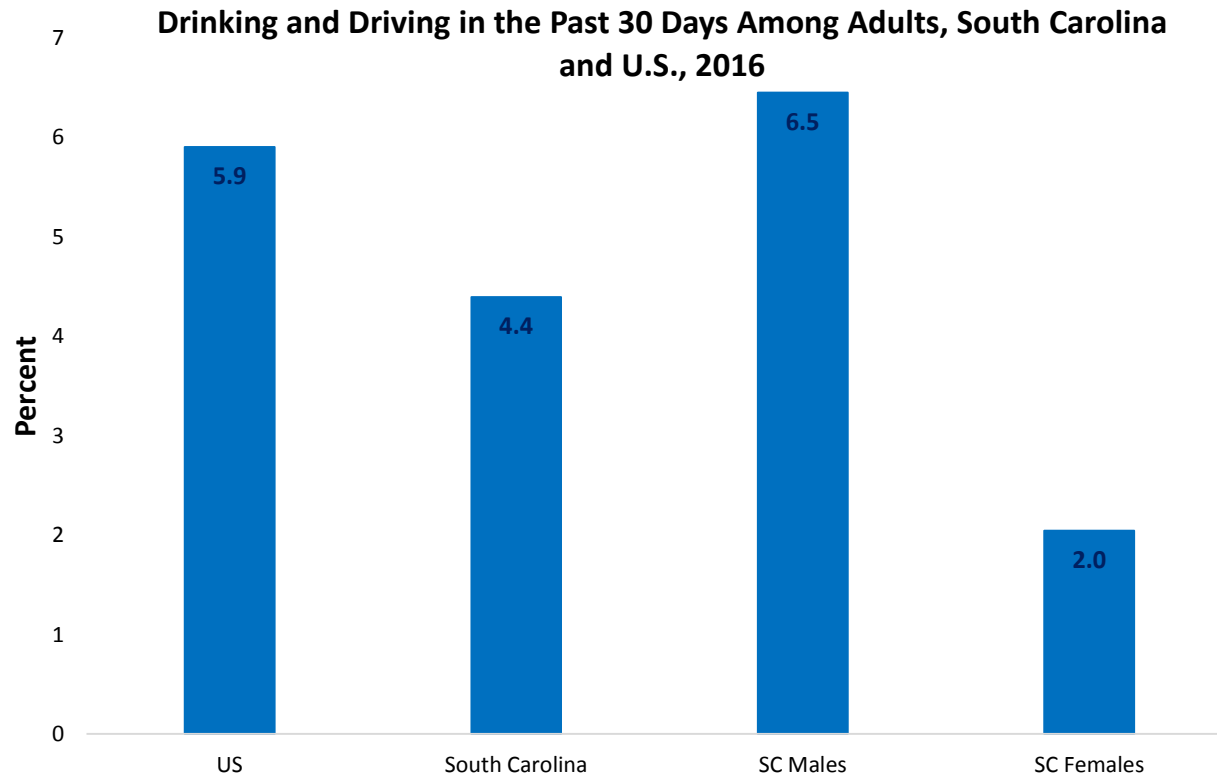
Target Geographic Areas

- Disparities statement focused on 10 target counties:

  - Top 5 counties for prescription opioid drug use (alphabetic order)
    - Berkeley
    - Darlington
    - Dorchester
    - Greenville
    - Horry

  - Top 5 counties for impaired driving (alphabetic order)
    - Barnwell
    - Chester
    - Jasper
    - Orangeburg
    - Marlboro

Target Populations

- Prescription Drug Misuse:

    - Men were found to have a higher rate of current illicit drug use (12.5%) than women (7.9%). [CBHSQ]
    - The highest rates of illicit drug use among those aged 12 years and older was reported by those persons reporting two or more races (17.2%), followed by American Indians or Alaska Natives (14.2%), and African-Americans or Blacks (12.5%). [CBHSQ]

- Impaired Driving:

    - In SC, adult males had over 3 times the rate of drinking and driving over the past 30 days at 6.5% compared to adult females, 2.0%, in 2016. [BRFSS]
    - Caucasians or Whites reported a higher likelihood of current alcohol use (57.0%) compared to all other races/ethnicities. [CBHSQ]

Data Trends in Substance Use

South Carolina Department of Alcohol and Other Drug Abuse Services

Drinking and Driving among adults (18+)

Drinking and Driving in the Past 30 Days Among Adults, South Carolina and U.S., 2016

- US: 5.9
- South Carolina: 4.4
- SC Males: 6.5
- SC Females: 2.0

Percent

Source: Behavioral Risk Factor Surveillance System

Increases in Impaired Driving

• DUI crashes among individuals under 21 years old steadily decreased since 2014, but DUI crashes among individuals 21 years and older has increased.

• At the county level:

    • Increased in 4 counties (Chester, Jasper, Marlboro and Orangeburg)
        • Orangeburg had the highest number of crashes
        • Chester had the largest increase from 2014 to 2016 (+54%)

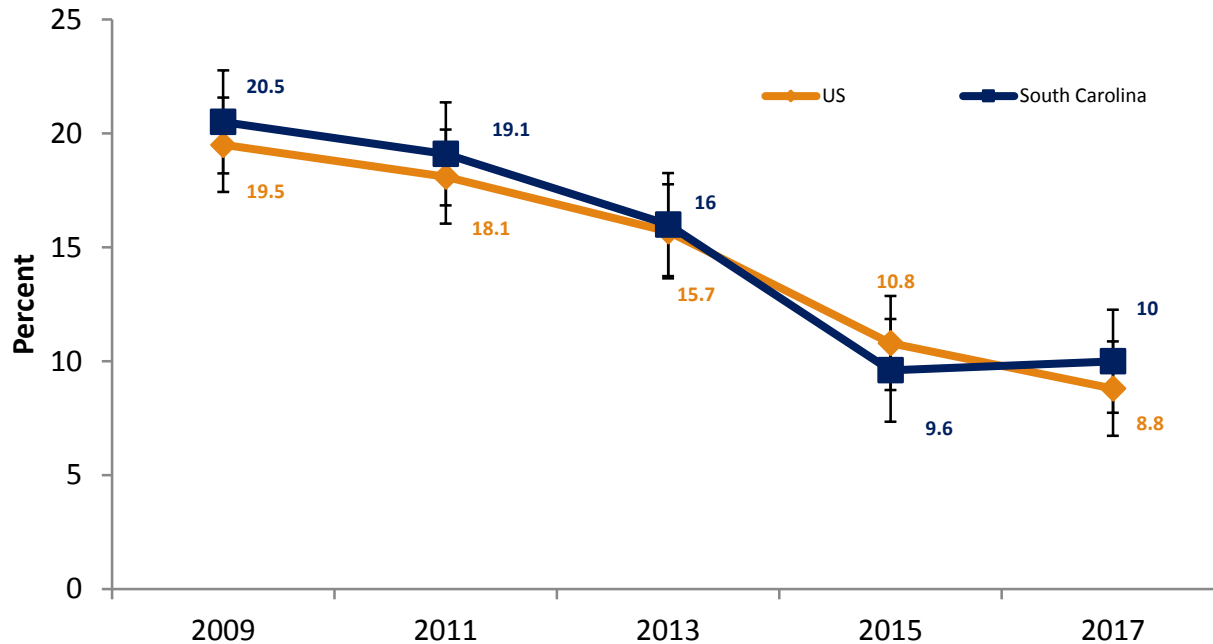   • Decreased in Barnwell

DAODAS Alcohol Burden Map
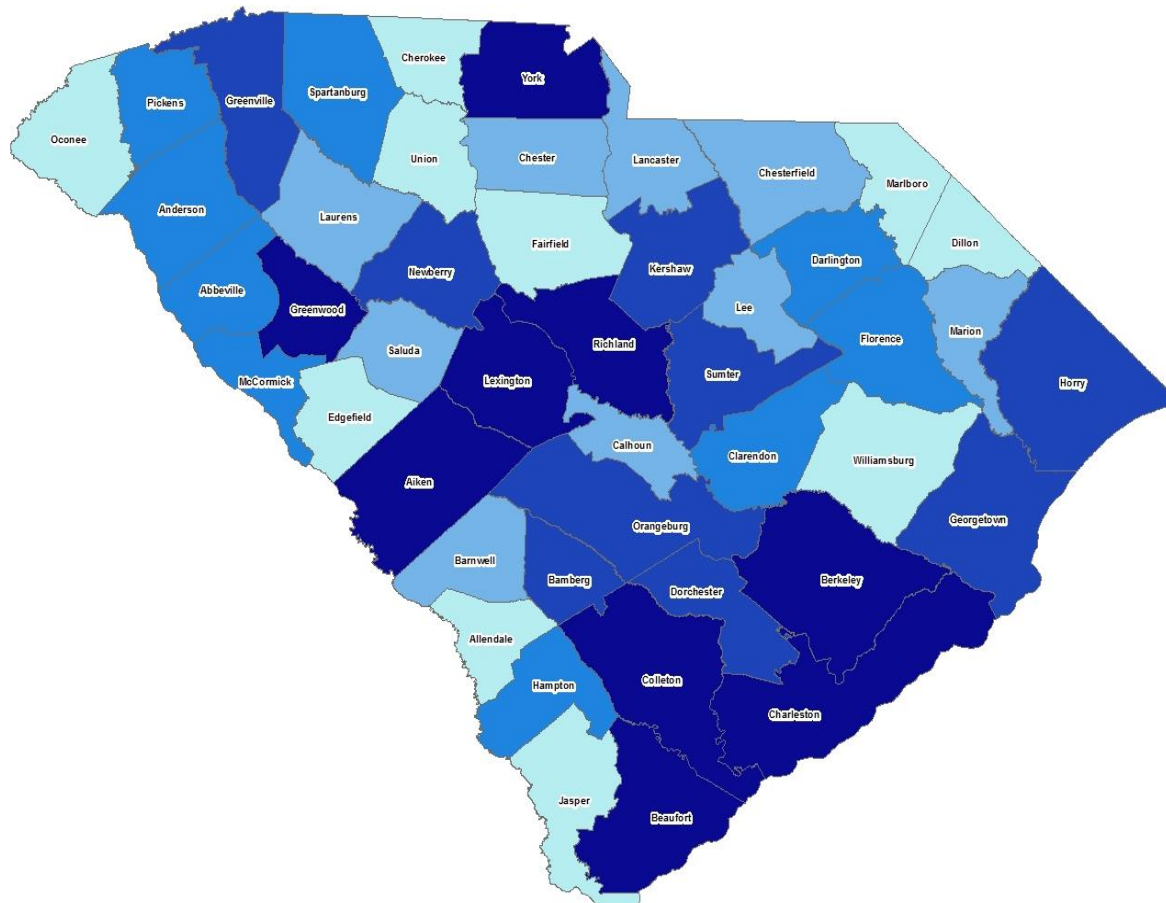
Variables included:

- Alcohol-related hospitalizations

- Heavy use of alcohol among adults

- Binge Drinking among Adults
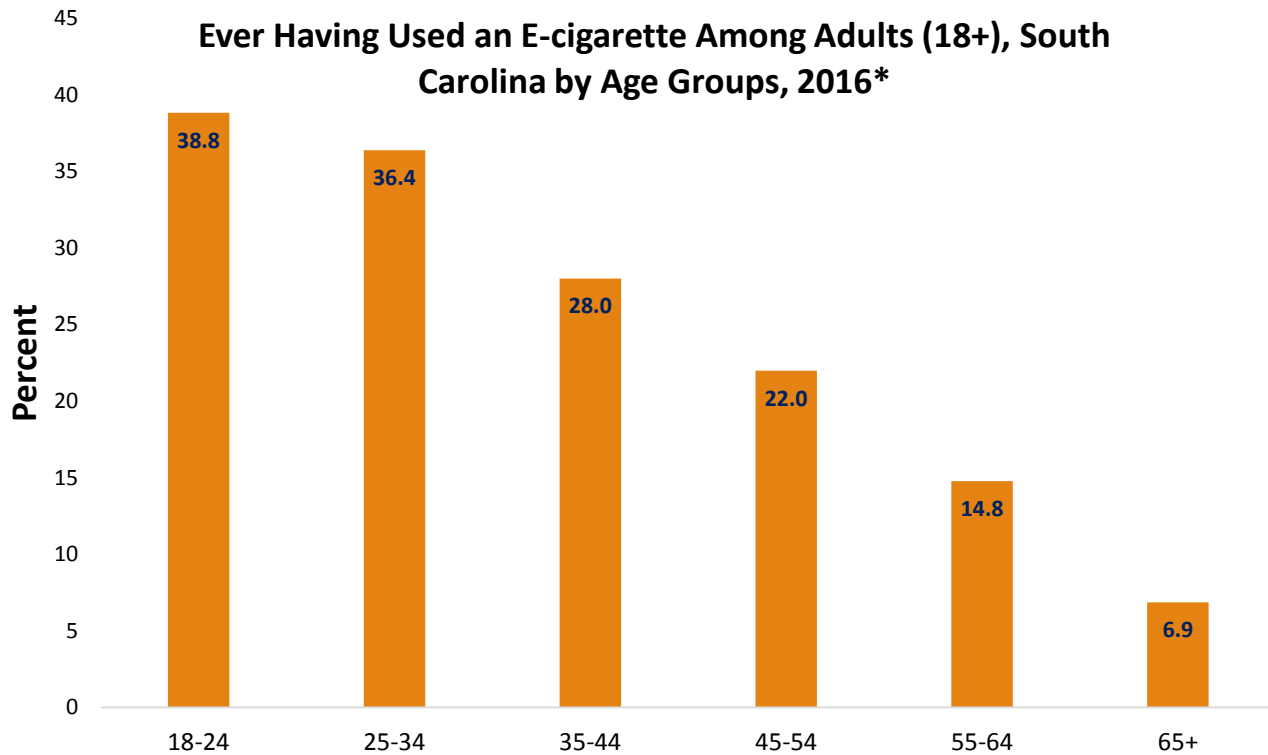
- Alcohol-involved fatal traffic crashes

Smoking among Youth

Past 30-Day Cigarette Use Among High School Students, South Carolina and U.S., 2009-2017

Source: Youth Risk Behavior Surveillance System

E-cigarette Smoking

Ever Having Used an E-cigarette Among Adults (18+), South Carolina by Age Groups, 2016*

Age Group	Percent
18-24	38.8
25-34	36.4
35-44	28.0
45-54	22.0
55-64	14.8
65+	6.9

Source: Behavioral Risk Factor Surveillance System

*note: First year question asked in survey

Break-out Time!

You will take a few minutes to examine the 2018 county profile for your specific county

Goal: Data-informed discussion to identify certain health disparities evident in your county (along with potential health disparities evident through your experience working in that county)

Final Thoughts

- Disparities will affect the disenfranchised regardless of the focused outcome-economic, health or social

- A goal of the public health professional is to find methods to decrease the health disparities gap between and within groups of people

- Ways to eliminate health disparities as per the Surgeon General:

  - Ensure a strategic focus on communities at greatest risk.
  - Reduce disparities in access to quality health care.
  - Increase the capacity of the prevention workforce to identify and address disparities.
  - Support research to identify effective strategies to eliminate health disparities.
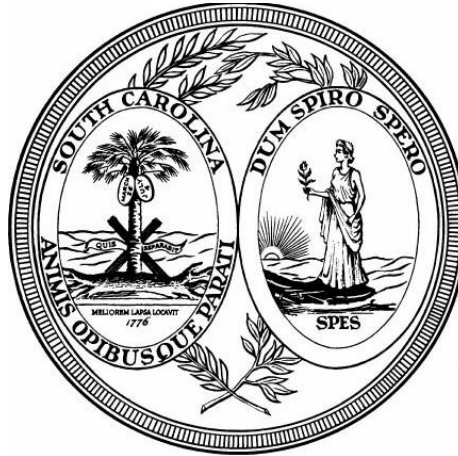 - Standardize and collect data to better identify and address disparities.

Thank you! Questions?

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