

# Health Equity and Maternal Mortality

**Jewel Mullen, MD, MPH, MPA**

Associate Dean for Health Equity

Associate Professor of Population Health and Internal Medicine

University of Texas at Austin Dell Medical School

NCSL Maternal & Child Health Fellows Meeting

September 9, 2020

# Healthy People 2020 Health Disparities Definition

“...a particular type of **health difference that is closely linked with social, economic, and/or environmental disadvantage**. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

<https://www.healthypeople.gov/>

# Health Equity

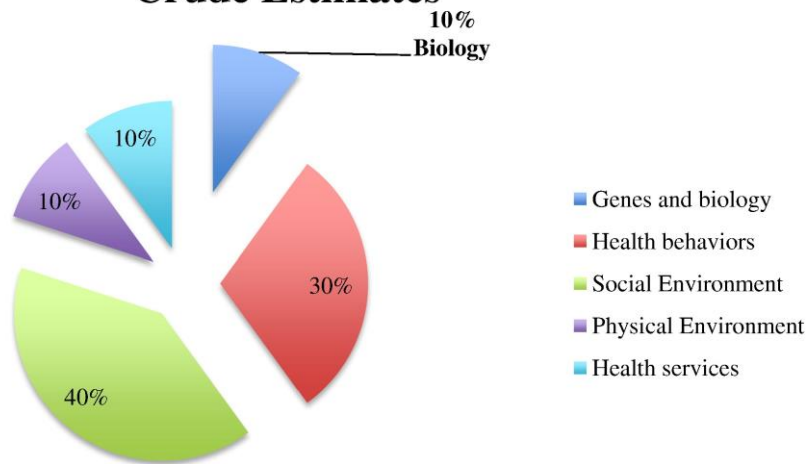
Health equity means that **everyone has a fair and just opportunity to be as healthy as possible**. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

*Goal: reducing and ultimately eliminating disparities in health and its determinants that adversely affect excluded or marginalized groups*

What Is Health Equity? And What Difference Does a Definition Make? RWJF, 2017

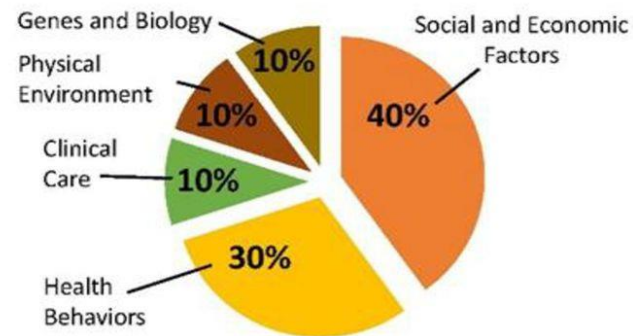
# What Determines Health?

## Determinants of Population Health: Crude Estimates

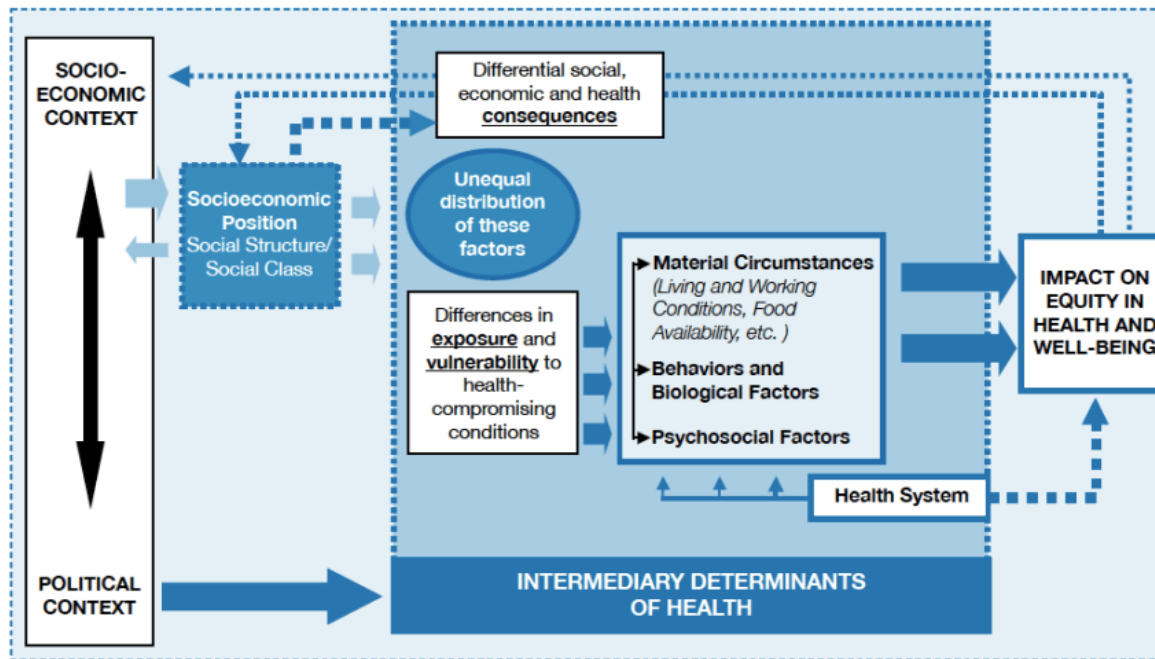


Tarlov AR. AnnNY Acad Sci 1999; 896: 281-93

## What factors determine our health?



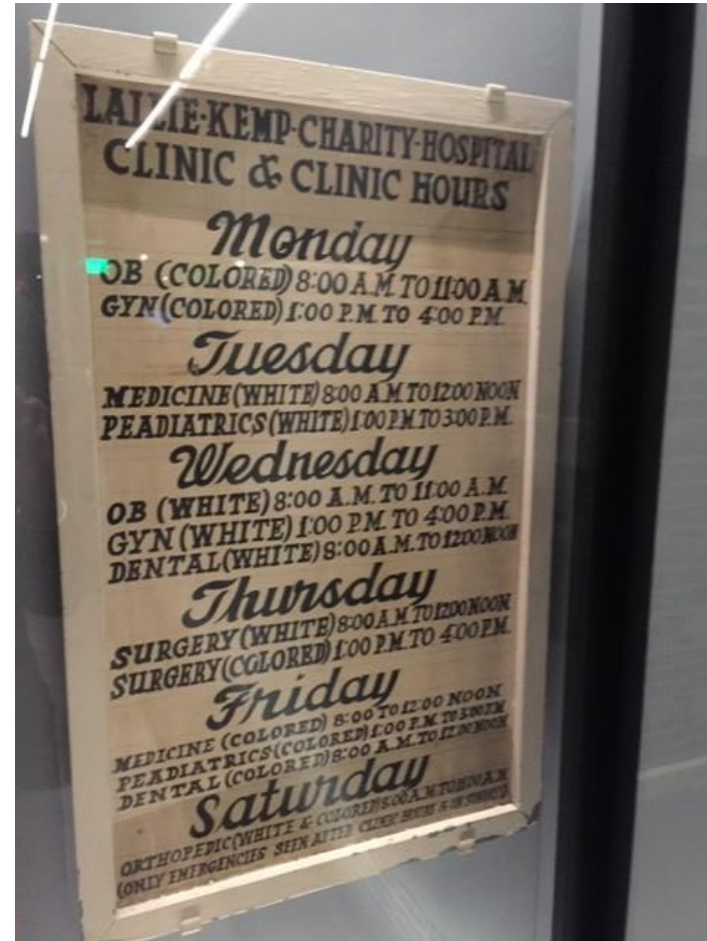
# Social Determinants Impact Health



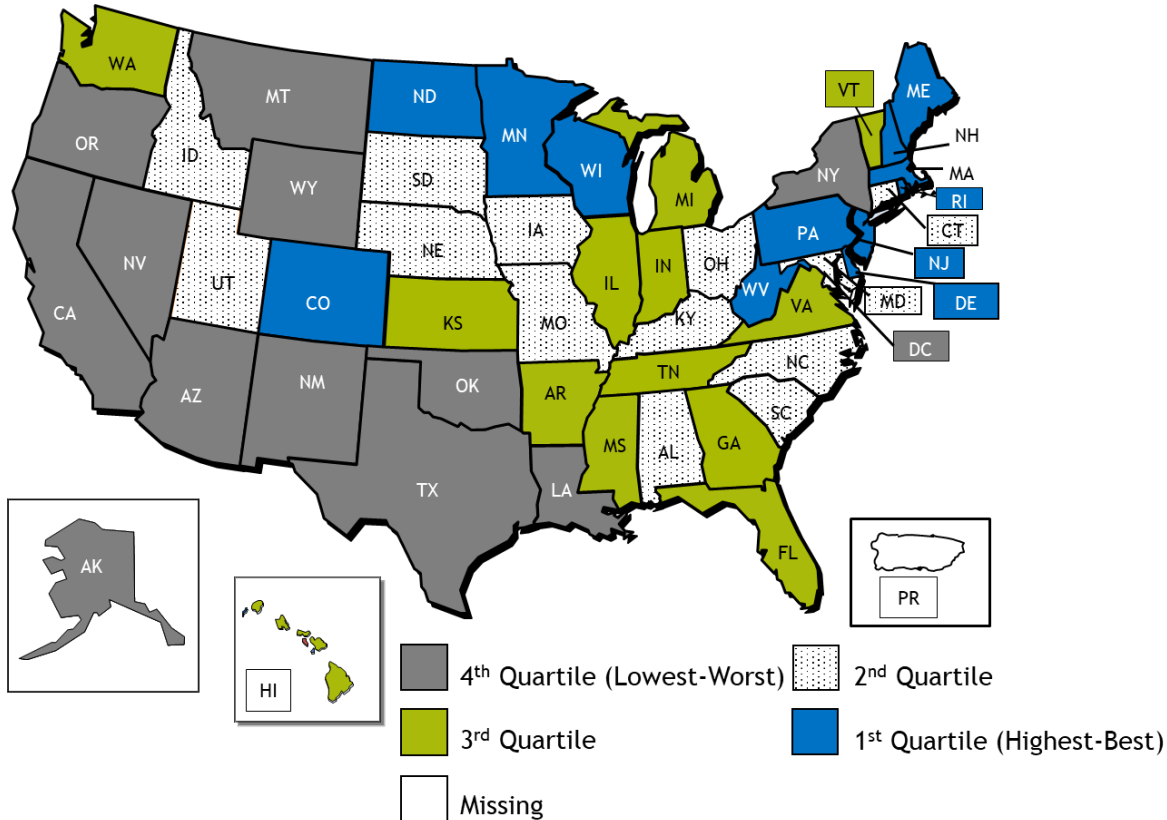
# Health Disparities

Avoidable, systematic  
health differences  
adversely affecting  
economically or socially  
disadvantaged groups

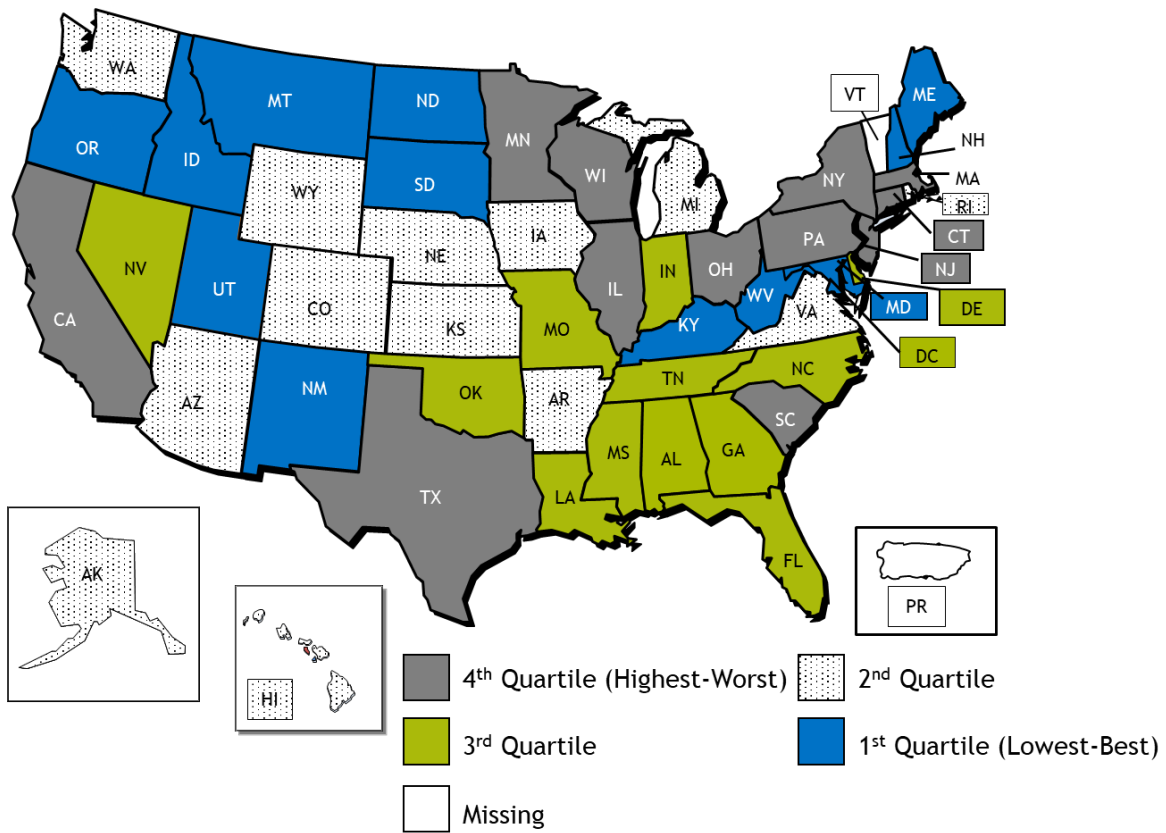
What Is Health Equity? And What Difference Does a  
Definition Make? RWJF, 2017



# Quality of Care Across U.S. 2015-2017



# Racial/Ethnic Disparities in Quality 2015-2017



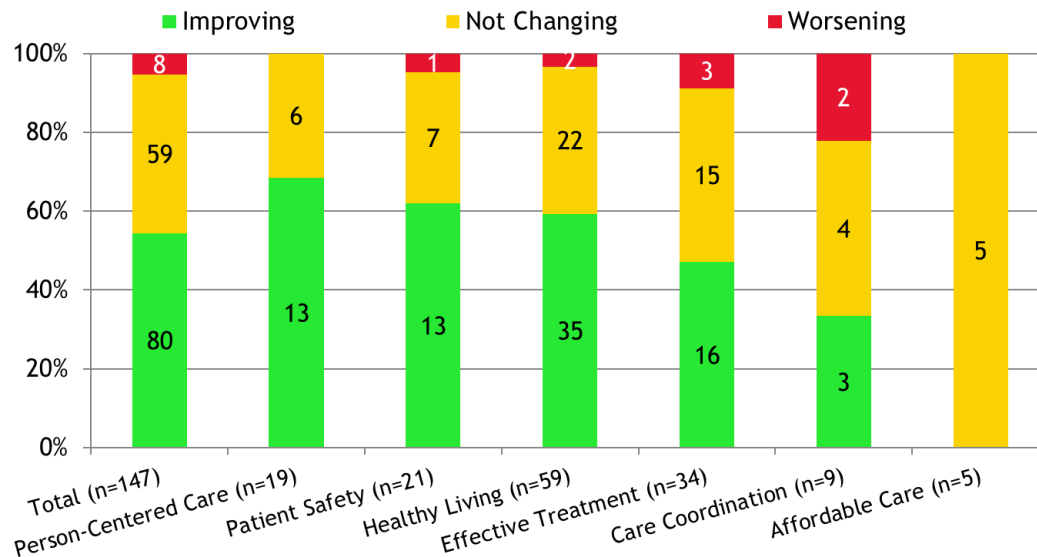


# Trends: Disparities in Healthcare Quality 2000-2017

## TRENDS IN QUALITY

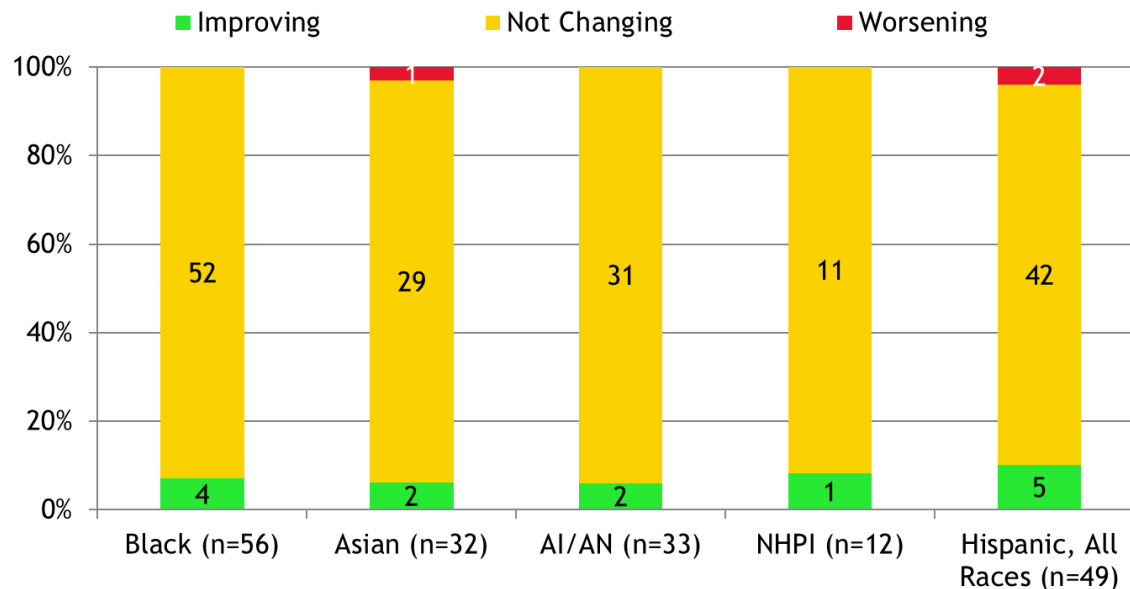
Quality of healthcare improved generally through 2017, but the pace of improvement varied by priority area.

Figure 33. Number and percentage of all quality measures that were improving, not changing, or worsening, total and by priority area, from 2000 through 2017



# Changes in Quality Measures by Race and Ethnicity

**Figure 58. Number and percentage of quality measures with disparity at baseline for which disparities related to race and ethnicity were improving, not changing, or worsening, 2000 through 2013, 2014, 2015, 2016, or 2017**



# The Opportunity

How effectively talking about and addressing maternal mortality can strengthen our ability to collectively advance health equity...

# Framing Questions

How do the risk factors for maternal mortality compare to those for low birth weight and infant mortality?

How do we solve them?

# Adelaide Statement on Health in All Policies

- Engages leaders and policy-makers at all levels of government—local, regional, national and international.
- Government objectives are best achieved when all sectors include health and well-being as a key component of policy development.
- The causes of health and well-being lie outside the health sector and are socially and economically formed.
- Outlines the need for a new social contract between all sectors to advance human development, sustainability and equity, as well as to improve health outcomes.
- This requires a new form of governance where there is joined-up leadership within governments, across all sectors and between levels of government.
- Highlights the contribution of the health sector in resolving complex problems across government.

[http://whqlibdoc.who.int/publications/2010/9789241599726\\_eng.pdf](http://whqlibdoc.who.int/publications/2010/9789241599726_eng.pdf)

# The Departments, Gold Dome, Ivory Towers and Community



# Health in All Policies (HiAP) Considerations for Governmental, Health and Academic Institutions

- Possible shared research / policy agenda
- Leadership and followership
- Evaluation
- Outcomes
- Community Health Improvement
- Accountable Health Communities
- Community perspective and engagement\*

# Health Equity in All Policies

Don't single out "personal factors" as an approach to health disparities (*maternal mortality*) without thinking about what happened to the person (history, systems and structures).



# Empathy and an Equity Agenda

“The belief that we are good people does not prevent any of us from having a moment when social differences arise and complicate our interpersonal encounters. It is hard for us to manage social differences in a public context because we run the risk of offending someone else or being offended. Because of this we avoid sharing what we think about social differences and social inequality...”