APSHO AP Academy
Defining Health Disparities and Inequities in Oncology/Hematology

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Disclosures

• Cissimol Joseph has no relevant financial relationships to disclose
Learning Objectives

- Define health disparity and health inequity and describe contributing factors to these issues
- Define and illustrate social determinants of health
- List examples of health disparities in oncology/hematology
Outline

• Healthcare Disparities Landscape
• Defining Healthcare Disparities
• Disparities: Root Causes
• Equity vs Equality
• Social Determinants of Health
• Implications for Advanced Practitioner (AP) practice
Healthcare Disparities

• Not a new topic!
• Documented for decades
• Addressing healthcare disparities is the key to improving the nation’s overall health and reduce unnecessary healthcare costs
Healthcare Disparities

- Healthy People 2030 definition:
  - “A particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage”
    - Disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial and ethnic group, religion, social economic status, gender, age, mental health, cognitive, sensory or physical disability, sexual orientation, gender identity, geographic location, or other characteristics historically linked to discrimination or exclusion.

- CDC definition:
  - “Preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations”

Healthcare Disparities

- People of color fared worse compared to their White counterparts across a range of health measures, including infant mortality, pregnancy-related deaths, prevalence of chronic conditions, and overall physical and mental health status.
- As of 2018, life expectancy among Black people was four years lower than White people, with the lowest expectancy among Black men.
- Low-income people report worse health status than higher income individuals.
- Lesbian, gay, bisexual, and transgender (LGBT) individuals experience certain health challenges at increased rates.

Kaiser Family Foundation website. Key Data on Health and Health Care by Race and Ethnicity.
Cancer Disparities: Root Causes and Impact on Health Outcomes

National Cancer Institute website. What Is Health Disparities Research?
National Life Expectancy by Birth Year and Racial/Ethnic Group, 2000–2019

- Solid lines indicate the mean estimates
- Shaded areas indicate 95% uncertainty interval

What Is Health Equity?

• Healthy People 2020 definition:
  • The attainment of the highest level of health for all people

• CDC definition:
  • Health equity is achieved when every person has the opportunity to attain his or her full health potential and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances.
  • “Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities”

Health Disparities and Health Equity

Cancer Health Disparities

• Certain population groups in the United States have a disproportionate burden of cancer compared with other groups
  • Due to social, environmental, and economic disadvantages
  • Often related to:
    • Race
    • Gender
    • Ethnicity
    • Age
    • Behaviors

• Certain populations suffer more from cancer and its effects
  • What groups are more likely to get a certain type of cancer?
  • What group is less likely to survive a certain (or any) cancer?

How Many People Are Diagnosed With Cancer by Sex and Race/Ethnicity?

<table>
<thead>
<tr>
<th>Male</th>
<th>Female</th>
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<tbody>
<tr>
<td><strong>478</strong></td>
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<td><strong>509</strong></td>
<td><strong>444</strong></td>
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</tbody>
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SEER 22 2016–2020, Age-Adjusted Rate per 100,000

# How Many People Die of Cancer by Sex and Race/Ethnicity?

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Male</th>
<th>Female</th>
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</thead>
<tbody>
<tr>
<td>All Races</td>
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<td>129</td>
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<tr>
<td>Hispanic</td>
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<td>93</td>
</tr>
<tr>
<td>NH American Indian/Alaska Native</td>
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<td>136</td>
</tr>
<tr>
<td>NH Asian &amp; Pacific Islander</td>
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<td>83</td>
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<tr>
<td>NH Black</td>
<td>216</td>
<td>149</td>
</tr>
<tr>
<td>NH White</td>
<td>183</td>
<td>133</td>
</tr>
</tbody>
</table>

U.S. Mortality 2016–2020, Age-Adjusted Rate per 100,000

New Cancer Cases: Gender/Race/Ethnicity/Cancer Site

- For all cancers combined
  - Men
    - Non-Hispanic Black men have the highest rate of new cancer diagnoses.
    - The most common cancers in men are prostate, lung and bronchus, and colorectal.
  - Women
    - Non-Hispanic White women have the highest rate of new cancer diagnoses.
    - The most common cancers in women are breast, lung and bronchus, and colorectal.

Impact of Cancer: Race/Ethnicity

• Higher incidence of triple-negative breast cancer among African American women
• Substantially higher rates of prostate cancer incidence and death among African American men
• Higher rates of kidney cancer among American Indian and Alaska Natives
• Higher rates of liver cancer among Asian and Pacific Islanders
• Higher rates of cervical cancer incidence and death among Hispanic and African American women than women of other racial/ethnic groups

• Many of the same population groups that experience cancer health disparities are also significantly underrepresented in cancer clinical trials

National Cancer Institute website. Cancer Disparities.
Disparities Along the Cancer Care Continuum

- Disparities in cancer screening
- Disparities in clinical trial enrollment
- Disparities in access to care
- Disparities in timely care
- Survivorship
Which US Population Groups Experience Cancer Health Disparities?

- Individuals belonging to different ancestry, race, or ethnicity
- Individuals of low socioeconomic status
- Individuals who lack or have limited health insurance coverage
- Residents in certain US geographic locations, such as rural areas, or territories, such as Puerto Rico and Guam
- Members of the sexual and gender minority communities
- Certain immigrant, refugees, or asylum seekers
- Individuals with disabilities
- Adolescents and young adults
- Elderly (age 65+)
- People who simultaneously fall into more than one of these categories have an even higher burden of cancer

Social Determinants of Health (SDOH)

- **Definition:** The conditions in the environment in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality of life outcomes and risks.

- Differences in SDOH contribute to the stark and persistent chronic disease disparities in the United States among racial, ethnic, and socioeconomic groups, which, in turn, limits opportunities for some groups to be healthy.

Five Social Determinants of Health

- Neighborhood and built environment
- Education access and quality
- Healthcare access and quality
- Social and community context
- Economic stability

Intersection Between Health Disparities and SDOH

Health Disparities are Driven by Social and Economic Inequities

Implications for the AP

• Take specific actions that address the SDOH
  • Adopt a more holistic approach, address complex health and social needs, social history questions, social challenges, social diagnosis, social prescription, etc
  • Confront institutional racism within the organization
  • Assess institutional policies with an equity lens; diversity, equity, and inclusion training; reporting initiatives to track and respond to racist or other discriminatory behavior; and listening to and learning from patients and healthcare professionals of color
  • Partner with community organizations
  • Maintain directory of community resources, patient advocacy groups, referral to social work, etc

Implications for the AP (cont)

• Develop patient educational materials that are culturally and linguistically relevant to a diverse population
  • For example, develop culturally appropriate health education materials, use interpreters, etc

• Lobby and advocate for policy changes that will improve the neighborhood and built environment

• Leaders:
  • Make health equity a leader-driven priority
  • Develop structures and processes that support equity
  • Hire a diverse workforce that is equipped to assess and address the healthcare needs of a diverse population

Thank you!

You may now proceed to the post test.
Pre/Post Test Questions

1. Which of the following does not refer to healthcare disparity?
   A. A particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage
   B. A preventable difference in the burden of disease, injury, and violence
   C. Higher rate of morbidity in elderly compared with young adults

2. True or false: Cancer mortality across all cancer types is similar for all races and ethnicities.
   A. True
   B. False

3. Social determinants of health (SDOH) are the nonmedical factors affecting the health outcomes. Which of the following is not an example?
   A. Poverty
   B. Equal access to healthcare
   C. Lack of education
   D. Good neighborhood