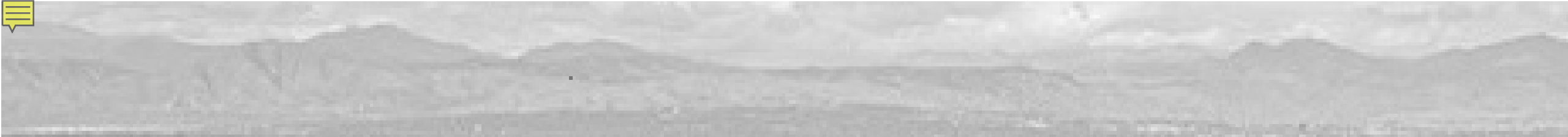


University of Denver Health and Counseling Center  
Department of Health Promotion

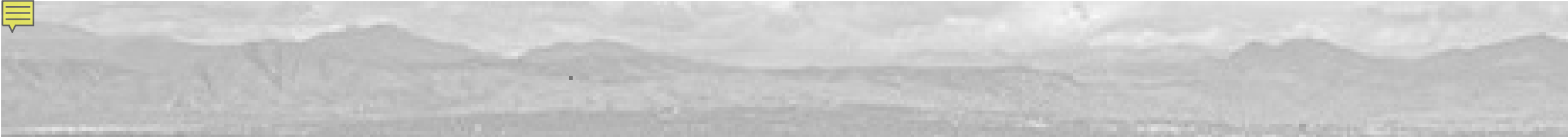
# Curing Health of Unconscious Biases

*The Intersection of Race, Gender, Class, and Health Outcomes*



“The social conditions in which people are born, live and work are the single most important determinants of good health or ill health, of a long and productive life, or a short and miserable one.”

- World Health Organization, Commission on the Social Determinants of Health

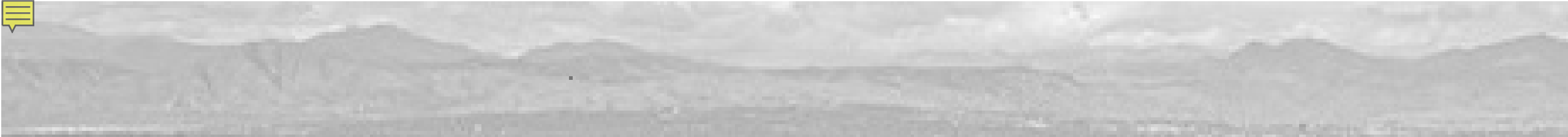


## How do health disparities arise?

- Differences in the quality of care received within health care systems
- Differences in access to health care, including preventive and curative services
- Differences in life opportunities, exposures, and stresses that result in differences in underlying health status

## Class Oppression and Health

- Well-organized, networked interests are able to make decisions about what to do with society's resources
  - These decisions are often made without public input
  - These decisions may generate social and economic disparities
- Residents in communities with higher rates of crime, poor quality schools, longer emergency response times, decreased access to nutritious foods, and multiple stressors often have higher blood pressure and other chronic conditions



## Racism and Health

- Racism creates deprivations and stresses that impact life opportunities and quality of life
- Death rates within minority populations are significantly higher than death rates within the non-minority population



## Gender Inequity and Health

- Gender inequity plays a significant role in wage discrimination, division of labor, unpaid sick leave, restrictive marriage laws, discriminatory hiring and firing decisions, and sexual harassment.
- These injustices create stresses and an accumulation of disadvantage that can lead to mental and physical health problems.

Example

## Alcohol Use in the Latinx Community

- “Hispanics less likely to drink than Whites”  
*Denver Drug Strategy found in 2015 that 26% of admissions for alcohol-related treatment were “Hispanic”*
- More likely to not drink, but if they do it is in excess

Example

# Alcohol Use in the Latinx Community

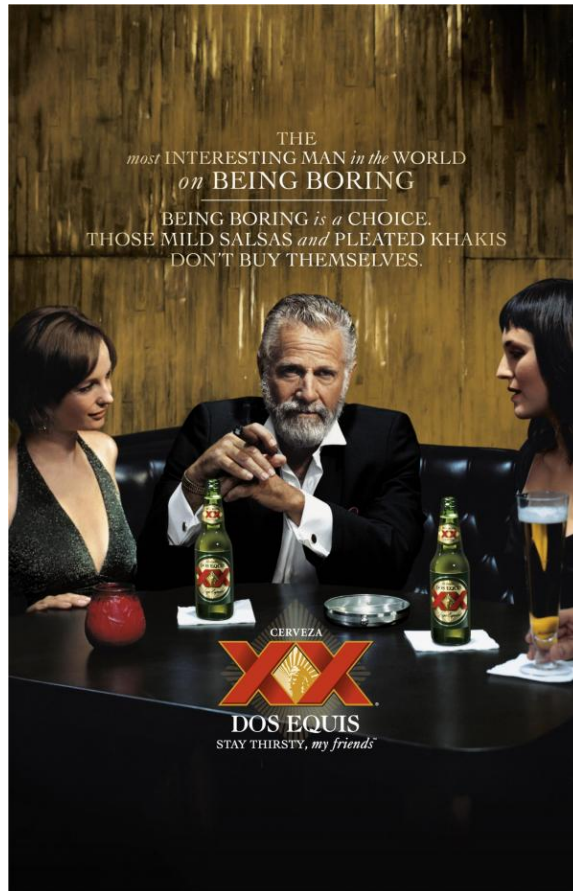
Factors that impact drinking behaviors:

- Acculturation
- Gender
  - “Machismo”: There are several definitions for machismo. For the purpose of this presentation we will be using the definition from Falicov defines it as **“Machismo can be seen as a grand narrative about Latino men’s cultural history, social experiences, and gender behavior that promotes an essentialist view of masculinity”**.
  - “Marianismo”: the term marianismo to bring attention to women’s subordinate position in Latin America and to describe the culture’s idealized belief of Latina gender role expectations.



Example

# Alcohol Use in the Latinx Community



Example

## Alcohol Use in the Latinx Community

- OMNI Institute (2010) found with “Latino” youth, “Colorado Latinas” are more likely to binge drink than males
- Colorado (and Denver, specifically) has a higher past month use (among individuals 12 years or older) than the rest of the U.S.
- Theoretically there are unique factors that exacerbate the alcohol use among Latinxs in Denver such as:
  - Latinxs more likely to live in poverty/low income
  - Gentrification
  - Food deserts

Example

## Food Affordability on Campus for Low-Income College Students

Meal Plans – Required for students who live on campus

- Unlimited Plans: \$1,513.33 to \$1,588.33 per quarter
  - Cover all meals including late night meals = as low as \$2.52/meal
- Block Plans (per quarter):
  - \$1,513.33 for 125 meals = min. \$10.51 /meal
  - \$1,442.66 for 100 meals = min. \$12.42 /meal
  - \$566.66 for 50 meals = min. \$7.23 /meal
    - Marketed as the “Commuter Block Plan”
- But, in a 10 week quarter, there are 210 meals!

Example

# Food Affordability on Campus for Low-Income College Students

What is Food Insecurity?

- Not having sufficient food;
- Experiencing hunger as a result of running out of food and not being able to afford more;
- Eating a poor-quality diet as a result of limited food options;
- Anxiety about acquiring food; or
- Having to rely on food relief.

How Does Food Insecurity Affect College Students?

- Academic Performance
- Physical Health
- Emotional Health

References

Hughes, R. et. al. (2011). Student food insecurity: The skeleton in the university closet. *Nutrition & Dietetics*, 68: 27-32.

Cancel-Tirado D.I., Lopez-Cevallos D.F., Patton-Lopez M.M., and Vazquez L. (2014). Prevalence and correlates of food insecurity among students attending a midsize rural university in Oregon. *Journal of Nutrition Education and Behavior*.



Example

# Food Affordability on Campus for Low-Income College Students

Who is affected?

- Low income students
- First generation college students, those with less “college knowledge”
- Predominantly, students of color

How are they affected?

- Reduced ability to cover financial cost of attendance
- At increased risk for negative physical and mental health outcomes, conditions & habits

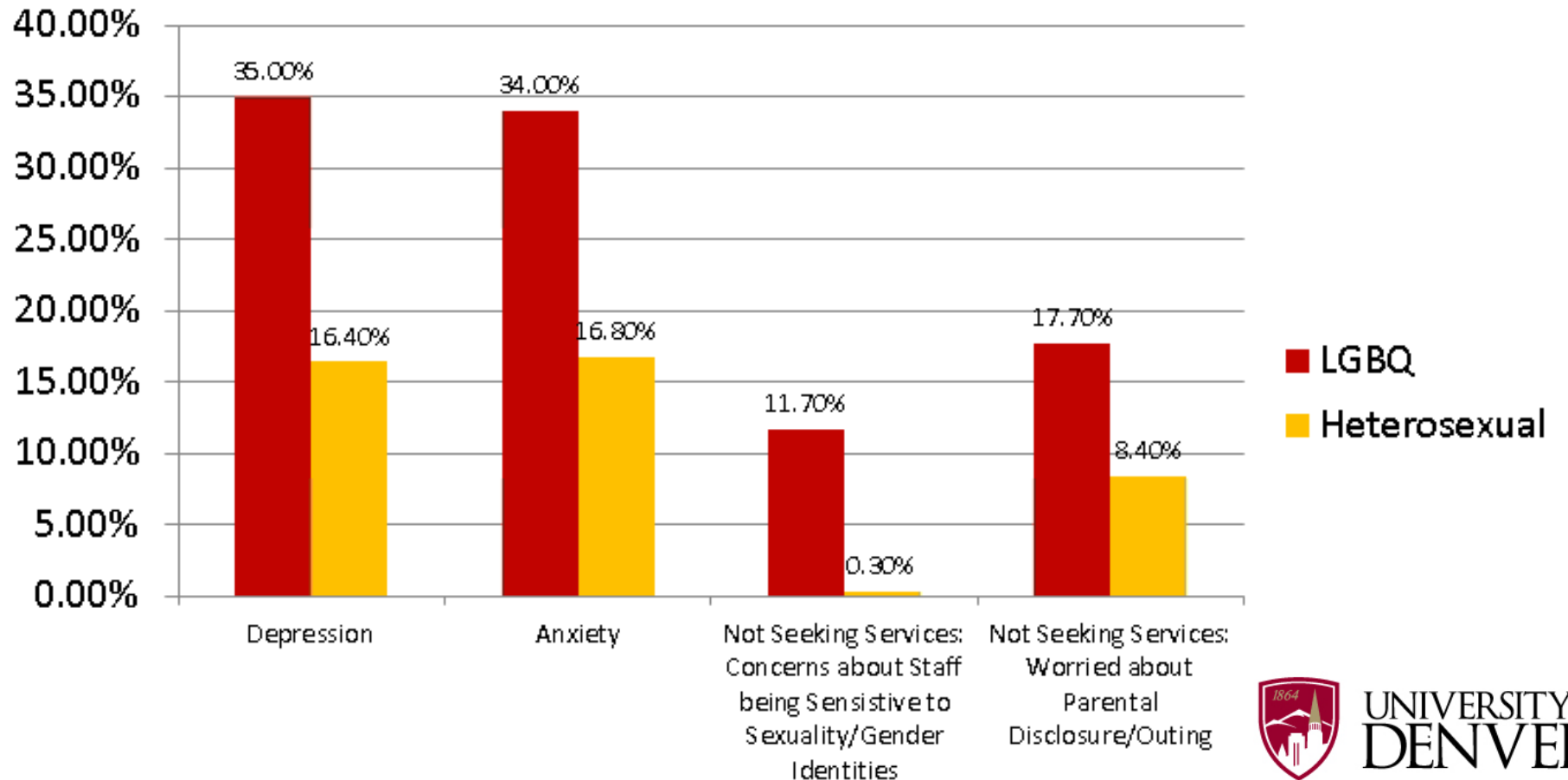
All of which, affect students’ abilities to persist and succeed in and after college

Example

# Health Disparities in the Queer Community

## Healthy Minds: Mental Health Disparities

Students who identify as lesbian, gay, bisexual, questioning, or else on the sexual orientation spectrum often struggle with discrimination and marginalization, which can have a negative impact on mental health and sense of belonging.



Example

# Health Disparities in the Queer Community

## Healthy People 2020: Overall Trends

“Understanding LGBT health starts with understanding the history of oppression and discrimination that these communities have faced. For example, in part because bars and clubs were often the only safe place where LGBT individuals could gather, alcohol abuse has been an ongoing problem.” - Office of Disease Prevention and Health Promotion

- Legal discrimination: access to health insurance, employment, housing, adoption, retirement benefits
- Lack of laws protecting against bullying in schools
- Shortage of health care providers who are knowledgeable and culturally competent in LGBT health

Example

## Health Disparities in the Queer Community

### Healthy People 2020: Various Disparities

- LGBT youth are 2 to 3 times more likely to attempt suicide
- LGBT youth are more likely to be homeless
- Gay men are at a higher risk of HIV and other STDs, esp. communities of color
- Transgender individuals have a high prevalence of HIV/STDs, victimization, mental health issues, and suicide, and are less likely to have health insurance
- LGBT populations have the highest rates of tobacco, alcohol, and other drug use

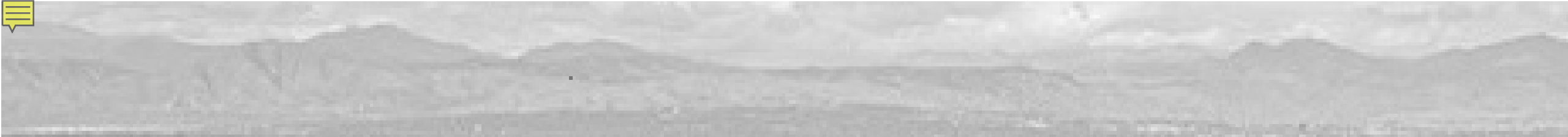


Example

## Health Disparities in the Queer Community

### Healthy People 2020: Room for Improvement

- Nationally representative data on LGBT Americans is imperative to informing future health initiatives
- Prevention of violence and homicide toward the LGB community, and esp. the transgender population
- Exploration of sexual/gender identity among youth
- Medically accurate and inclusive sexual health education
- School policy that protects LGBT students
- Need for an LGBT wellness model

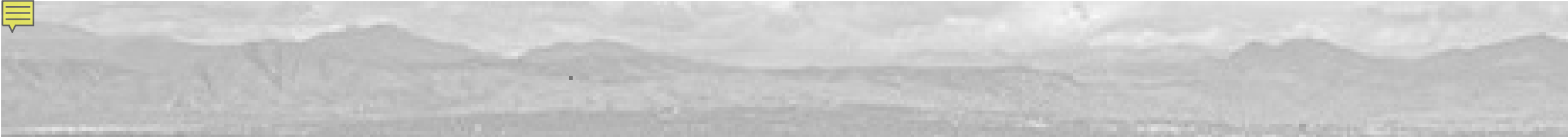


Example

# Access to Health Care Among Undocumented Families

What are some barriers?

- Cultural differences
- Costs
- Risk

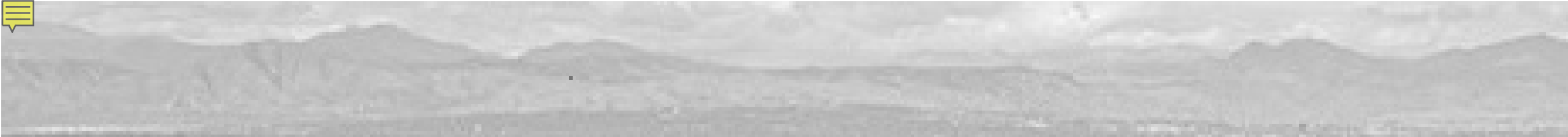


Example

# Access to Health Care Among Undocumented Families

What are we forgetting?

- Limited research
- Health care outside of emergency care
- Mixed status

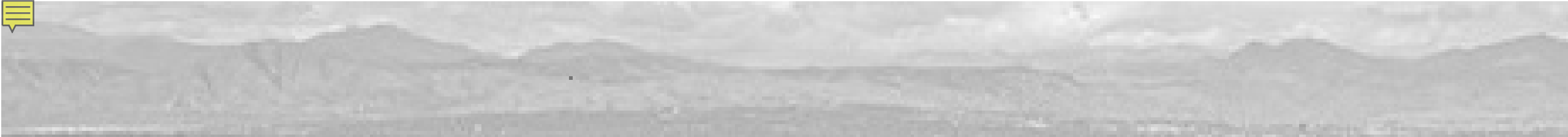


Example

# Access to Health Care Among Undocumented Families

Why should I care?

- Impact on community health
- Dissemination of knowledge
- Striving for inclusivity



National Association of County and City Health Officials

# Guidelines for Achieving Health Equity in Public Health Practice

- Monitor health status and track the conditions that influence health issues facing the community. Give people information they need to act collectively in improving their health.
- Protect people from health problems and health hazards. Prevent the further growth of social conditions that lead to inequities.
- Engage with the community to identify and eliminate health inequities.
- Develop public health policies and plans.
- Maintain a competent public health workforce.



# DISCUSSION

- Acknowledge the presence of systemic and personal biases
- Respect others' experiences and perspectives
- Use this discussion as an opportunity to generate ideas – not debate