The Health Equity Curricular Toolkit:
Innovating and Advocating for
Health Educators Striving for Health Equity

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Disclosures

We have no financial disclosures.
Objectives

• To describe the design and application of the *Health Equity Curricular Toolkit*.

• To experience the Toolkit.

• To identify opportunities to implement the Toolkit at participants’ institutions.
HEALTH EQUITY TEAM

Working together to reduce health disparities and increase the social accountability of primary care organizations across the US
Why?

We live in a nation of vast inequities.
Death and Mental Illness
Patients with schizophrenia are at a greater risk of dying at any given age than the population at large, and this disparity has been increasing.

Standardized mortality ratio of patients with schizophrenia vs. the general population.

<table>
<thead>
<tr>
<th>Year</th>
<th>Ratio</th>
</tr>
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<tbody>
<tr>
<td>1970s</td>
<td>1.0</td>
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<tr>
<td>1980s</td>
<td>3.0</td>
</tr>
<tr>
<td>1990s</td>
<td>3.7</td>
</tr>
<tr>
<td>2000s</td>
<td>3.7</td>
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By The New York Times | JAMA Psychiatry
Why?

**WE NEED**
to advance equitable outcomes for all people.

**WE WANT**
more practical tools to promote equity for all.
STARFIELD II: HEALTH EQUITY SUMMIT

Primary Care’s Role in Achieving Health Equity

...  

PORTLAND, OREGON — APRIL 22-25, 2017

"In its most highly developed form, primary care is the point of entry into the health services system and the locus of responsibility for organizing care for patients and populations over time. There is a universally held belief that the substance of primary care is essentially simple. Nothing could be further from the truth."

—Barbara Starfield, MD, MPH

http://www.starfieldsummit.com/
Keynote Address
David Williams, PhD, MPH

The Devine Solution
- Non-black adults can be motivated to increase their awareness of bias against blacks, their concerns about the effects of bias and to implement strategies which were effective in producing substantial reductions in bias that remained evident three months later.
- Implicit biases viewed as deeply engrained habits that can be replaced by learning new prejudice-reducing strategies including stereotype replacement, counter-stereotype imaging, individuation, perspective taking and increasing opportunities for interracial contact.

Medical Legal Partnership
- MDs can refer to new specialists: on-site attorneys
- Most low-income persons face legal issues that affect the quality of life and their management of disease
- Adding lawyers to medical team screens & assists families for problems that affect effective care & illness management
- Stressors addressed: housing, immigration, income support, food, education access, disability, family law
- A child with asthma in a moldy apartment will not breathe symptom free, regardless of meds, without improved living conditions

A Call to Action

“Each time a man stands up for an ideal, or acts to improve the lot of others, or strikes out against injustice, he sends forth a tiny ripple of hope, and those ripples build a current which can sweep down the mightiest walls of oppression and resistance.”

- Robert F. Kennedy
IGNITE THEME 1: Social Determinants of Health

• Understanding Health Experiences and Values in Order to Address Social Determinants of Health
  – Nancy Pandhi, MD, MPH, PhD & Sarah Davis, JD, MPA

• Identifying and Addressing Patients' Social and Economic Needs in the Context of Clinical Care
  – Laura Gottlieb, MD, MPH

• Communities Working Together to Improve Health and Reduce Disparities
  – J. Lloyd Michener, MD

• Using Community-Level Social, Economic, and Environmental Data to Monitor Health Disparities and Guide Interventions
  – Elizabeth Steiner Hayward, MD

• An Action Learning Approach to Teaching the Social Determinants of Health
  – Viviana Martinez-Bianchi, MD, FAAFP

• Improving patient outcomes by enhancing student understanding of social determinants of health
  – Brigit Carter, PhD, RN, CCRN
IGNITE THEME 2: Vulnerable Populations

• Why Rural Matters
  – Frederick Chen, MD, MPH
• People with Disabilities (Developmental and Intellectual Disabilities)
  – William Schwab, MD
• Racism, Sexism and Unconscious Bias
  – Denise Rodgers, MD, FAAFP
• Immigrant Populations
  – Michael Rodriguez, MD, MPH
• Intersectionality – The Interconnectedness of Class, Gender, Race and Other Types of Vulnerability
  – Somnath Saha, MD, MPH
IGNITE THEME 3: Economics and Policy

- International Efforts to Reduce Health Disparities
  - Michael Kidd, MD, MBBS
- ACA Opened the Door for Payment Reform and Practice Transformation to Address SDoH, Now What?
  - Craig Hostetler, MHA
- Community Vital Signs: Achieving Equity through Primary Care Means Checking More than Blood Pressure
  - Andrew Bazemore, MD, MPH
- How Social and Environmental Determinants of Health Can Be Used to Pay Differently for Health Care
  - Robert Phillips, MD, MSPH
- Access to Primary Care is not Enough: A Health Equity Road Map
  - Arlene Bierman, MD, MS
Toward Social Accountability

Social accountability in health care intentionally targets health care education, research, and services and addresses social determinants of health towards the priority health concerns of the people and communities served, with the goal of health equity.
STARFIELD II
HEALTH EQUITY SUMMIT

PRIMARY CARE’S ROLE IN ACHIEVING
HEALTH EQUITY

A guidebook to the
HEALTH EQUITY CURRICULAR
TOOLKIT

Of all the forms of inequality, injustice in health care is the most shocking and inhumane.
Martin Luther King, Jr.
Chicago, 1966

Each time a man stands up for an ideal, or acts to improve the lot of others, or strikes
out against injustice, he sends forth a tiny ripple of hope, and crossing each other from a
million different centers of energy and daring, those ripples build a current that can
swEEP down the mightiest walls of oppression and resistance.

Robert F. Kennedy
South Africa, 1966

STARFIELD SUMMIT

AMERICAN ACADEMY OF FAMILY PHYSICIANS
INTRODUCTION
OVERARCHING GOALS
A CALL TO ACTION
AUDIENCE
LEARNING MODULES – CATEGORIES, FRAMING AND ORGANIZATION
   Categories
   Socio-ecological framing
   Social accountability and an equity lens
   Module organization
ESSENTIAL THOUGHTS ABOUT USING THIS TOOLKIT
   For the facilitator
   For the learner
DEFINITIONS
HEALTH EQUITY RESOURCES
INTERPROFESSIONAL TEACHING/FACILITATION RESOURCES
EQUITY AND EMPOWERMENT LENS ASSESSMENT WORKSHEET

Guidebook
Table of Contents
Supplemental Videos

Orientation to the Health Equity Curricular Toolkit
https://youtu.be/xPo3FXaYiio

Facilitating Conversations about Inequity, Oppression, and Privilege
https://youtu.be/aE9s-sGt0js

Application of the Equity and Empowerment Lens for Facilitators and Learners
https://youtu.be/1hsl6lQjXnU
Audience

• We also hope this toolkit will feel accessible to all people engaged in trying to improve primary care and health outcomes for all. Target audience is:
  • Clinical and public health learners
  • Primary care faculty
• We provide guidance for which modules are appropriate for
  • All learners
  • Advanced learners
  • Faculty and fellows
Macro to Micro Level Socio-Ecologic Model

Module Organization

- Learning objectives
- Brief background/context
- “Ignite” video (each about 6-12 minutes) led by an expert in the field and the accompanying slides
- Questions for the facilitator for group discussion
- An invitation to propose an actionable response to the discussion with an opportunity to apply an equity lens
- Links to material in an annotated bibliography for more in depth reading and more advanced discussion
- A list of words and concepts used in the module that are defined at the end of the Guidebook
A Two-Part Introductory Module

Starfield Summit II: Health Equity Summit
Curriculum Toolkit

“Making America Healthier for All: What Each of Us Can Do”
Presentation by Dr. David Williams, PhD, MPH

“Shifting the Paradigm Toward Social Accountability”
Presentation by Sonali Sangeeta Balajee, MS, Jennifer Edgoose, MD, MPH,
Joedreka Brown-Speights, MD, Bonzo Reddick, MD, MPH; FAAFP

Module by Jennifer Edgoose, MD, MPH

Part 1: Introduction

You will explore many, if not all of the Starfield Summit modules, but feel it is important to listen to an address provided by Dr. David Williams, to introduce this

address Video “Making America Healthier for All: What Each of us can Do”
Follow the link below to view the full talk (~40 min):
www.youtube.com/watch?v=8tgqctGUQpQ


Part 2: Shifting the Paradigm Toward Social Accountability

To understand how to further frame this toolkit we want to introduce to you the concept of social accountability. While the Starfield II Health Equity Summit culminated with this session, we felt learners should grapple with concepts of social accountability early as a foundational concept for the subsequent modules.

Learning Objectives

After participating in this learning module, the participant will be able to:

1. Define social accountability in health care
2. Describe components of an equity and empowerment lens
3. Appreciate the benefits of using an equity and empowerment lens
4. Apply an equity and empowerment lens to a quality improvement intervention
Applying an Equity and Empowerment Lens

https://multco.us/diversity-equity/equity-and-empowerment-lens
Supplemental Videos

Orientation to the Health Equity Curricular Toolkit
https://youtu.be/xPo3FXaYiio

Facilitating Conversations about Inequity, Oppression, and Privilege
https://youtu.be/aE9s-sGt0js

Application of the Equity and Empowerment Lens for Facilitators and Learners
https://youtu.be/1hsl6lQjXnU
Improving Patient Outcomes by Enhancing Student Understanding of Social Determinants of Health
IGNITE presentation by Brigit Carter, PhD, RN, CCRN

An Action Learning Approach to Teaching the Social Determinants of Health
IGNITE presentation by Viviana Martínez-Banichi, MD, FAAFP

Module by Brigit M. Carter, PhD, Kjersti Knox, MD and Lucas Stone, BS

Appropriate Audience: faculty and fellows for curriculum development on social determinants of health across multiple health professions

Related modules:
- Identifying and Addressing Patients’ Social and Economic Needs in the Context of Clinical Care
- Racism, Sexism and Unconscious Bias
- Communities Working Together to Improve Health and Reduce Disparities & Using Community-Level Social, Economic, and Environmental Data to Monitor Health Disparities and Guide Interventions

Learning Objectives
After engaging with this learning module, the participant will be able to:

1. Describe strategies to increase health professional students understanding of concepts and measures associated with social determinants of health.
2. Link improved patient outcomes to addressing social determinants of health.
3. Apply community-based and community-driven educational frameworks to create experiential education opportunities for health professional students.
4. Identify potential barriers related to the integration of social determinants of health concepts into didactic and/or simulation curricula and create a proactive plan to address individual student’s experiences with social determinants of health as part of learning opportunities.

Background
There is strong evidence that all health professional students worldwide would benefit from a thorough knowledge base, understanding of the evidence, and the cultural sensitivities and competencies to effectively address health inequities and disparities. The World Health Organization, in conjunction with the Commission on Health Disparities, has recommended that educational institutions and relevant ministries integrate social determinants of health into standard and compulsory training of health professional students.
Evaluation by the AAFP National Research Network

Evaluation Objectives:
1. Assess whether toolkit facilitates critical discussion and learning on topics around health disparities and health equity
2. Assess utility, usability & relevance of toolkit
3. Refine toolkit based on assessment
Evaluation by the AAFP National Research Network

• Toolkit is being tested in 3 medical university primary care education settings
• Data will be collected from both facilitators and learners:
  Quantitative:
  • Pre-post assessment and surveys
  Qualitative
  • Interviews and focus groups
Evaluation by the AAFP National Research Network

Quantitative data:

**Health Equity Toolkit Assessment Questions**
– Pre/post assessment questions for each module. These will be used to assess knowledge and understanding and relevance of content for end users.

**Health Equity Toolkit Facilitator Survey** – Facilitators from each site will complete this survey to provide information about the facilitator guidebook, the module content and the facilitation process.
Evaluation by the AAFP National Research Network

Student and Resident participant focus groups to assess:

• Increase in knowledge
• Understanding of health equity concepts
• Gather feedback regarding the relevance and accessibility of the toolkit content
Evaluation by the AAFP National Research Network

Status:
- Evaluation currently ongoing
- Sites have toolkit and are using with student and resident learners
Time to explore…
Health Equity Curricular Toolkit

The Health Equity Curricular Toolkit was championed by the Health Equity Team of Family Medicine for America's Health and inspired by the Starfield I Health Equity Summit. This toolkit provides a structured curricular tool to facilitate exploration of some of the most pressing questions around social determinants of health, vulnerable populations, and economics and policy. The toolkit also provides resources to promote skill-building to confront drivers of persistent and pervasive inequities.

This toolkit is intended for clinical and public health learners and primary care faculty who would like an opportunity to further explore this area that often was not intentionally and adequately prioritized in past medical school and residency curricula.

The Guidebook to the Health Equity Curricular Toolkit includes a description of the socio-ecologic framework, the modular design, facilitation strategies, a glossary of definitions and health equity resources, and a worksheet to promote real-time application of an equity lens. This is accompanied by 14 modules including an introductory prerequisite 2-part module. Three short videos were also developed to assist with use of the toolkit.

Guidebook

- A Guidebook to the Health Equity Curricular Toolkit (97 page PDF)

Introductory Prerequisite 2-part Module

- Making America Healthier for All: What Each of Us Can Do (Part 1) AND Shifting the Paradigm Toward Social Accountability (Part 2) (14 page PDF)

Health Equity Modules

Social Determinants of Health Modules

- Identitying and Addressing Patients’ Social and Economic Needs in the Context of Clinical Care (6 page PDF)
- Communities Working Together to Improve Health and Reduce Disparities AND Community Health Improvement Plans and Patient-Centered Primary Care Homes as Tools to Address Health Disparities (6 page PDF)
- Improving Patient Outcomes by Enhancing Understanding of Social Determinants of Health AND An Action Learning Approach to Teaching the Social Determinants of Health (6 page PDF)
- Understanding Health Experiences and Values to Address Social Determinants of Health (6 page PDF)

Vulnerable Population Modules

Find us on the AAFP Center for Diversity and Health Equity website

Report Out

• What do you like about the toolkit?
• What did you find difficult?
• How would you use or disseminate the toolkit?
• What barriers do you see to implementation?
• What suggestions do you have to improve it?
Thank you!

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