achieving health equity a guide for health care organizations

Achieving Health Equity: A Guide for Healthcare Organizations

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Summary: This guide provides healthcare organizations with a practical framework for achieving health equity. It outlines key strategies, best practices, common pitfalls, and essential steps for creating a truly equitable system. The guide emphasizes data-driven decision-making, culturally competent care, and addressing systemic barriers to care.

Keywords: achieving health equity, health equity, healthcare organizations, health disparities, equity in healthcare, diversity, inclusion, healthcare access, cultural competency, systemic racism, health equity initiatives, achieving health equity a guide for health care organizations

I. Understanding Health Equity: Beyond Equality

Achieving health equity, a guide for healthcare organizations, begins with a clear understanding of the difference between equality and equity. Equality means treating everyone the same, while equity acknowledges that different individuals and groups may require different levels of support to achieve the same outcome. Health equity aims to ensure that all individuals have the opportunity to attain their full health potential, regardless of their social determinants of health (SDOH). These SDOH, encompassing factors like race, ethnicity, socioeconomic status, geographic location, and sexual orientation, significantly impact health outcomes.

II. Assessing Your Organization's Current State: Identifying Disparities

Before implementing changes, a comprehensive assessment is crucial. This involves:

Data Collection and Analysis: Analyzing existing data on patient demographics, diagnoses, treatment outcomes, and access to care is vital to identify existing disparities. This data should be disaggregated by race, ethnicity, gender, socioeconomic status, and other relevant factors.
Community Engagement: Engaging with community leaders and members from diverse backgrounds is essential to understanding their unique needs and perspectives. This participatory approach ensures that interventions are relevant and effective.
Staff Assessment: Evaluating the diversity and cultural competency of your workforce is crucial. A diverse workforce is better equipped to understand and address the needs of a diverse patient population.

III. Implementing Strategies for Achieving Health Equity: A Guide for Healthcare Organizations

This section provides actionable steps for healthcare organizations seeking to achieve health equity:

Address Systemic Barriers: Healthcare organizations must actively identify and dismantle systemic

barriers to care, such as implicit bias among healthcare providers, discriminatory practices, and lack of access to transportation or interpreters.

Culturally Competent Care: Provide training to staff on cultural competency, emphasizing communication skills, understanding of different health beliefs, and avoidance of implicit bias.

Improve Access to Care: Increase access to care through expanded hours, telehealth services, mobile clinics, and community outreach programs, specifically targeting underserved populations.

Invest in Community Health Initiatives: Partner with community organizations to address SDOH through initiatives focused on housing, food security, education, and employment.

Develop Equitable Policies and Procedures: Ensure that all policies and procedures are designed to promote equity and avoid perpetuating existing disparities.

Data-Driven Decision Making: Continuously monitor data to track progress toward health equity goals and adapt strategies as needed.

IV. Common Pitfalls and How to Avoid Them

Achieving health equity is a complex and ongoing process. Common pitfalls include:

Lack of Commitment from Leadership: Strong leadership commitment and resources are essential for long-term success.

Insufficient Data Collection and Analysis: Without robust data, organizations cannot effectively identify and address disparities.

Tokenistic Efforts: Superficial or symbolic actions are insufficient; systemic change is required.

Lack of Community Engagement: Ignoring the voices and experiences of the community will lead to ineffective interventions.

Failure to Address Systemic Racism: Ignoring systemic racism undermines efforts to achieve health equity.

V. Conclusion

Achieving health equity is a moral imperative and a strategic necessity for healthcare organizations. By implementing the strategies outlined in this guide – "Achieving Health Equity: A Guide for Healthcare

Organizations" – healthcare organizations can move towards a more just and equitable system that provides high-quality care for all members of the community. This requires a sustained commitment to addressing systemic issues, engaging communities, and continuously monitoring progress. The journey towards health equity is ongoing, requiring continuous learning, adaptation, and a commitment to ongoing improvement.

FAQs

1. What is the difference between health equity and health equality? Health equality means providing everyone with the same resources, while health equity recognizes that different groups need different levels of support to achieve the same health outcome.

1. How can I measure progress towards health equity? Use disaggregated data on key metrics such as access to care, diagnosis rates, treatment outcomes, and patient satisfaction, broken down by relevant demographic factors.

1. What role does cultural competency play in achieving health equity? Culturally competent care ensures that healthcare providers understand and respect the cultural beliefs and practices of their patients, leading to better communication and more effective treatment.

1. How can healthcare organizations address systemic racism? Through a combination of policy changes, staff training, community partnerships, and data-driven interventions targeting racial disparities.

1. What are some examples of community health initiatives that promote health equity? Addressing food insecurity, improving access to affordable housing, providing transportation assistance, and promoting health literacy.

1. How can we improve access to care for underserved populations? Expand access via telehealth, mobile clinics, extended hours, and addressing financial barriers.

1. How can healthcare organizations engage with communities effectively? Through participatory approaches, including community health needs assessments, focus groups, and community advisory boards.

1. What is the role of leadership in achieving health equity? Strong leadership commitment is crucial for allocating resources, driving change, and sustaining long-term efforts.

1. How can we ensure that health equity initiatives are sustainable over time? By embedding equity into the organization's mission, vision, and strategic plans, and securing consistent funding and support.

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4. Measuring Health Equity: Key Metrics and Indicators: Identifies and explains the essential metrics for tracking progress towards health equity.

5. Strategies for Improving Access to Healthcare for Underserved Populations: Explores innovative models for expanding access to care.

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9. Data-Driven Decision Making for Health Equity Initiatives: Demonstrates how data can be used to inform and evaluate interventions aimed at improving health equity.

achieving health equity a guide for health care organizations: Communities in Action

National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Population Health and Public Health Practice, Committee on Community-Based Solutions to Promote Health Equity in the United States, 2017-04-27 In the United States, some populations suffer from far greater disparities in health than others. Those disparities are caused not only by fundamental differences in health status across segments of the population, but also because of inequities in factors that impact health status, so-called determinants of health. Only part of an individual's health status depends on his or her behavior and choice; community-wide problems like poverty, unemployment, poor education, inadequate housing, poor public transportation, interpersonal violence, and decaying neighborhoods also contribute to health inequities, as well as the historic and ongoing interplay of structures, policies, and norms that shape lives. When these factors are not optimal in a community, it does not mean they are intractable: such inequities can be mitigated by social policies that can shape health in powerful ways. Communities in Action: Pathways to Health Equity seeks to delineate the causes of and the solutions to health inequities in the United States. This report focuses on what communities can do to promote health equity, what actions are needed by the many and varied stakeholders that are part of communities or support them, as well as the root causes and structural barriers that need to be overcome.

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achieving health equity a guide for health care organizations: Closing the Gap in a Generation WHO Commission on Social Determinants of Health, World Health Organization, 2008 Social justice is a matter of life and death. It affects the way people live, their consequent chance of illness, and their risk of premature death. We watch in wonder as life expectancy and good health continue to increase in parts of the world and in alarm as they fail to improve in others.

achieving health equity a guide for health care organizations: Integrating Social Care into the Delivery of Health Care National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Health Care Services, Committee on Integrating Social Needs Care into the Delivery of Health Care to Improve the Nation's Health, 2020-01-30 Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health was

released in September 2019, before the World Health Organization declared COVID-19 a global pandemic in March 2020. Improving social conditions remains critical to improving health outcomes, and integrating social care into health care delivery is more relevant than ever in the context of the pandemic and increased strains placed on the U.S. health care system. The report and its related products ultimately aim to help improve health and health equity, during COVID-19 and beyond. The consistent and compelling evidence on how social determinants shape health has led to a growing recognition throughout the health care sector that improving health and health equity is likely to depend â€ at least in part â€ on mitigating adverse social determinants. This recognition has been bolstered by a shift in the health care sector towards value-based payment, which incentivizes improved health outcomes for persons and populations rather than service delivery alone. The combined result of these changes has been a growing emphasis on health care systems addressing patients' social risk factors and social needs with the aim of improving health outcomes. This may involve health care systems linking individual patients with government and community social services, but important questions need to be answered about when and how health care systems should integrate social care into their practices and what kinds of infrastructure are required to facilitate such activities. Integrating Social Care into the Delivery of Health Care: Moving Upstream to Improve the Nation's Health examines the potential for integrating services addressing social needs and the social determinants of health into the delivery of health care to achieve better health outcomes. This report assesses approaches to social care integration currently being taken by health care providers and systems, and new or emerging approaches and opportunities; current roles in such integration by different disciplines and organizations, and new or emerging roles and types of providers; and current and emerging efforts to design health care systems to improve the nation's health and reduce health inequities.

achieving health equity a guide for health care organizations: Handbook on Health Inequality Monitoring World Health Organization, 2013 The Handbook on health inequality monitoring: with a special focus on low- and middle-income countries is a resource that enables countries to do just that. It presents a comprehensive yet clear overview of health inequality monitoring in a user-friendly manner. The handbook succeeds in giving those involved in health inequality monitoring an appreciation of the complexities of the process, as well as building the practical knowledge and skills for systematic monitoring of health inequalities in low- and middle-income countries. The use of the handbook will enable countries to better monitor and evaluate their progress and performance with a high degree of accountability and transparency, and allow them to use the results to formulate evidenced-based policies, programmes and practices to tackle inequalities in an effective manner.--Publisher's description.

achieving health equity a guide for health care organizations: Population Health Monitoring Marieke Verschuuren, Hans van Oers, 2018-12-17 This timely volume presents an in-depth tour of population health monitoring—what it is, what it does, and why it has become increasingly important to health information systems across Europe. Introductory chapters ground readers in the structures of health information systems, and the main theoretical and conceptual models of population health monitoring. From there, contributors offer tools and guidelines for optimum monitoring, including best practices for gathering and contextualizing data and for disseminating findings, to benefit the people most affected by the information. And an extended example follows the step-by-step processes of population health monitoring through a study of health inequalities, from data collection to policy recommendations. Included in the coverage: · Structuring health information: frameworks, models, and indicators · Analysis: contextualization of process and content · Knowledge translation: key concepts, terms, and activities · Health inequality monitoring: a practical application of population health monitoring · Relating population health monitoring to other types of health assessments · Population health monitoring: strengths, weaknesses, opportunities, and threats A robust guide with international implications for an emerging field, Population Health Monitoring is a salient reference for public health experts working in the field of health information as well as post-graduate public health students and public health policymakers.

In this comprehensive and easy to read volume, Verschuuren and van Oers, accompanied by other specialists in the field, present a fresh and thoroughly researched contribution on the discipline of population health monitoring. They critically analyse and describe the phases, functions and approaches to population health monitoring but far more importantly, the discipline is positioned within the wider domains of public health, health policy and health systems. The book is definitely highly recommended reading for students of public health and health services management but is also a useful refresher course for public health practitioners. Natasha Azzopardi Muscat, President, European Public Health Association Chapter 7 of this book is available open access under a CC BY 3.0 IGO license at link.springer.com Chapter 8 of this book is available open access under a CC BY 3.0 IGO license at link.springer.com

achieving health equity a guide for health care organizations: Race, Ethnicity, and Language Data Institute of Medicine, Board on Health Care Services, Subcommittee on Standardized Collection of Race/Ethnicity Data for Healthcare Quality Improvement, 2009-12-30 The goal of eliminating disparities in health care in the United States remains elusive. Even as quality improves on specific measures, disparities often persist. Addressing these disparities must begin with the fundamental step of bringing the nature of the disparities and the groups at risk for those disparities to light by collecting health care quality information stratified by race, ethnicity and language data. Then attention can be focused on where interventions might be best applied, and on planning and evaluating those efforts to inform the development of policy and the application of resources. A lack of standardization of categories for race, ethnicity, and language data has been suggested as one obstacle to achieving more widespread collection and utilization of these data. Race, Ethnicity, and Language Data identifies current models for collecting and coding race, ethnicity, and language data; reviews challenges involved in obtaining these data, and makes recommendations for a nationally standardized approach for use in health care quality improvement.

achieving health equity a guide for health care organizations: Vibrant and Healthy Kids National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Population Health and Public Health Practice, Committee on Applying Neurobiological and Socio-Behavioral Sciences from Prenatal Through Early Childhood Development: A Health Equity Approach, 2019-12-27 Children are the foundation of the United States, and supporting them is a key component of building a successful future. However, millions of children face health inequities that compromise their development, well-being, and long-term outcomes, despite substantial scientific evidence about how those adversities contribute to poor health. Advancements in neurobiological and socio-behavioral science show that critical biological systems develop in the prenatal through early childhood periods, and neurobiological development is extremely responsive to environmental influences during these stages. Consequently, social, economic, cultural, and environmental factors significantly affect a child's health ecosystem and ability to thrive throughout adulthood. Vibrant and Healthy Kids: Aligning Science, Practice, and Policy to Advance Health Equity builds upon and updates research from Communities in Action: Pathways to Health Equity (2017) and From Neurons to Neighborhoods: The Science of Early Childhood Development (2000). This report provides a brief overview of stressors that affect childhood development and health, a framework for applying current brain and development science to the real world, a roadmap for implementing tailored interventions, and recommendations about improving systems to better align with our understanding of the significant impact of health equity.

achieving health equity a guide for health care organizations: Crossing the Quality Chasm Institute of Medicine, Committee on Quality of Health Care in America, 2001-07-19 Second in a series of publications from the Institute of Medicine's Quality of Health Care in America project Today's health care providers have more research findings and more technology available to them than ever before. Yet recent reports have raised serious doubts about the quality of health care in America. Crossing the Quality Chasm makes an urgent call for fundamental change to close the quality gap. This book recommends a sweeping redesign of the American health care system and provides overarching principles for specific direction for policymakers, health care leaders,

clinicians, regulators, purchasers, and others. In this comprehensive volume the committee offers: A set of performance expectations for the 21st century health care system. A set of 10 new rules to guide patient-clinician relationships. A suggested organizing framework to better align the incentives inherent in payment and accountability with improvements in quality. Key steps to promote evidence-based practice and strengthen clinical information systems. Analyzing health care organizations as complex systems, Crossing the Quality Chasm also documents the causes of the quality gap, identifies current practices that impede quality care, and explores how systems approaches can be used to implement change.

achieving health equity a guide for health care organizations: Getting Health Reform Right Marc Roberts, William Hsiao, Peter Berman, Michael Reich, 2008-04-23 This book provides a multi-disciplinary framework for developing and analyzing health sector reforms, based on the authors' extensive international experience. It offers practical guidance - useful to policymakers, consultants, academics, and students alike - and stresses the need to take account of each country's economic, administrative, and political circumstances. The authors explain how to design effective government interventions in five areas - financing, payment, organization, regulation, and behavior - to improve the performance and equity of health systems around the world.

achieving health equity a guide for health care organizations: Leading Community Based Changes in the Culture of Health in the US Claudia S.P. Fernandez, Giselle Corbie-Smith, 2021-09-08 Advancing health equity calls for a new kind of leader and a new approach to leadership development. Clinical Scholars and Culture of Health Leaders are mid-career leadership development programs supporting the emergence of collaborative and systemic approaches, bringing teams of leaders together with others in the community to work toward the common goal of lessening health disparities. In each chapter of this book, the authors share how they tackled seemingly intractable issues, making headway through applying the principles of adaptive leadership in unbounded systems to create not only outcomes but also impacts on health disparities and, in some cases, sustainable and scalable applications. In this volume, you will learn how Clinical Scholars and Culture of Health Leaders programs curated and measured the successful learning and development of these dedicated health-equity advocates.

achieving health equity a guide for health care organizations: Inequality Monitoring in Immunization World Health Organization, 2020-01-23 The manual is an introductory guide to inequality monitoring in the topic of immunization. Aiming to build capacity for the uptake and improvement of inequality monitoring practices in immunization, the manual was primarily designed for monitoring and evaluation officers for immunization, and may also be of interest for other readers with basic knowledge and experience working with immunization data. This resource is organized in five sections, illustrating how the five steps (and corresponding sub-steps) of health inequality monitoring apply to immunization. From the first step of determining the scope of monitoring to the fifth step of knowledge translation, contemporary considerations and examples for immunization inequality monitoring are highlighted. Step-by-step guidance, including key questions and best practices for each sub-step, are summarized in a flow chart. Additional information is provided through appendices and a glossary of terms.

achieving health equity a guide for health care organizations: Challenges and Successes in Reducing Health Disparities Institute of Medicine, Board on Population Health and Public Health Practice, Roundtable on Health Disparities, 2008-06-13 In early 2007, the Institute of Medicine convened the Roundtable on Health Disparities to increase the visibility of racial and ethnic health disparities as a national problem, to further the development of programs and strategies to reduce disparities, to foster the emergence of leadership on this issue, and to track promising activities and developments in health care that could lead to dramatically reducing or eliminating disparities. The Roundtable's first workshop, Challenges and Successes in Reducing Health Disparities, was held in St. Louis, Missouri, on July 31, 2007, and examined (1) the importance of differences in life expectancy within the United States, (2) the reasons for those differences, and (3) the implications of this information for programs and policy makers.

achieving health equity a guide for health care organizations: The Social Determinants of Mental Health Michael T. Compton, Ruth S. Shim, 2015-04-01 The Social Determinants of Mental Health aims to fill the gap that exists in the psychiatric, scholarly, and policy-related literature on the social determinants of mental health: those factors stemming from where we learn, play, live, work, and age that impact our overall mental health and well-being. The editors and an impressive roster of chapter authors from diverse scholarly backgrounds provide detailed information on topics such as discrimination and social exclusion; adverse early life experiences; poor education; unemployment, underemployment, and job insecurity; income inequality, poverty, and neighborhood deprivation; food insecurity; poor housing quality and housing instability; adverse features of the built environment; and poor access to mental health care. This thought-provoking book offers many beneficial features for clinicians and public health professionals: Clinical vignettes are included, designed to make the content accessible to readers who are primarily clinicians and also to demonstrate the practical, individual-level applicability of the subject matter for those who typically work at the public health, population, and/or policy level. Policy implications are discussed throughout, designed to make the content accessible to readers who work primarily at the public health or population level and also to demonstrate the policy relevance of the subject matter for those who typically work at the clinical level. All chapters include five to six key points that focus on the most important content, helping to both prepare the reader with a brief overview of the chapter's main points and reinforce the take-away messages afterward. In addition to the main body of the book, which focuses on selected individual social determinants of mental health, the volume includes an in-depth overview that summarizes the editors' and their colleagues' conceptualization, as well as a final chapter coauthored by Dr. David Satcher, 16th Surgeon General of the United States, that serves as a Call to Action, offering specific actions that can be taken by both clinicians and policymakers to address the social determinants of mental health. The editors have succeeded in the difficult task of balancing the individual/clinical/patient perspective and the population/public health/community point of view, while underscoring the need for both groups to work in a unified way to address the inequities in twenty-first century America. The Social Determinants of Mental Health gives readers the tools to understand and act to improve mental health and reduce risk for mental illnesses for individuals and communities. Students preparing for the Medical College Admission Test (MCAT) will also benefit from this book, as the MCAT in 2015 will test applicants' knowledge of social determinants of health. The social determinants of mental health are not distinct from the social determinants of physical health, although they deserve special emphasis given the prevalence and burden of poor mental health.

achieving health equity a guide for health care organizations: The Improvement Guide Gerald J. Langley, Ronald D. Moen, Kevin M. Nolan, Thomas W. Nolan, Clifford L. Norman, Lloyd P. Provost, 2009-06-03 This new edition of this bestselling guide offers an integrated approach to process improvement that delivers quick and substantial results in quality and productivity in diverse settings. The authors explore their Model for Improvement that worked with international improvement efforts at multinational companies as well as in different industries such as healthcare and public agencies. This edition includes new information that shows how to accelerate improvement by spreading changes across multiple sites. The book presents a practical tool kit of ideas, examples, and applications.

achieving health equity a guide for health care organizations: Guide to U.S. Health and Health Care Policy Thomas R. Oliver, 2014-09-03 The contentious passage of the Affordable Care Act in 2010 highlighted the incredible complexity and controversy surrounding health care in the United States. While the U.S. federal government does not provide universal health care, it has an extremely wide reach when it comes to the health of its citizenry. From important scientific and medical research funding to infectious disease control and health services for veterans and the elderly, the pathway to legislation and execution of health policies is filled with competing interests and highly varied solutions. The Guide to U.S. Health and Health Care Policy provides the analytical connections showing researchers how issues and actions are translated into public policies and

institutions for resolving or managing healthcare issues and crises. The Guide highlights the decision-making cycle that requires the cooperation of federal and state governments, business, and an informed citizenry in order to achieve a comprehensive approach to advancing the nation's healthcare policies. Through 30 topical chapters, the book addresses the development of the U.S. healthcare system and policies, the federal agencies and public and private organizations that frame and administer those policies, and the challenges of balancing the nation's healthcare needs with the rising costs of medical research, cost-effective treatment, and adequate health insurance. Additionally, the book comprehensively addresses significant disparities that exist in the U.S. system and the challenges to public health posed by our increasingly connected world. Taking a comprehensive approach, the Guide traces policy initiatives across time and takes into account the most recent scholarship: Part One: Evolution of American Health Care Policy Looks at the emerging and expanding role of government in the health care sector and the position the U.S. occupies today as the only advanced industrial nation without universal health care. Part Two: Government Organizations that Develop, Fund, and Administer Health Policy (1789-Today) Examines the role each branch of government plays in the forming, executing, and regulating health care policies. The authors examine the origins, organization, budget, and function of major government organizations including the FDA, CDC, and VA. An exploration of legal oversight and the roles states play in the health sector round out this section. Part Three: Contemporary Health Policy Issues: Goals and Initiatives (1920s-Today) Explores the wide range of players in the health care sphere and the role the government plays, particularly in funding them. Special attention is paid to policy issues surrounding medical research and medical professions. This section also looks at the ethical issues in play when making health policy and the inequalities that have plagued the U.S. health care system. Part Four: Contemporary Health Policy Issues: People and Policies (1960s-Today) This part of the book looks in-depth at health disparities in the U.S., health challenges particular to specific groups, mental health, obesity, and the influence of interest groups. Part Five: U.S. Response to Global Health Challenges (1980s-Today) The last section of the book looks beyond the borders of the United States and the serious challenges posed by our increasingly connected world.

achieving health equity a guide for health care organizations: Finding What Works in Health Care Institute of Medicine, Board on Health Care Services, Committee on Standards for Systematic Reviews of Comparative Effectiveness Research, 2011-07-20 Healthcare decision makers in search of reliable information that compares health interventions increasingly turn to systematic reviews for the best summary of the evidence. Systematic reviews identify, select, assess, and synthesize the findings of similar but separate studies, and can help clarify what is known and not known about the potential benefits and harms of drugs, devices, and other healthcare services. Systematic reviews can be helpful for clinicians who want to integrate research findings into their daily practices, for patients to make well-informed choices about their own care, for professional medical societies and other organizations that develop clinical practice guidelines. Too often systematic reviews are of uncertain or poor quality. There are no universally accepted standards for developing systematic reviews leading to variability in how conflicts of interest and biases are handled, how evidence is appraised, and the overall scientific rigor of the process. In Finding What Works in Health Care the Institute of Medicine (IOM) recommends 21 standards for developing high-quality systematic reviews of comparative effectiveness research. The standards address the entire systematic review process from the initial steps of formulating the topic and building the review team to producing a detailed final report that synthesizes what the evidence shows and where knowledge gaps remain. Finding What Works in Health Care also proposes a framework for improving the quality of the science underpinning systematic reviews. This book will serve as a vital resource for both sponsors and producers of systematic reviews of comparative effectiveness research.

achieving health equity a guide for health care organizations: Improving Healthcare Quality in Europe Characteristics, Effectiveness and Implementation of Different Strategies OECD, World Health Organization, 2019-10-17 This volume, developed by the Observatory together with

OECD, provides an overall conceptual framework for understanding and applying strategies aimed at improving quality of care. Crucially, it summarizes available evidence on different quality strategies and provides recommendations for their implementation. This book is intended to help policy-makers to understand concepts of quality and to support them to evaluate single strategies and combinations of strategies.

achieving health equity a guide for health care organizations: Unequal Treatment Institute of Medicine, Board on Health Sciences Policy, Committee on Understanding and Eliminating Racial and Ethnic Disparities in Health Care, 2009-02-06 Racial and ethnic disparities in health care are known to reflect access to care and other issues that arise from differing socioeconomic conditions. There is, however, increasing evidence that even after such differences are accounted for, race and ethnicity remain significant predictors of the quality of health care received. In Unequal Treatment, a panel of experts documents this evidence and explores how persons of color experience the health care environment. The book examines how disparities in treatment may arise in health care systems and looks at aspects of the clinical encounter that may contribute to such disparities. Patients' and providers' attitudes, expectations, and behavior are analyzed. How to intervene? Unequal Treatment offers recommendations for improvements in medical care financing, allocation of care, availability of language translation, community-based care, and other arenas. The committee highlights the potential of cross-cultural education to improve provider-patient communication and offers a detailed look at how to integrate cross-cultural learning within the health professions. The book concludes with recommendations for data collection and research initiatives. Unequal Treatment will be vitally important to health care policymakers, administrators, providers, educators, and students as well as advocates for people of color.

achieving health equity a guide for health care organizations: Equity and excellence: Great Britain: Department of Health, 2010-07-12 Equity and Excellence : Liberating the NHS: Presented to Parliament by the Secretary of State for Health by Command of Her Majesty

achieving health equity a guide for health care organizations: Health in All Policies World Health Organization, 2015-01-30 The purpose of this manual is to provide a resource for training to increase understanding of Health in All Policies (HiAP) by health and other professionals. It is anticipated that the material in this manual will form the basis of two- or three-day workshops, which will build capacity to promote, implement and evaluate HiAP; encourage engagement and collaboration across sectors; facilitate the exchange of experiences and lessons learned; promote regional and global collaboration on HiAP, and promote dissemination of skills to develop training courses for trainers. The training manual target audience is universities, public health institutes, non-governmental organizations, training institutions in government and intergovernmental organizations. The training is structured to target professionals from middle to senior levels of policy-making and government from all sectors influencing health. These include health, employment, housing, economic development, finance, trade, environment and sustainability, social security, education, agriculture and urban planning. Depending on the content, it would also be advisable to include participants from civil society. The manual includes 12 training modules consisting of interactive lectures and group activities.

achieving health equity a guide for health care organizations: *Health Equity and Nursing* Margaret P. Moss, PhD, JD, RN, FAAN, Janice Phillips, PhD, RN, CENP, FAAN, 2020-03-18 Authored by highly respected nurse educators, leaders, and scholars, this text focuses on the power of nurses and how they can make substantial contributions to improve the health of all populations. It delivers an in-depth examination and analysis of current issues and determinants of health as outlined by Healthy People 2020 and addresses AACN’s Essentials of Doctoral Education for Advanced Nursing Practice. Along with principles, pathways, and imperatives pertinent to achieving health equity, thetext discusses the evolution of thinking from eliminating health disparities to achieving health equity, and examines population-based and population-specific inequities in health status and outcomes. Highlighting the importance of interprofessional collaboration, it surveys timely initiatives, programs, and professionals—within and outside of the health sciences—who are

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