Issues in Women & Minority Health

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Overview of Session

- HP 2010 Model: Determinants of Health
  - Review of HP 2010 Goals
- Social Stratification Theory
- Social Constructionism
- Determinants of Women’s Health
- Health Disparities
Model of Healthy People in Healthy Communities
Healthy People 2010: Model

- Healthy People in Healthy Communities
- Model to help us understand the “determinants” of health.
  - What is a determinant?
    - Something that predicts health
- Multidimensional
- Multi-level
- So, how can we begin to understand the multiple ‘determinants of health’?
Healthy People 2010

- Goals
  - Increase the number of quality years of life live
  - Eliminate health disparities

- Applications to
  - Women
  - “Minority Populations”
What is social stratification?
- Differential allocation of resources

All known societies have inequalities

Most privileged enjoy disproportionate
- Wealth
- Power
- Prestige
Social Stratification Theory

- **Key components**
  - Institutional processes
    - Define types of goods as valuable & desirable
  - Rules of allocation
    - Distribute goods across various positions in social structure
  - Mobility of mechanisms
    - Link individuals to social structure

THUS, generating unequal control of overvalued resources.
Types of Social Stratification

- Degree of *inequality* of assets
  - Dispersion
  - Concentration

- Degree of *rigidity*
  - High (social closure)
  - Low (social mobility)
Types of Social Stratification

- Stratification based on *achieved* processes
- Stratification based on *ascriptive* processes
  - Traits present at birth influence subsequent social standing
  
  If this occurs, possible that underlying traits themselves will become basis for group formation & collective action.
Status Attainment Theory

- Status Attainment: Within & Across Generations
- Proposed mechanism:
  - “We postulate that socioeconomic background affects mental ability, that background & ability affect educational attainment, and that background, ability, and education affect earnings.” (Blau & Duncan 1967)
- Ascription & achievement
  - Allows for social mobility with a baseline of ascriptive factors
    - How to interpret this statement?
Constructs such as age, gender, SES, & race/ethnicity are “socially defined” or “socially constructed”

- What does this mean?

“Social Constructionism” – A theory of knowledge stating that social phenomena develop in particular social contexts.
“Social Construct” – Invention or artifact of a particular culture or society.
- Appears “natural” or “real”
- Perceived social reality; ongoing social process

Things that are “socially constructed” necessarily change as the culture/society changes
Norms & Values

- **Norm:**
  1. What is “usual” in a society (e.g., way a given illness is perceived)
  2. What is “desirable”. Norms can be used to determine degree of conformity with what is desirable.
Norms & Values

- **Value:**
  1. What we (society) believes in & consider important in how we live.
  2. Influence behavior as persons, groups, communities, societies.
Utility of Stratification Theory, Social Constructionism & Norms & Values in Understanding Determinants of Women & Minority Health
Women’s Health (Men’s too)
What is “SEX”?  
- **Sex** is defined as the classification of living things, generally as male or female according to their reproductive organs and functions assigned by their chromosomal complement.  
- Biological construct: men & women share 99% genetics

What is “GENDER”?  
- **Gender** is defined as a person’s self-representation as male or female, or how that person is responded to by social institutions on the basis of the individual’s gender presentation.  
- Shaped by environment & experience  
- Psychosocial construct  

Also, interaction between biology & environment (i.e., sex & gender)
Gender as a Social Construct

- Societal & individual beliefs about what is appropriate for men & women
- Gendered social roles, norms, expectations, behaviors
- Life-long socialization—internalization of these beliefs
- External enforcement
  - Rewards
  - Negative sanctions
Gender as a Social Construct

- Gender is a composite of many factors including:
  - Social status
  - Income
  - Empowerment
  - Equality & access to resources
- “Gender Index Variable”
Health Effects of Gender

- Gender roles, expectations & inequalities function in at least 3 ways to affect health directly
  - Gender norms constrain or disadvantage 1 gender → group-level gender differences
    - Risk taking behaviors M>F
  - Direct discrimination by gender, e.g., marginalization of women relative to men in much of the world
    - Differential access to nutrition, resources, etc.
  - Acceptance & dissonance with expected gender roles create internalized individual stresses
### Quick Overview of Health Statistics 2007

<table>
<thead>
<tr>
<th>Category</th>
<th>Female (% of Population)</th>
<th>Male (% of Population)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>153.0 mil</td>
<td>148.7 mil</td>
</tr>
<tr>
<td>Fair-Poor Health</td>
<td>14%</td>
<td>12%</td>
</tr>
<tr>
<td>Exercise</td>
<td>32%</td>
<td>37%</td>
</tr>
<tr>
<td>Smoke</td>
<td>18%</td>
<td>32%</td>
</tr>
<tr>
<td>5+ drinks</td>
<td>14%</td>
<td>32%</td>
</tr>
<tr>
<td>Obese</td>
<td>35%</td>
<td>32%</td>
</tr>
<tr>
<td>HTN</td>
<td>33%</td>
<td>31%</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>16%</td>
<td>19%</td>
</tr>
</tbody>
</table>
“Minority Health”
Historical Definitions of Race in the US

- What is “Race”?
- What is “Ethnicity”?

Both are historically, socially, culturally constructed.
How Do We Operationalize ‘Race’ & Ethnicity in Public Health?

Operational Definitions Used in 2010 Census
OMB Definitions of Race/Ethnicity

- **American Indian & Alaskan Native (AIAN):**
  - People having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

- **Asian American:**
  - People having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent.

- **Black or African American:**
  - People having origins in any of the black racial groups of Africa.

- **Hispanic or Latino:**
  - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

- **Native Hawaiian & other Pacific Islanders (NHOPI):**
  - People having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

- **Multiracial:**
  - People having origins in two or more of the federally designated racial categories.

- **White:**
  - People having origins in any of the original peoples of Europe, the Middle East, or North Africa.
Table 1.  
**Population by Race and Hispanic Origin for the United States: 2000**

<table>
<thead>
<tr>
<th>Race and Hispanic or Latino</th>
<th>Number</th>
<th>Percent of total population</th>
</tr>
</thead>
<tbody>
<tr>
<td>RACE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total population</td>
<td>281,421,906</td>
<td>100.0</td>
</tr>
<tr>
<td>One race</td>
<td>274,595,678</td>
<td>97.6</td>
</tr>
<tr>
<td>White</td>
<td>211,460,626</td>
<td>75.1</td>
</tr>
<tr>
<td>Black or African American</td>
<td>34,658,190</td>
<td>12.3</td>
</tr>
<tr>
<td>American Indian and Alaska Native</td>
<td>2,475,956</td>
<td>0.9</td>
</tr>
<tr>
<td>Asian</td>
<td>10,242,998</td>
<td>3.6</td>
</tr>
<tr>
<td>Native Hawaiian and Other Pacific Islander</td>
<td>398,835</td>
<td>0.1</td>
</tr>
<tr>
<td>Some other race</td>
<td>15,359,073</td>
<td>5.5</td>
</tr>
<tr>
<td>Two or more races</td>
<td>6,826,228</td>
<td>2.4</td>
</tr>
<tr>
<td>HISPANIC OR LATINO</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total population</td>
<td>281,421,906</td>
<td>100.0</td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td>35,305,818</td>
<td>12.5</td>
</tr>
<tr>
<td>Not Hispanic or Latino</td>
<td>246,116,088</td>
<td>87.5</td>
</tr>
</tbody>
</table>

Defining Health Disparities

- Systematic, potentially avoidable differences in health or the major socially determined influences on health
  - Between groups of people who have different relative position in social hierarchies according to:
    - Wealth
    - Power
    - Prestige
- These differences adversely affect health or health risks of groups already at a disadvantage by virtue of their social position, thus particularly unfair.
Social Discrimination & Health

- **Discrimination**: Biased actions against members of socially marginalized groups by individuals & institutions
  - Bring about SES disadvantage
  - Contribute to environmental exposures
  - Lead to accumulation of stressors over lifetime
  - Operates along multiple pathways

- Discrimination linked to:
  - Hypertension
  - Respiratory problems
  - Somatic complaints
  - Self-rated health
  - Mental health
  - Chronic health conditions
Issues of Social Justice & Health as a Human Right

- Health disparities systematically associated with being social disadvantaged, putting those groups at further disadvantage.

- Pursuit of Health Equity: Striving to eliminate health disparities can be seen as striving for equal opportunities for all social groups to be healthy.

- Human Right: Pursuing health equity means removing obstacles for groups of people.
Resources for Gender & Minority Health Data

http://www.cdc.gov/women/
http://www.cdc.gov/men/
http://www.cdc.gov/minorityhealth/
THANK YOU!!