



JOHNS HOPKINS  
CENTER *for* HEALTH EQUITY

# Why Are Health Disparities Everyone's Problem?

**Lisa A. Cooper, MD, MPH**

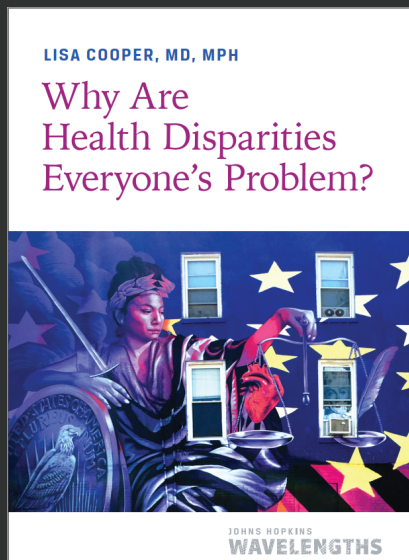
Bloomberg Distinguished Professor

James F. Fries Professor of Medicine

Johns Hopkins Schools of Medicine, Nursing and Bloomberg School of Public Health

Director, Johns Hopkins Center for Health Equity

@LisaCooperMD @JHhealthequity

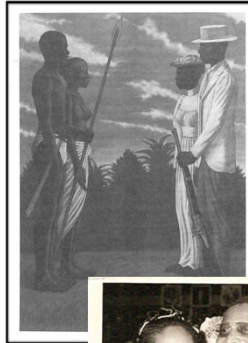


“The unique experiences Dr. Cooper brings to this unprecedented moment of the intersection of community health and racial reckoning make *Why Are Health Disparities Everyone's Problem* not only an essential read but a central question for our time.”

– Marc H. Morial, President/CEO, National Urban League

Available June 29th on Amazon.com

## Where It All Began



## From Health Disparities to Health Equity

### Health Disparities

“...preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations” <sup>1</sup>



### Health Equity

“When every person has the opportunity to ‘attain his or her full health potential’” <sup>2</sup>

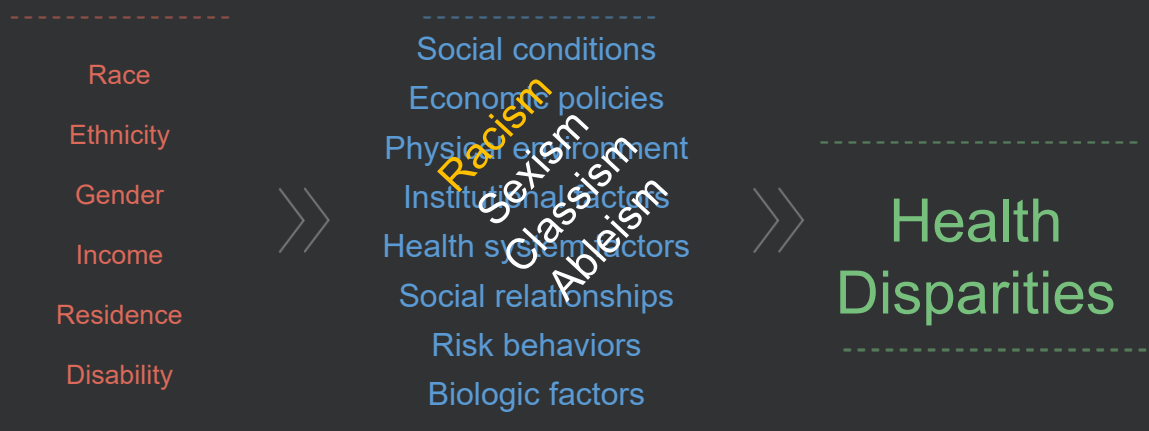
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1. Community Health and Program Services (CHAPS): Health Disparities Among Racial/Ethnic Populations. U.S. Department of Health and Human Services; 2008.
2. Whitehead M, Dahlgren G. Levelling Up (Part 1): A Discussion Paper on Concepts and Principles for Tackling Social Inequities in Health. World Health Organization. Available at <http://www.euro.who.int/document/e89383.pdf>.



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## The Sources of Health Disparities



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 Adapted from King G and Williams DR. 1995. Race and Health. In: Society and Health. Amick, Levine, Tarlov, Walsh (eds):  
 Oxford Univ Press and Warnecke RB et al. Am J Public Health 2008 Sep;98(9):1608-15.

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# Five Miles Apart

In **Baltimore**, even **5 miles** makes a world of difference ...

## ROLAND PARK

79.5% WHITE

INCOME: \$90,492

UNEMPLOYMENT: 3.4%

HOMICIDE RATE: 4.1/10,000

**LIFE EXPECTANCY:**  
83.1 Years

## MADISON/EAST END

91.1% BLACK OR AFRICAN AMERICAN

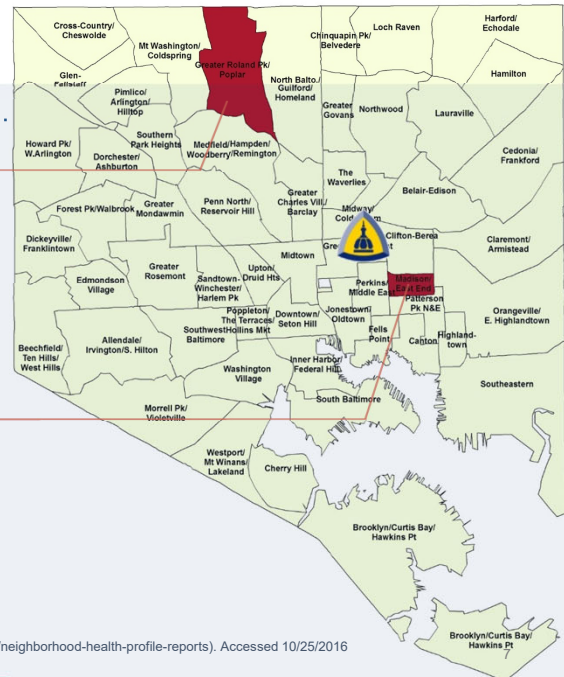
INCOME: \$30,389

UNEMPLOYMENT: 14.4%

HOMICIDE RATE: 46.3/10,000

**LIFE EXPECTANCY:**  
64.8 Years

Source: Baltimore City Neighborhood Health Profile Reports 2011 (<http://health.baltimorecity.gov/neighborhoods/neighborhood-health-profile-reports>). Accessed 10/25/2016



# The Personhood of Patients



## The Patient-Physician Relationship



## Race and Ethnic Diversity of Nurses and Physicians vs. the U.S. Population

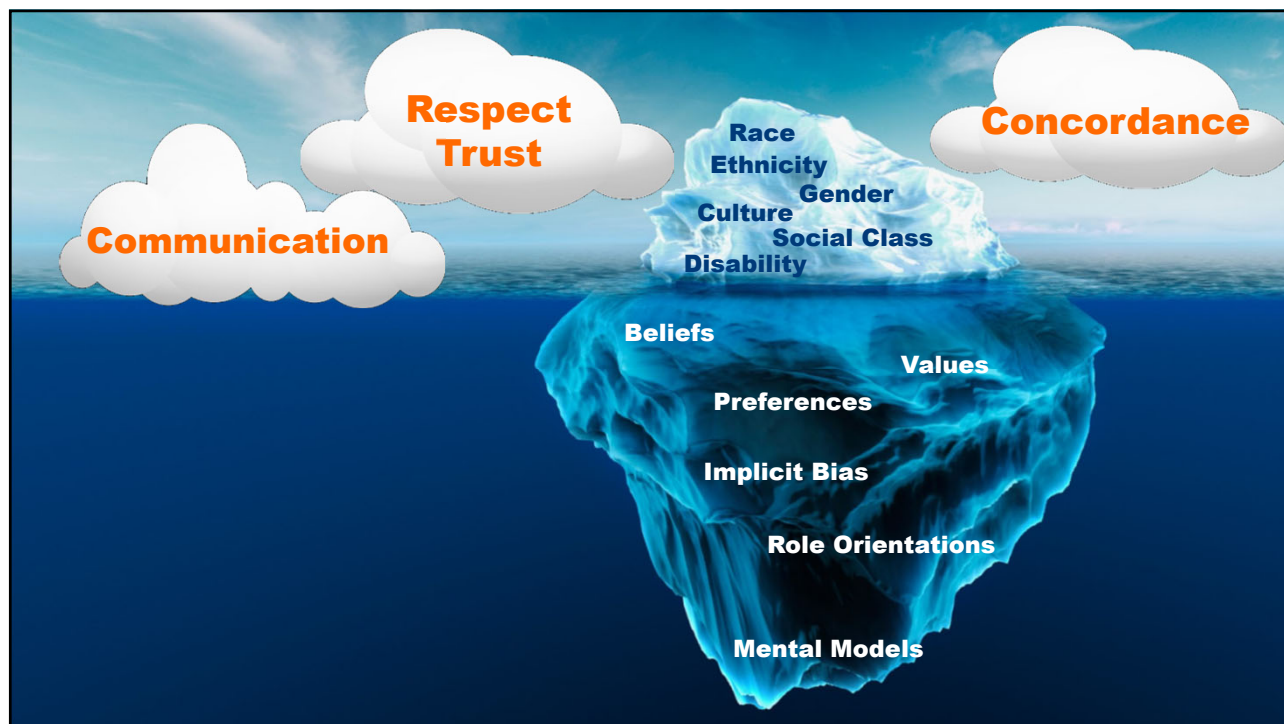
Group	White	Asian	Black	Hispanic	American Indian
US population <sup>1</sup>	61.1	5.4	12.3	17.8	0.7
Primary Care Physicians <sup>2</sup>	61.4	21.1	7.3	7.6	0.4
Psychiatrists <sup>2</sup>	77.9	12	7.3	6.0	0.6
Registered nurses <sup>3</sup>	80.8	7.5	6.2	5.3	0.4

1. American Community Survey, [datacensus.gov](https://data.census.gov)

2. AAMC, 2018

3. The 2017 National Nursing Workforce Survey





## Developing Solutions to Health Disparities

- The Triple P Study –  
 Patient-Physician Partnership  
 to Improve High Blood  
 Pressure Adherence



-  **THE BRIDGE STUDY**  
 Blacks Receiving Interventions  
 for Depression and Gaining  
 Empowerment



# Johns Hopkins Center for Health Equity

## MISSION

Promote equity in health for socially at-risk populations through:

1. Advancing scientific knowledge
2. Educating and training leaders
3. Partnering with communities
  - Raising public awareness of health inequities
  - Promoting sustainable changes in practice and policy



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## FRAMING HEALTH MATTERS

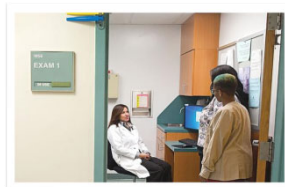


### Creating a Transdisciplinary Research Center to Reduce Cardiovascular Health Disparities in Baltimore, Maryland: Lessons Learned

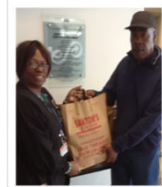
Lisa A. Cooper, MD, MPH, L. Ebony Boulware, MD, MPH, Edgar R. Miller III, MD, PhD, Sherita Hill Golden, MD, MHS, Kathryn A. Carson, ScM, Gary Noronha, MD, Mary Margaret Huizinga, MD, MPH, Debra L. Roter, DrPH, Hsin-Chieh Yeh, PhD, Lee R. Bone, BSN, RN, MPH, David M. Levine, MD, ScD, MPH, Felicia Hill-Briggs, PhD, Jeanne Charleston, BSN, RN, Milyong Kim, PhD, Nae-Yuh Wang, PhD, Hanan Aboumatar, MD, MPH, Jennifer P. Halbert, MSPH, Patti L. Ephraim, MPH, and Frederick L. Brancati, MD, MHS



Cooper LA et al.  
*Implement Sci.* 2013 Jun 4;8:60



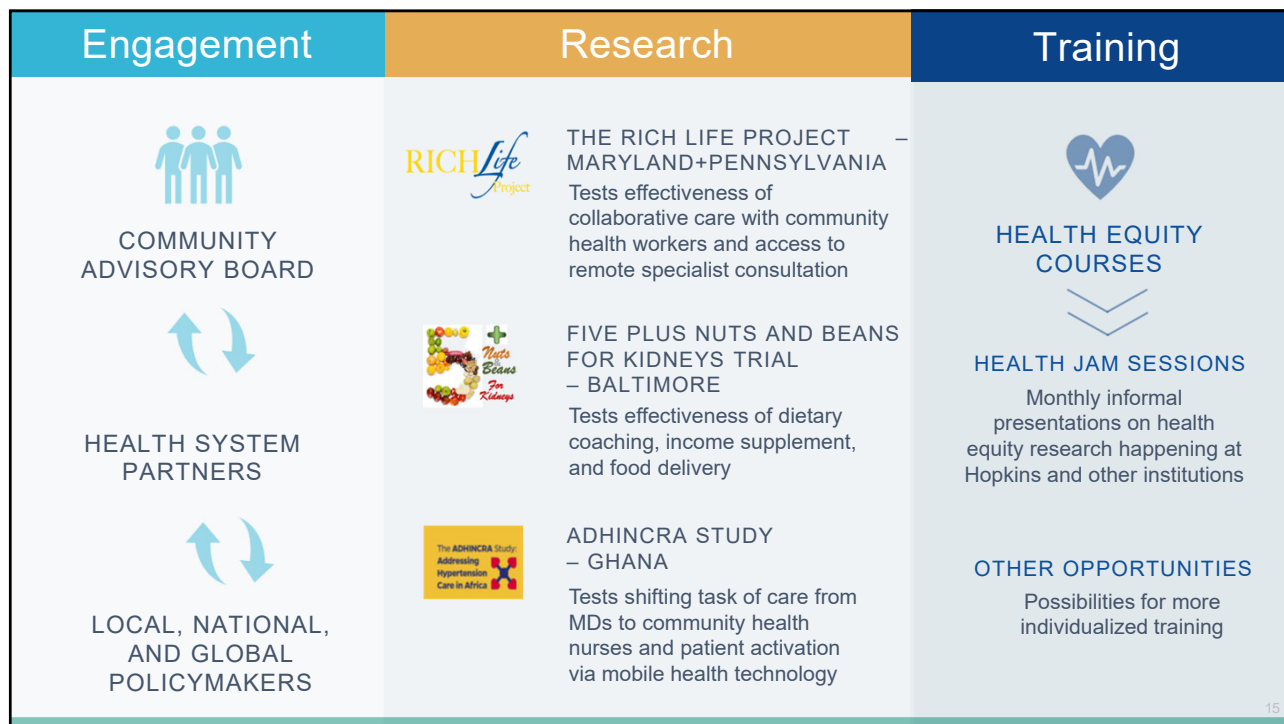
Miller ER et al,  
*Am J Prev Med.* 2016;50(1):87-95



Boulware LE et al.  
*J Gen Intern Med.* 2020 ;35(1):142-152



Cooper LA, et al. *Am J Public Health* 2013 Nov; 103(11):e26-38.



## Using Community-Based Participatory Research Principles to Achieve Our Goals





# A Global Perspective on Health Equity



## Health Equity in the Era of COVID-19 A New Kind of “Herd Immunity”

**POLITICO THE AGENDA**  
OPINION | CORONAVIRUS

### A Game Plan to Help the Most Vulnerable

It won't be enough to wear face masks and use Zoom. Here's what we really need to do.

**JAMA Forum**  
April 1, 2021

### What the American Rescue Plan Means for Health Equity

Lisa A. Cooper, MD, MPH<sup>1,2,3</sup>, Joshua M. Sharfstein, MD<sup>3,4</sup>, Rachel L.J. Thornton, MD, PhD<sup>2,4</sup>

<sup>1</sup> Author Affiliations | <sup>2</sup> Article Information

JAMA Health Forum. 2021;2(4):e210658. doi:10.1001/jamahealthforum.2021.0658

**WEBINAR**  
THE COLOR OF COVID-19 IN MARYLAND:  
Contrasting Racial and Ethnic Health Disparities  
During a Global Pandemic  
Thursday, April 30 | 7:30pm - 8:45pm EST  
Watch at [www.facebook.com/UMD.SPH](http://www.facebook.com/UMD.SPH)

**UNITED STATES SENATE**

**LEGISLATIVE BLACK CAUCUS**  
EST. 1970

**INSIGHTS with KWEISI MFUME**  
Health Disparities, Death & COVID-19  
Join Us Thursday April 29th, 7:00 PM  
@BloombergCites

**BLOOMBERG HARVARD** | City Leadership Initiative  
Lisa A. Cooper, MD @LisaCooperMD  
I spoke to hundreds of local leaders at @BloombergCites COVID-19 local response Initiative session yesterday: Racial disparities require 'urgent attention,' health expert says by @BloombergCites

**NEWS RELEASE**  
NATIONAL URBAN LEAGUE  
**STATE OF BLACK AMERICA**

**JOHNS HOPKINS REPORT**  
COVID-19 By the Numbers

**JOHNS HOPKINS CENTER FOR HEALTH EQUITY**  
Health Equity Learning Network Webinar:  
Care of Socially At-Risk Patient Populations during the COVID-19 Outbreak  
Lisa A. Cooper, MD, MPH  
Jill Marselle, PhD, MPP  
Tony Biemys, MD, MPH

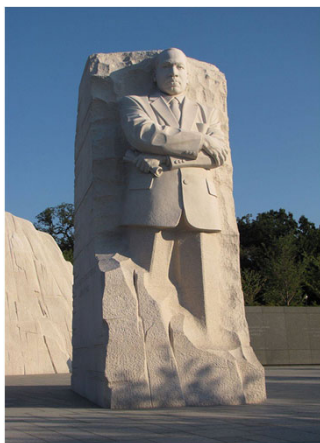
**CNN Newsroom** - Dr. Lisa Cooper  
GLOBAL PANDEMIC  
BOSTON OPENS CLINIC TO TREAT HOMELESS WITH SIGNS OF CORONAVIRUS

**SCIENCE**  
COVID-19  
How Can I Protect Myself and Others?

**ADDRESSING RACISM to SAVE LIVES**

## Take-Home Points

### 1. Health inequities harm us all because everyone's health is interconnected



*Injustice anywhere  
is a threat  
to justice everywhere.*

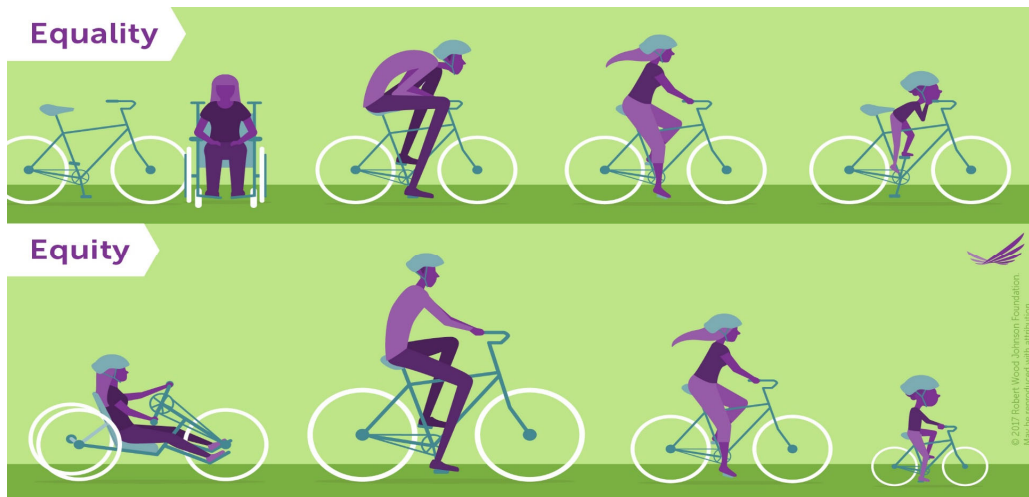
- Dr. Martin Luther King, Jr.  
*The Letter from Birmingham City Jail*  
April 16, 1963

## 2. Health equity improves conditions for everyone

- Reduces poverty
- Fosters social solidarity
- Reduces political conflict
- Saves money
- Saves lives



## 3. Equality is not equity



What You Can Do to Take Action for Health Equity: <https://www.rwif.org/en/library/features/achieving-health-equity.html>

## **4. Research has identified programs and policies that advance health equity:**

1. Create “communities of opportunity”
2. Build more health into the delivery of health care
3. Raise awareness and build empathy, support and political will to address inequities

Williams DR, Cooper LA. Reducing Racial Inequities in Health: Using What We Already Know to Take Action  
Int J Environ Res Public Health. 2019;16(4):606.

## **5. Addressing health disparities requires leaving our comfort zones and building strong relationships with others**

- Meeting people where they are and valuing their humanity
- Earning trust through trustworthiness
- Communicating clearly and consistently
- Building concordance
- Enhancing diversity and inclusion
- Interrupting the path between biases and behaviors

## 6. We each have a role to play

- No one person or group can solve the disparities conundrum
- We need strong and effective partnerships:
  - Scientists working together across different disciplines and bridging their work to the public
  - People working across racial, ethnic, cultural, religious, social, and political differences
  - Organizations working across sectors – locally, nationally, internationally
- We must learn from one another and jointly develop and implement solutions that will lead to real changes in organizations, communities, and nations

If you want to go **fast**,  
go **alone**...



STELLENBOSCH UNIVERSITY BOTANICAL GARDENS,  
STELLENBOSCH, SOUTH AFRICA

...if you want to go **far**,  
go **together**. - African proverb



HEALING, HEALTH, PEACE + JUSTICE IN 2020  
Making big leaps towards #HealthEquity for All



JOHNS HOPKINS COMMUNITY ADVISORY BOARD  
BALTIMORE, MARYLAND





JOHNS HOPKINS  
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# THANK YOU!

Want to learn more about our work?



[www.healthequityhub.org](http://www.healthequityhub.org)



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