Health Equity Video Transcript: Dr Burton

Social determinants of health affect risk for and health outcomes associated with the diseases and conditions addressed through our center's work. When social determinants of health are unfairly distributed in society, they also can contribute to health inequities. These factors can also make it difficult to access employment that provides health insurance.

Reliable transportation is not a given for everyone. Lack of transportation can make it challenging to get to doctor's appointments or to pick up prescriptions. Stigma, racism, and discrimination affect health in many ways, including lack of equitable access to the healthcare system. This puts individuals at risk for certain diseases and can result in long term health issues.

Addressing social determinants of health is important for preventing illness, improving health outcomes and increasing health equity. Our research shows that we save lives with screening and prompt treatment, but many people face barriers to prevention and care services. We must ensure that all people are able to benefit from health and other services needed to live healthy and full lives.

NCHHSTP's current work in ensuring that health equity is integrated in all that we do builds on our long history of funding, programs and research to address health disparities and social determinants of health. All five divisions within the center have structures focusing on promoting health equity and addressing social determinants of health.

We incorporate social determinants of health into numerous surveillance systems, as well as AtlasPlus, which is our online tool that allows users to visualize and map the diseases and conditions of this center. As well as map certain social determinants of health. We also maintain public webpages with resources and best practices related to health disparities and social determinants of health. At the core of what we is our support of our partners, as they work to address barriers to health in their communities.

During my medical training in Baltimore, Maryland, and Oakland, California, I was deeply impacted by seeing the recurrent health challenges facing community residents without safe or stable housing, economic opportunities, or consistent access to primary care services. It was clear that societal barriers were keeping many residents from experiencing healthy and full lives, and those barriers were creating and maintaining dramatic health disparities. I decided then to focus my career on eliminating the unjust and avoidable health disparities that are rooted in our social structures. I believe this work is both central and essential to public health.