



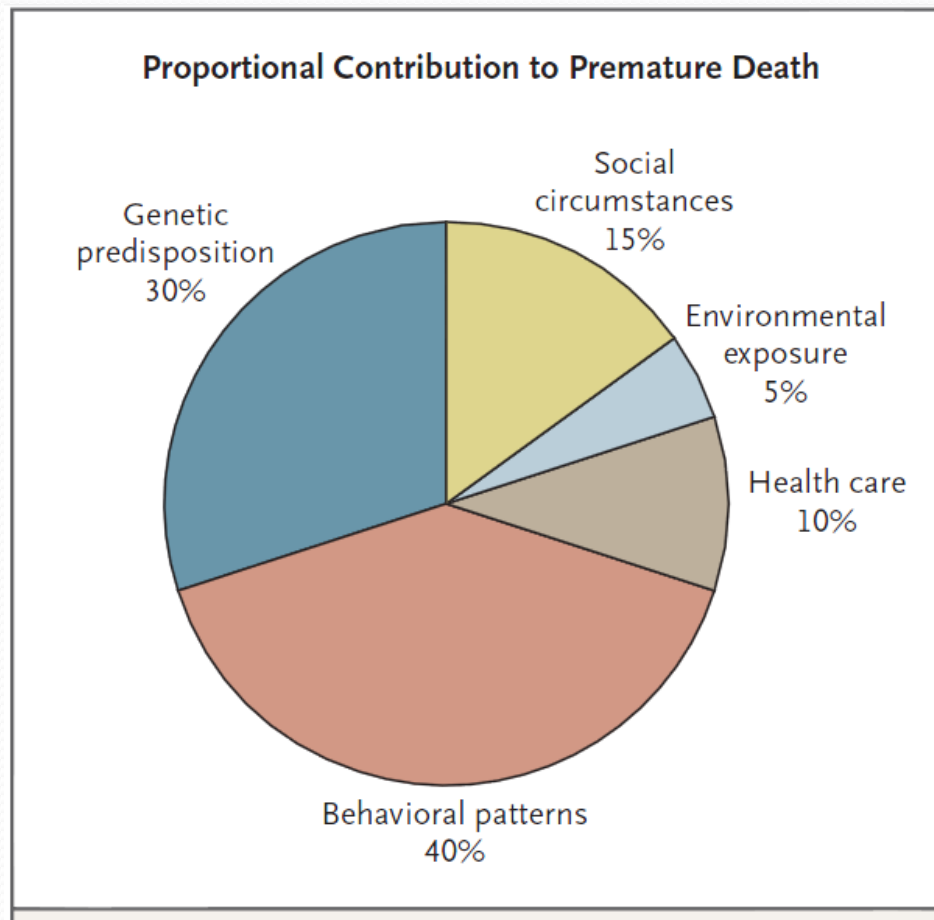






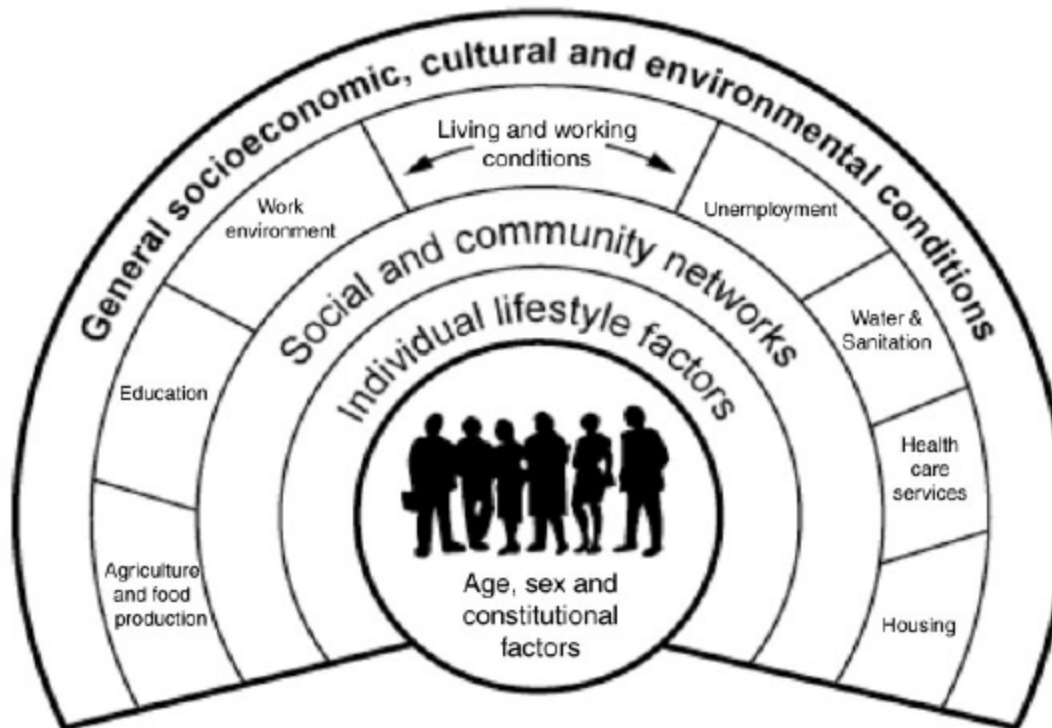


# Determinant of Health



Schroeder, S.A., 2007 (from McGinnis, et. al., 1993)

# Social Determinants of Health



# Why this course?

- Culture is key to health

## Goal 2

“Healthcare providers have the knowledge and tools to screen, diagnose and treat the whole person with a disability with dignity”

**Surgeon General’s call to action to improve the  
Health and wellness of persons with disabilities  
2005**



# Demography

 58 million Americans with disabilities...  
1 in 5 (20% of the population)

 20 million families have at least  
one (1) member with a disability

 African American, American Indians and Alaska  
natives have more percentage of disability than  
any other population

# Healthy People 2020

“Increase the proportion of U.S Master of Public Health (M.P.H) programs that offer graduate level courses in disability and health”

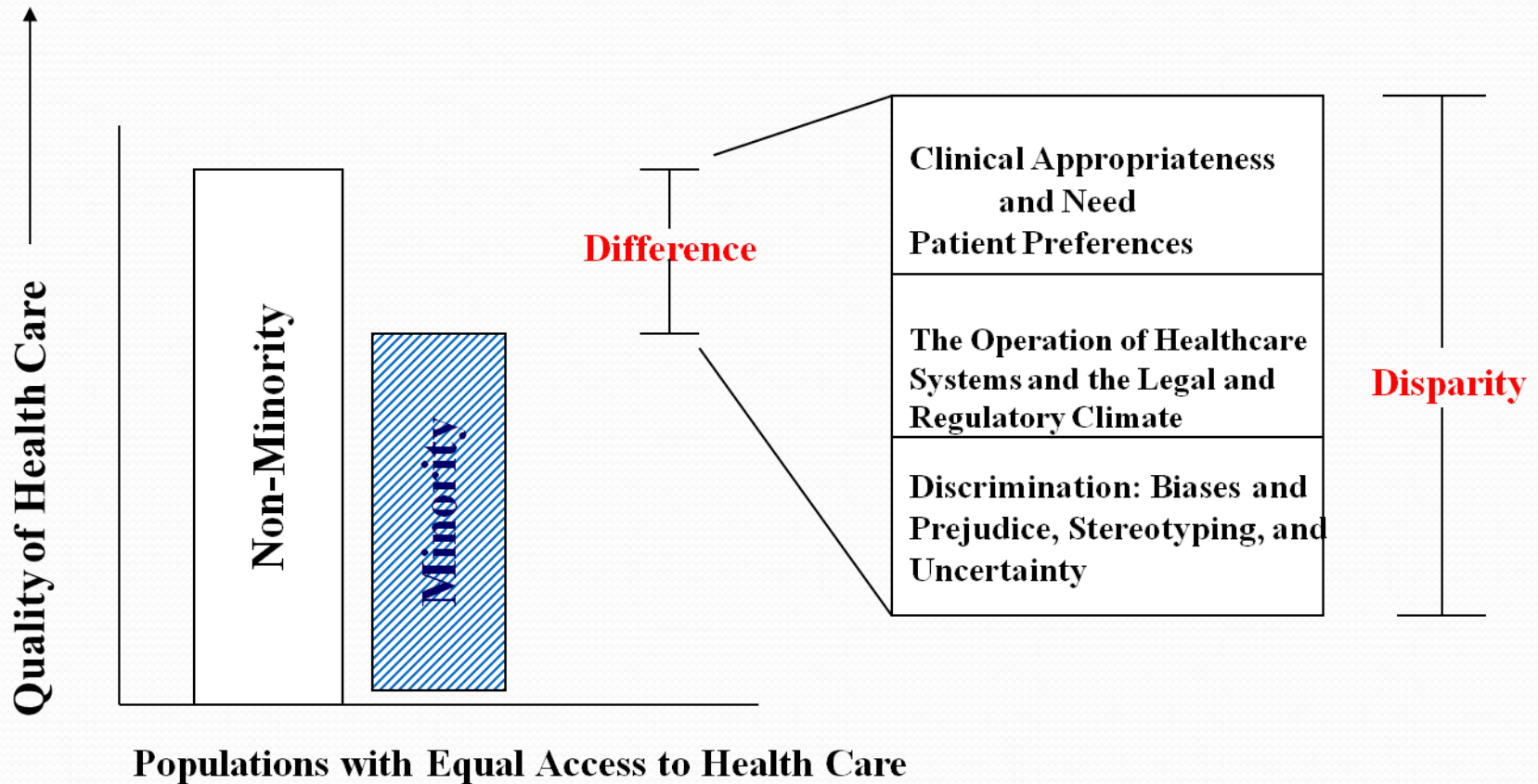
# ADA Healthcare requirements

## **Section 504 of the Rehabilitation Act**

- Reasonable Accommodations
- Program Access
- Effective Communication
- Facility Access

# Differences, Disparities, and Discrimination:

## Populations with Equal Access to Health Care



Source: Unequal Treatment IOM 2003

# Course Content

- Core content
  - Foundations in disparity
  - Foundations in disability
  - Foundations in culture and race
  - Cultural competence
  - Americans with Disabilities Act healthcare provisions

# Course Content

- **Major life activities**
  - Healthcare screening
  - Sexual health
  - Obesity
  - Oral health

# Course Content

- **Dual disparities**
  - Institutionalization
  - Substance use
  - Housing
  - Employment
  - Hate crimes

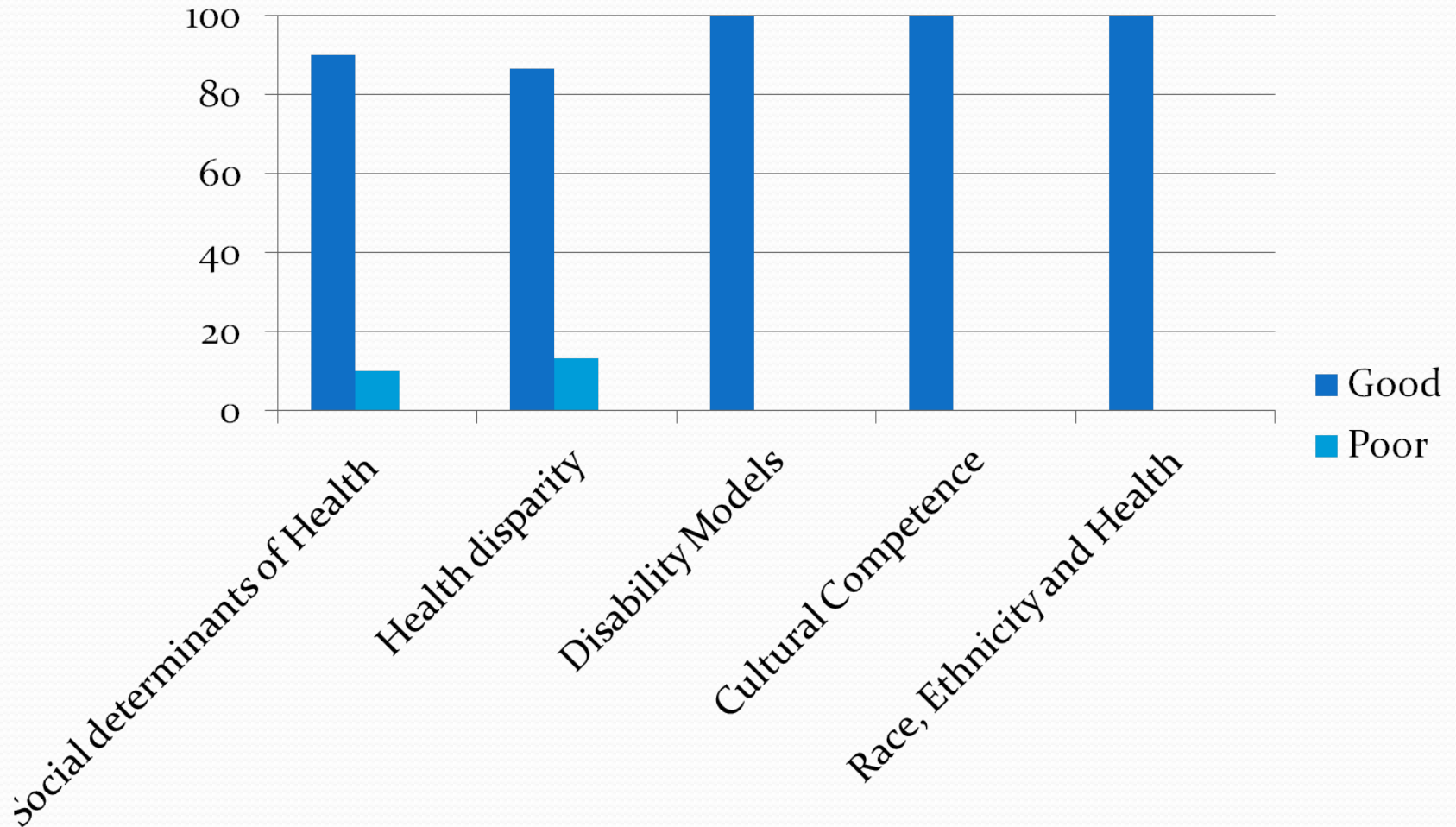




# Study Methodology

- Mixed method cross-sectional study
  - Survey (14 questions questionnaire; likert scale )
  - One focus group discussion ( 90 mins)
- Sample size
  - Six students (a third of the MPH class)
- Analysis
  - Nvivo 9 soft ware
  - Descriptive data analysis

# Level of Knowledge acquired from MPH 703



# Themes from Qualitative data

- **Social determinants of health**

- “Less educated people don’t have the knowledge to do what they need to do to remain healthy”

- **Models of disability**

- “Traditional disability model tries to cure disability while contemporary models focuses on better health outcome for a person living with disability”
- “Some disability may never be cured so equipping people with utensil that can help them to have a better health outcome seems more reasonable”

- **Race and ethnicity**

- “Race and disability means double jeopardy ---like double disparity for the person involved”
- “African American person with a child living with disability will keep their child at home or hide them while a Caucasian family may take their child living with disability everywhere”
- “Caribbean blacks do not eat fried chicken---- looking at every black or Latino groups as the same does not help health outcomes since there are different cultural units in these groups”

# Themes from Qualitative Study

- **Source of disability health knowledge**
  - “We learned new information, disability information from this course helped us to apply the background knowledge we had”
  - “Had a lot of new information—it puts a lot of stuff into perspective”
- **Recommendation for course improvements**
  - “Needed more mental health facility information”
  - “It was great , I won’t change anything”
  - “It was great having several speakers especially the sexologist from GSU”

# In future

- Addressing Health Disparities at the intersection of disability, race and ethnicity using electronic course
- Grant submitted to National Institute for disability Rehabilitation and Research (NIDRR)

# Appreciation

- Dr David Satcher
- Dr Mitchell Tepper
- Dr Dan Crimmins
- Dr Harry Heiman
- Dr Yvonne Fry-Johnson
- My MPH students



# Questions