

## **LWVO Health Equity Study: Definitions:**

### **Health** (from [Constitution of WHO: principles - World Health Organization](https://www.who.int/about/mission/en/))

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**Health** is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

### **Health Disparities** (From the CDC <https://www.cdc.gov/healthyyouth/disparities/index.htm>)

Health disparities are 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> Populations can be defined by factors such as race or ethnicity, gender, education or income, disability, geographic location (e.g., rural or urban), or sexual orientation. Health disparities are inequitable and are directly related to the historical and current unequal distribution of social, political, economic, and environmental resources.

Health disparities result from multiple factors, including

- Poverty
- Environmental threats
- Inadequate access to health care
- Individual and behavioral factors
- Educational inequalities

From [Public Health Rep.](#) 2014 Jan-Feb; 129(Suppl 2): 5–8.

Health disparities adversely affect groups of people who have systematically experienced greater social or economic obstacles to health based on their racial or ethnic group, religion, socioeconomic -status, gender, age, or mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.”

### **Health Equity** (From [Public Health Rep.](#) 2014 Jan-Feb; 129(Suppl 2): 5–8. )

Health equity means social justice in health (i.e., no one is denied the possibility to be healthy for belonging to a group that has historically been economically/socially disadvantaged). Health disparities are the metric we use to measure progress toward achieving health equity.

### **Population Health** (from the Health Policy Institute of Ohio November 2014,

<https://www.healthpolicyohio.org/what-is-population-health/>)

Population health is the distribution of health outcomes across a geographically-defined group which result from the interaction between individual biology and behaviors; the social, familial, cultural, economic and physical environments that support or hinder wellbeing; and the effectiveness of the public health and healthcare systems

### **Public Health** (from The American Public Health Association <https://www.apha.org/what-is-public-health>)

Public health promotes and protects the health of people and the communities where they live, learn, work and play. Public health works to track disease outbreaks, prevent injuries and shed light on why some of us are more likely to suffer from poor health than others. The many facets of public health include speaking out for laws that promote smoke-free indoor air and seatbelts, spreading the word about ways to stay healthy and giving science-based solutions to problems. Public health saves money, improves our quality of life, helps children thrive and reduces human suffering.

**Social Determinants of Health or SDOH**( from <https://www.kff.org/disparities-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/> )

Social determinants of health are the conditions in which people are born, grow, live, work and age. They include factors like socioeconomic status, education, neighborhood and physical environment, employment, and social support networks, as well as access to health care

**Faith-based organizations (FBO)**( from Sharing a Legacy of Caring - <https://nccc.georgetown.edu/documents/faith.pdf>

- Faith-based organizations are any groups/organizations created by or for a religious or spiritual group including, but not limited to, individual places of worship, groups of community or tribal elders/spiritual leaders, intra- or interdenominational community coalitions, faith connected health and human service agencies, denominational hierarchies/governance bodies, religious orders and schools of divinity. FBOs may be categorized in 3 groups (1) congregations; (2) national networks, which include national denominations, their social service arms (e.g., Catholic Charities, Lutheran Social Services), and networks of related organizations (such as YMCA and YWCA); and (3) freestanding religious organizations.

<https://www.huduser.gov/portal/publications/faithbased.pdf>

