

Because Social Science Is Necessary to Achieve Health Equity

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Living in an America in which all populations have an equal opportunity to live long, healthy, and productive lives is the vision of the National Institute on Minority Health and Health Disparities. As we bring National Minority Health Month to a close, it is important to remember that not all groups have obtained health equity. Racial and ethnic minorities, rural residents, people with disadvantaged socioeconomic resources and sexual and gender minorities carry a disproportionate burden of illness and disease. The search to determine the best way to reduce health disparities and to achieve health equity remains challenging for all of us.

The potential to live longer and healthier lives is greater than ever before with the emergence of medical and technical advances in healthcare and the adoption of healthier lifestyles. Despite these advances, health disparities continue to persist. A health disparity, defined as a health difference that adversely affects disadvantaged populations, based on one or more health outcomes, results from a series of complex and interrelated factors. To truly reduce and ultimately eliminate health disparities a framework must be applied that can address the multifaceted underlying causes of the disparity.

The social sciences have provided the very frameworks necessary for understanding the complexity of health disparities. Health, which is at the center of health disparities, is a combination of interactions among biological pathways, individual behavior, social interactions, physical or built environment, and the intersections with the health care system. Research to date shows that the development and maintenance of disease cannot be explained solely by genes and biological mechanisms. Behavioral and social factors are just as crucial to understanding the trajectory of health disparities as those contributed by biology. Important research questions such as adherence to treatment regimens, patient and clinician racial/ethnicity or gender match and its effects on health outcomes, and the interaction of chronic stress and health behaviors in development of disease are all derived out of social science theory.

The examination of where we work, live, and play, also known as the social determinants of health (SDOH) has taken a prominent role as a contributor to differences in health outcomes for health disparity populations. SDOH sit at the intersection of where social science theory and research methodology are applied to the practice of public health. Given the public health concern that continues to arise as health disparities persist, despite a myriad of targeted interventions to address them, NIMHD is committed to ensuring that all factors contributing to the etiology of health disparities are recognized.

Specifically, NIMHD recently published online a <u>research framework</u> that encompasses domains and levels of influence.

The framework is a direct example of the utility of social and behavioral sciences, as the areas of research that can be addressed follow a systems-level approach to health disparities. Systems-level approaches encompassing individual to societal factors is a cornerstone of social theory. Examples of the types of social science studies that recently have been supported by NIMHD include:

- ◊ Influence of social networks on post-neonatal infant mortality disparities
- Maternal stress and its effects on infant development
- Self-management educational programs to address health disparities among patients with systemic lupus erythematosus
- Improving chronic illness management with the Apsaalooke Nation
- Assessing in-session communication patterns to improve adolescent health
- A Community Based Participatory Research intervention for improving colorectal cancer screening among underserved Vietnamese Americans
- A Strength-based, Suicide Prevention intervention for Native Communities

Moving forward NIMHD will continue to support behavioral and social science research as part of the larger and complex study of health disparities. The heightened interest in SDOH is the beginning of the discussion as it brings the importance of community and environment into the conversation of health. To successfully generate high-impact health disparities research, biomedical, social, and behavioral sciences must be integrated.

So why social science? Because it is necessary to address health disparities and to achieve health equity.



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