



Social Determinants of Health in Multnomah County



Public Health
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Executive Summary

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Human health status is typically thought to be the result of interactions between an individual's physiology and the person's health-related choices i.e. whether or not she chooses to smoke, exercise, eat healthy foods etc. More recently there has been a growing recognition that health is the result of the interplay between factors affecting a person's life long before the health behaviors or physiological problems that immediately precede illness. These social determinants of health are examined in the following series of publications on the economy, transportation, and neighborhood context. The reports examine how these factors exert an early and powerful influence on human health in Multnomah County as well as the implications for policies aimed at improving our community's health.

What are Social Determinants of Health?

Consider the following excerpt from an article published in "The Oregonian" newspaper which describes the challenges of a resident of northeast Portland in accessing a grocery store.

"The closest grocery stores are more like mirages. No bus lines or sidewalks lead to one of the two in her neighborhood, and Calderon can't drive there because she can't afford a car. She could take a bus to the other, but she can't afford the food.

...It's after 5 p.m. on a Friday. Calderon and her daughter, Amelia, wait for the No. 72 bus...the closest markets are convenience stores. ...At one, the pro-

duce section amounts to a few bruised tomatoes, limes and jalapenos. The other charges \$4.89 for a gallon of milk, about \$2 more than a regular supermarket.

... Amelia explains that supermarkets along other routes would be miles closer, but the trips require time-sucking transfers. Even along this route, the Calderons pass three supermarkets before they reach WinCo. They can't afford them. They live on one income, and ... food stamps buy their groceries.

Calderon spins through WinCo's bustling produce section first. Into her cart she throws [fruits and vegetables that account for] ... about 7 percent of the fruit and 22 percent of the vegetables her household needs each month to meet the USDA dietary guidelines for good health and disease prevention,...

... If she lived closer to affordable groceries, Calderon says, she'd buy more fruits and vegetables because she wouldn't worry about them spoiling. ... Lesli and Amelia pack their groceries into their traveling cart ...it's nearly 9 p.m. when they unload their food at home."

This article illustrates the powerful influences of economics, employment, transportation, and urban planning on the food choices made by the woman featured in the story. The educational attainment of the family members, their working conditions, or the physical and social characteristics of their neighborhood may provide additional explanations for their

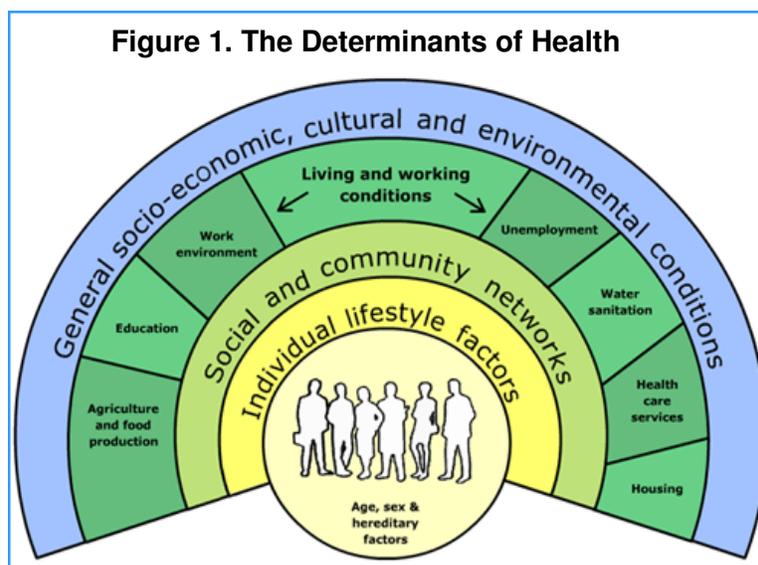
nutritional choices. Taken together, the family's social, and consequently their living conditions, may contribute to the lack of affordable, accessible and healthy food options, poor individual eating habits, or sustained high stress levels that lead to poor health outcomes. In a similar way, social conditions may prevent people from making other lifestyle choices such as regular exercise.

By the time an individual arrives at a doctor's office with signs of chronic disease such as diabetes or heart disease, a combination of life factors has already imposed its influence on the individual's health. The illness may be treated in a doctor's office, but prevention of these diseases must also address root causes or social determinants of health that affected the patient earlier in life. Traditional public health policies have encouraged health screenings, childhood vaccines, or regular exercise – strategies that focus on individual behavior and choice. However, a broader approach would expand the policy focus to social issues such as improving high school graduation rates, increasing employment opportunities, building sidewalks that connect residential areas to affordable full service grocery stores, or improving transit options to connect people to amenities more readily. Addressing any of these social determinants of health will result

in an indirect but tangible benefit to human health.

The unequal impact of Social Determinants of Health

Although we are all affected by social determinants of health, those who occupy lower positions in social hierarchies are, in general, more exposed and more vulnerable to the negative health effects of these determinants of health. Within any society there are social gradients. These hierarchies may be seen in income levels, educational attainment, race/ethnicity, age, or other factors. In communities with the greatest income disparity between rich and poor, the overall health of the community is typically worse relative to the health of communities where there is greater equity in the distribution of power and resources. When compared with persons at the higher levels of social hierarchies those who occupy positions lower are more likely to suffer ill health when there is an adverse impact on living and working conditions. A person's position on a social ladder appears to be associated with their resilience in the face of adverse life events and their ability to stave off ill health. This is a well known phenomenon but the mechanism by which social determinants of health can have a greater adverse impact on those who are lower in a



Source: Dahlgren G & Whitehead M. Policies and strategies to promote social equity in health. Stockholm: Institute of Future Studies, 1991.

given social hierarchy is not well understood.

Beyond addressing the living and working conditions and lifestyles that ultimately affect our health, social and health policy must also address inequity that leads to poor health in certain segments of our community. Inequities are unjust or unfair distinctions between populations that leave some communities at a disadvantage. Successful health policies will be those that provide appropriate opportunities for each segment of our society, especially those who are politically and materially worse-off, to achieve equality in health status.

A large body of literature on the determinants of

health indicates that of all factors that affect health including genetics, individual choice, and the environment, social determinants can have some of the most significant and far-reaching effects on human well being. Along with a growing awareness of the importance of social determinants of health and the non-traditional policies needed to achieve better health for all, we continue to recognize that individual health-related choices also play a role in determining health outcomes. With this understanding, we invite the reader to explore the following reports on social determinants of health that describe county-wide influences on health while bearing in mind the continuing relevance and importance of health promotion activities that focus on the individual.

Summary of findings and recommendations

The Economy

Research has shown that economic factors are among the most powerful determinants of an individual's health. Economic conditions contribute to the availability of jobs, level of pay, and consequently, the ability of an individual to meet basic needs. Unemployment or underemployment due to poor economic conditions also contributes to psychological stress that can undermine physical health. Aside from the wealth of any single individual in our community, the distribution of wealth in our society can also contribute to the health status of residents.

Even before the current recession, in Multnomah County the overall growth in the economy through 2007 did not translate into prosperity at the individual level. Median household income declined between 1999 and 2007 even as the economy grew statewide. During the same period, cost of living rose meaning that residents in the county paid more each year to maintain the same standard of living. The decline in the ability of individuals to afford the cost of living in our community was felt most strongly by household-

ers who are younger than 25 years, older than 65 years, single mothers, African Americans or Hispanics.

Wages from many jobs in Multnomah County have not kept pace with the increase in cost of living. A full time job at minimum wage in the Portland metro area earns roughly 25% of a living wage that would allow residents to meet their basic needs including housing, food, clothing, child care, health care, transportation, and taxes. Employment projections indicate that service industry jobs will grow the fastest in coming years, many of which pay less than a living wage for a family of four. This includes jobs in food service and preparation, personal care and service, buildings and grounds maintenance, and healthcare support.

Economic forces that increase the gap between the highest and lowest income brackets in a community are detrimental to the health of all residents in that community. In Multnomah County there is a marked gap between the total income earned by the richest and poorest residents. Of the aggregate household

income earned by all county residents in 2007 about half was earned by a fifth of the county's population.

Short-term efforts that can alleviate the adverse effects of a depressed economy include providing public assistance to unemployed, low income residents,

Transportation

Built environment decisions directly and indirectly affect human health by influencing a variety of physical, environmental, and social factors. Sound policies such as those that created the Urban Growth Boundary reduce sprawl, provide for variety in transportation and housing choices, and promote community cohesion. In the Portland area, 30% of residents work within three miles of the central business district. Only 19% work more than ten miles from the city center compared to an average of 35% across the largest 100 metropolitan areas. In addition, Portland ranks the tenth most walkable of 40 U.S. cities and number one in bicycle commuting.

Despite Portland's low levels of sprawl and positive reputation for biking and walking, the overwhelmingly favored means of commuting continues to be driving to work. In Multnomah County, 75% of commuters drive to work and 64% of commuters drive alone. Among the challenges caused by motor vehicle travel are the effects on air quality and the potential

Neighborhood Context

The physical and social conditions of neighborhoods can be a strong influence on the health of the area's residents.

Neighborhoods and housing can affect residents' exposure to physical danger (e.g. high traffic streets), disease (e.g. rodent-borne pathogens), or crime. In the Pacific Northwest, one of the greatest concerns in terms of the physical condition of housing is mold.

child care options for parents seeking employment, job training that qualifies residents for available jobs, and expanding earned income tax credits. In the long term, investment in public education is a key, research-based strategy for improving the health of both the economy and the community.

for motor vehicle crashes. Motor vehicles are the largest sources of cancer-causing and non-cancer causing air pollutants in Multnomah County. In addition, motor vehicle related deaths continue to be a leading contributor to unintentional injury deaths in Multnomah County.

Recommendations for improving the use of active modes of transportation and, consequently increasing physical activity among county residents, include investment in bicycle and sidewalk infrastructure including safer and more attractive walking/bicycling connections to transit stops and increased funding for public transit. Conducting health impact assessments of transportation policies and projects can contribute to more informed decision-making about healthy transportation systems.

According to the most recent American Housing Survey (2002) 18% of housing units in the Portland metropolitan area suffered from leakage. These houses are at greater risk for experiencing mold problems due to constant dampness and, consequently, the occupants may be more likely to experience respiratory problems such as asthma.

Neighborhoods located near freeways or busy streets

are more likely to experience poor air quality and increased risk of respiratory illness and chronic disease.

Adverse social conditions in a neighborhood setting can effect stress levels among residents and, with sustained, high stress levels, their physical health also suffers. Willingness of residents to contribute their time and efforts for the benefit of the neighborhood, higher levels of trust among neighbors, a strong social network, and willingness to participate in civic organizations are all linked to improved health outcomes in terms of illness and death.

Indicators of the social context within a neighborhood include the level of trust among residents, volunteerism, and also some physical characteristics of the neighborhood. According to the 2006 Multnomah County Citizen Survey graffiti was either “somewhat of a problem” or a “big problem” for 39% of the re-

spondents. This problem was particularly great in northeast and southeast Multnomah County.

The availability of services within close proximity to neighborhoods is also a factor that contributes to the health of residents. Easy access to transit service, shops, parks, streets with sidewalks or bike paths can all have a positive effect on health by increasing physical activity.

Neighborhood conditions can be improved through efforts to increase access to affordable, quality grocery stores, adding or improving sidewalks and connectivity of neighborhood streets, increasing access to green space, and providing greater opportunities for community organizing, volunteering and other civic activity.



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