# How Social Policies Shape Health: Evidence and Opportunities

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### Centrality of the Social Environment

An individual's chances of getting sick are largely unrelated to the receipt of medical care

Where we live, learn, work, play and worship determine our opportunities and chances for being healthy

Social Policies can make it easier or harder to make healthy choices

#### **Moving Upstream Means**

- Changing the social, physical and economic environments that determine health and risk factors for health
- A complementary approach to individual and group level interventions
- Individuals in the intervention do not enroll and may be unaware of their participation
- May be implemented at low economic costs (removing vending machines or tobacco bans)
- Require political will

#### Not a New Idea

- Improvements in sanitation in early 20<sup>th</sup> century
- Improvements in working conditions and equipment safety
- Seat belts in automobiles
- Laws regarding road safety
- Eliminating lead in paint and gasoline
- Reducing Drunk Driving
- Water Fluoridation

# **Policy Area**

Place Matters!

Geographic location determines exposure to risk factors and resources that affect health.



#### Our Neighborhood Affects Our Health

#### **Unhealthy Community**

VS

#### **Healthy Community**

Unsafe even in daylight





Safe neighborhoods, safe schools, safe walking routes

Exposure to toxic air, hazardous waste





Clean air and environment

No parks/areas for physical activity





Well-equipped parks and open/spaces/organized community recreation

Limited affordable housing is run-down; linked to crime ridden neighborhoods





High-quality mixed income housing, both owned and rental

Convenience/liquor stores, cigarettes and liquor billboards, no grocery store





Well-stocked grocery stores offering nutritious foods



#### Our Neighborhood Affects Our Health

#### **Unhealthy Community**

VS

#### **Healthy Community**

Streets and sidewalks in disrepair

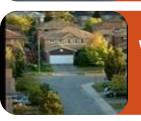




Clean streets that are easy to navigate

Burned-out homes, littered streets





Well-kept homes and tree-lined streets

No culturally sensitive community centers, social services or opportunities to engage with neighbors in community life





Organized multicultural community programs, social services, neighborhood councils or other opportunities for participation in community life

No local health care services





Primary care through physicians' offices or health center; school-based health

Lack of public transportation, walking or biking paths





Accessible, safe public transportation, walking and bike paths

Residential Segregation is an example of a Social Policy that continues to have pervasive adverse effects on health

#### African American Segregation: History -I

- Segregation refers to the physical separation of the races by enforced residence in different areas.
- It emerged most aggressively in the developing industrial urban centers of the South and, as Blacks migrated to the North, it ensured that whites were protected from residential proximity to blacks.
- In both northern and southern cities, levels of black-white segregation increased dramatically between 1860 and 1940 and have remained strikingly stable since then.

Sources: Cell, 1982; Lieberson, 1980; Massey & Denton, 1993.

#### African American Segregation: History -2

#### Segregation was:

- Imposed by legislation
- Supported by major economic institutions
- Enshrined in the housing policies of the federal government
- Enforced by the judicial system and vigilant neighborhood organizations
- Legitimized by the ideology of white supremacy that was advocated by the church and other cultural institutions

#### Racial Segregation Is ...

- 1. Myrdal (1944): ..."basic" to understanding racial inequality in America.
- 2. Kenneth Clark (1965): ...key to understanding racial inequality.
- 3. Kerner Commission (1968): ...the "linchpin" of U.S. race relations and the source of the large and growing racial inequality in SES.
- 4. John Cell (1982): ..."one of the most successful political ideologies" of 20<sup>th</sup> century & "the dominant system of racial regulation and control" in the U.S.
- 5. Massey and Denton (1993): ..."the key structural factor for the perpetuation of Black poverty in the U.S." and the "missing link" in efforts to understand urban poverty.

#### How Segregation Can Affect Health

- 1. Segregation determines SES by affecting quality of education and employment opportunities.
- 2. Segregation can create pathogenic neighborhood and housing conditions.
- 3. Conditions linked to segregation can constrain the practice of health behaviors and encourage unhealthy ones.
- 4. Segregation can adversely affect access to medical care and to high-quality care.

Source: Williams & Collins, 2001

## Residential Segregation and SES

A study of the effects of segregation on young African American adults found that the elimination of segregation would completely erase black-white differences in:

- Earnings
- High School Graduation Rate
- Unemployment

And reduce racial differences in single motherhood by two-thirds

# Improving American's Health

Enhancing neighborhood quality to Improve health

### 3 Major HUD Initiatives in 1990s

- Residential Relocation: Moving to Opportunity: helping poor families move from high-poverty public housing
- In-Place Services and Incentives: Jobs-Plus: saturating public housing with high-quality employment services and rent-based financial incentives
- Suburban Job Linkage: Bridges to Work: help residents of high-poverty, central-city communities find jobs in opportunity-rich suburban areas

#### **Lessons from HUD Initiatives**

- Interventions can increase income, improve safety and security and improve physical and mental health
- Families will respond to real opportunities
- Meaningful change requires sustained effort over time
- People need help in finding jobs and in keeping jobs (retention, adavancement, commuting costs, child care)
- Programs must tackle all of the major barriers: housing, safety, health, employment, education

## Moving to Opportunity

- The Moving to Opportunity Program randomized families with children in high poverty neighborhoods to move to less poor neighborhoods.
- Three years later, there were improvements in the mental health of both parents and sons who moved to the low-poverty neighborhoods
- 10 to 15 years later, movers had lower levels of obesity, severe obesity & diabetes risk (HbA1c)

## Yonkers Housing Intervention

City-wide de-concentration of public housing

- Half of public housing residents selected via a lottery to move to better housing
- ❖ 2 years later, movers reported better overall health, less substance abuse, neighborhood disorder and violence than those who stayed
- Movers also reported greater satisfaction with public transportation, recreation facilities and medical care
- Movers had higher rates of employment and lower welfare use

#### **Improving Residential Circumstances**

- Policies need to address the concentration of economic disadvantage and the lack of an infrastructure that promotes opportunity that co-occurs with segregation for African Americans, American Indian reservations and increasingly for Latinos
- •Nothing inherently negative about living next those of one's own race
- Major infusion of economic capital to improve the social, physical, and economic infrastructure of disadvantaged communities
- •One should not have to move to live in a better neighborhood

# Improving American's Health

Improve economic well-being

## **Improving Economic Well-Being**

- 2007 Task Force Report from the Center for American Progress, ("From Poverty to Prosperity") outlines a roadmap to cut poverty in half in 10 years. These include:
- Promoting inner-city revitalization, unionization, employment of ex-offenders
- Expanding Pell Grants, tax credits for low-income
- Encouraging savings for education, home ownership, retirement
- Connecting vulnerable youth to school and work
- Raising min. wage, providing child assistance

#### **Increased Income and Health**

- A study conducted in the early 1970s found that mothers in the experimental income group who received expanded income support had infants with higher birth weight than that of mothers in the control group.
- Neither group experienced any experimental manipulation of health services.
- Improved nutrition, probably a result of the income manipulation, appeared to have been the key intervening factor.

#### **Increased Household Income and Health**

- A study by Hoynes et al. used variation in the federal Earned Income Tax Credit (EITC) over time and the presence of state EITC's to examine the effect of these cash awards on birth outcomes
- Findings: income from EITC reduced the rate of low birth weight and increased mean birth weight
- These effects were evident for both blacks and whites but were larger for blacks.
- Another study by Strully et al. using changes in state EITC as a natural experiment found that state EITCs increased birth weights and reduced maternal smoking

#### Social Security and the Health of the Elderly

- An analysis of the impact of the social security program in increasing the SES of the elderly was conducted
- It found that the initial implementation of the program was associated with mortality declines for the elderly
- Subsequent increases in the level of social security benefits were also associated with mortality declines for the elderly

#### Great Smoky Mountain Study, NC

- A natural experiment that assessed the impact of additional income on the health of American Indians who were to 9 to 13 years old at baseline
- During this longitudinal study Indian households received extra income due to the opening of a Casino
- The study found declining rates of deviant and aggressive behavior among adolescents whose families received additional income.
- After four years of cash supplements, the level of psychiatric symptoms was similar to those of adolescents who had never been poor.
- Lower risk of psychiatric disorders in adolescence when youth lived at home persisted into young adulthood when most had moved out of their childhood home.

Costello et al., JAMA, 2003; Costello, et al, JAMA, 2010.

#### Great Smoky Mountain Study, NC

- This study also found that the additional income received by adolescents was associated with higher levels of education and lower incidence of minor criminal offenses in young adulthood and the elimination of racial disparities on both of these outcomes
- These effects existed only for the households that were poor at the time of the inception of income supplements. Improved parenting appears to be responsible for the effects.

#### Conditional Cash Transfer (CCT) Programs

Provide cash payments to low income families contingent on regular health care visits, school attendance or participation in educational programs.

- A program in Mexico in which families had been randomized to receive cash transfers led to:
  - Reduced illness rates and child stunting (Rawlings & Rubio, 2005)
  - Increased the quality of prenatal care (Barber & Gerter, 2009)
  - Reduced rural infant mortality by 17% (Barham, 2011)

## Economic Policy is Health Policy

In the last 50 years, black-white differences in health have narrowed and widened with black-white differences in income

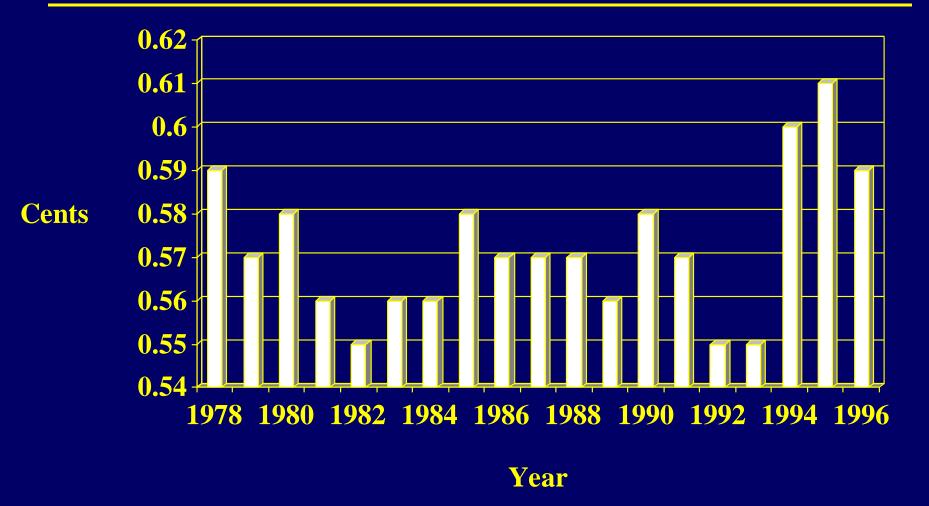
## Health Effects of Civil Rights Policy I

- Civil Rights policies narrowed black-white economic gap
- Gains greater for women than men
- Black women had larger gains in life expectancy during 1965 - 74 than other groups (3 times as large as those in the decade before)
- Between 1968 and 1978, black males and females, aged 35-74, had larger absolute and relative declines in mortality than whites

## Health Effects of Civil Rights Policy II

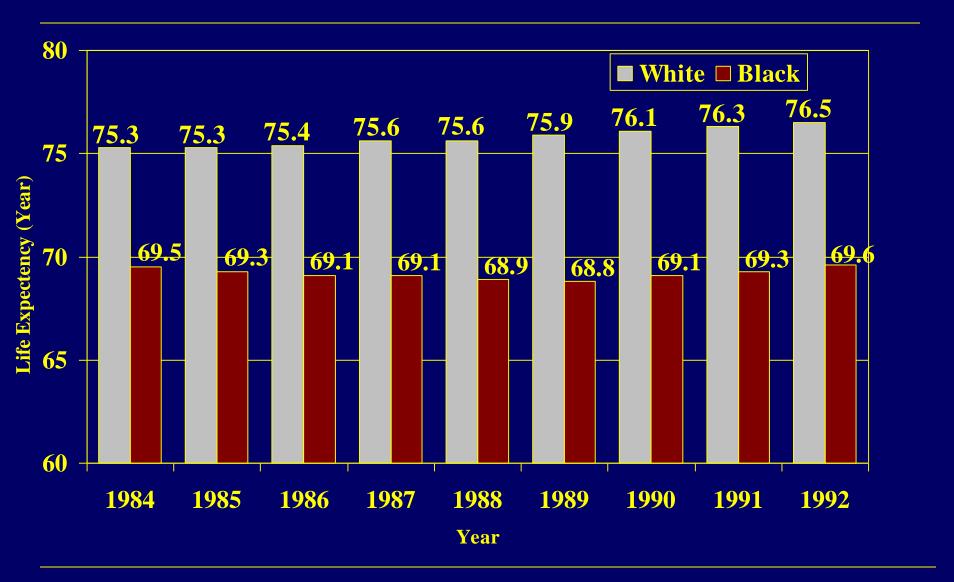
- Black women born 1967 69 had lower risk factor rates as adults and were less likely to have infants with low-birth weight and low APGAR scores than those born 1961- 63
- Desegregation of Southern hospitals enabled 5,000 to 7,000 additional Black babies to survive infancy between 1965 to 1975

# Median Family Income of Blacks per \$1 of Whites



Source: Economic Report of the President, 1998

#### U.S. Life Expectancy at Birth, 1984-1992



# **Policy Area**

# Family Structure Consequences for SES and Health

## Family Structure and SES

Compared to children raised by 2 parents those raised by a single parent are more likely to:

- grow up poor
- drop out of high school
- be unemployed in young adulthood
- not enroll in college
- have an elevated risk of juvenile delinquency and participation in violent crime.

### **Determinants of Family Structure**

- Economic marginalization of males (high unemployment & low wage rates) is the central determinant of high rates of female-headed households.
- Marriage rates are positively related to average male earnings.
- Marriage rates are inversely related to male unemployment.

#### **Social Context of Homicide**

- 1. Lack of access to jobs produces high male unemployment and underemployment
- 2. This in turn leads to high rates of out of wedlock births, female-headed households and the extreme concentration of poverty.
- 3. Single-parent households lead to lower levels of social control and guardianship
- 4. The association between family structure and violent crime is identical in sign and magnitude for whites and blacks.
- 5. Racial differences at the neighborhood level in availability of jobs, family structure, opportunities for marriage and concentrated poverty underlie racial differences in crime and homicide.

Source: Sampson 1987

#### Racial Differences in Residential Environment

- "The sources of violent crime...are remarkably invariant across race and rooted instead in the structural differences among communities, cities, and states in economic and family organization,"p. 41
- In the 171 largest cities in the U.S., there is not even one city where whites live in ecological equality to blacks in terms of poverty rates or rates of single-parent households.
- "The worst urban context in which whites reside is considerably better than the average context of black communities." p.41

## **Policy Matters**

Social Policy can cushion the negative effects of family structure on poverty and child outcomes

	% Children	Child Poverty (%)	
Country	1 Parent HH	1 Parent	Other
Spain	2	32	12
Italy	3	22	20
Mexico	4	28	26
France	8	26	6
Ireland	8	48	14
Germany	10	51	6
<b>United States</b>	19	55	16
<b>United Kingdom</b>	20	46	13
Sweden	21	7	2

Source: UNICEF (United Nations Children's Fund), 2000

#### **Child Poverty Rates**

Country	Before Taxes	After Taxes
Netherlands	16.0	7.7
Spain	21.1	12.3
Sweden	23.4	2.6
Canada	24.6	15.5
Italy	24.6	20.5
<b>United States</b>	26.7	22.4
Australia	28.1	12.6
France	28.7	7.9
United Kingdom	36.1	19.8
Poland	44.4	15.4

Source: UNICEF (United Nations' Children's Fund), 2000

### Learning from the Military

- Black men in the military earn more than civilian peers
- The command and control, bureaucratic structure of the military has created a more race-blind environment than larger society
- Military benefits include family housing, day care centers, school-age activity centers
- Active duty military service promotes marriage over cohabitation, increased the likelihood of 1<sup>st</sup> marriage, and leads to greater stability of marriage. Effects greater for blacks than for whites
- Economic resources eliminates disparities in marriage

# Improving American's Health

Enhance the quality of education

#### **Education Policy**

In a country as racially polarized as the United States, no single change ... could possibly eliminate the entire legacy of slavery and Jim Crow ... But if racial equality is America's goal, reducing the blackwhite test score gap would probably do more to promote this goal than any other strategy that could command broad political support. Reducing the test score gap is probably both necessary and sufficient for substantially reducing racial inequality in educational attainment and earnings. [These] ... in turn help reduce racial differences in crime, health, and family structure...."

#### **Self-Affirmation Intervention**

- Two randomized double-blind experiments with black and white seventh-graders
- Intervention: students to their most important value, write a paragraph on why it is important to the student
- Goal: affirm sense of adequacy and self-worth
- Black students in affirmation condition earned higher grades in targeted course and in their other courses
- Improved grades evident for 70% of Blacks.
- One or two administrations work equally well
- Racial achievement gap reduced by 40%
- No effect of the intervention among whites.

#### Self-Affirmation Intervention -II

- Two-year follow-up of this study found that a positive effect of affirmation on students' GPA over two years was evident for blacks but not whites,
- Low achieving black students show greatest benefit
- The intervention also affected students' perceptions of their ability to succeed in school
- This brief psychological intervention reduced the racial achievement gap and reduced the number of black students placed in remedial programs
- A similar experiment with women found improved their grades and reduced the male-female gap in grades

### Social Belonging Intervention

- A RCT was implemented during students' freshman year: it sought to neutralize the psychological perception of threat that many minority college students have
- Provided information to students that social adversity on campus was initially common to all students but temporary and tried to help them internalize it.
- Study documented that, three years later, this brief psychological intervention among black college students had:
  - -- increased academic performance,
  - -- reduced the black-white achievement gap by one half
  - -- reduced doctor visits
  - -- Improved self-reported health over the 3 years

# **Improving Education**

- In 2006, the Education Trust published a report entitled,
- Yes We Can: Telling Truths and Dispelling Myths About Race and Education in America
- It indicates, for example, that teacher quality is the single biggest predictor of student performance
- It provides examples of schools of excellence in poor African American, Latino and American Indian communities

## **Policy Matters**

Investments in early childhood programs in the U.S. have been shown to have decisive beneficial effects

### High/Scope Perry Preschool

Program: Black children, living in poverty & at risk of school failure

- Random assignment
- Daily classes and weekly home visits



At <u>age 40</u>, those who received the program:

- Were more likely to graduated from high school
- Had higher employment, income, savings, home ownership
- Had fewer arrests for violent, property and drug crimes
- Cost-benefit: \$17 return to society for every dollar invested

Reynolds et al. 2007; Muennig et al. 2009

### **Keys to Long-term Success**

- Building the perspective of Health into all policy-making
- Including an explicit focus on health equity into policymaking
- Convening, enabling and supporting cross-sectoral collaborations
- Developing institutional mechanisms to provide policy coherence and the constant need for action
- Developing consensus-based standard data and methods for surveillance systems linking health, health equity and their determinants
- Ensure data is available at the local level
- Investing in strengthening community capacity and the potential for community advocacy

# Improving American's Health

Health Care Improvement alone will NOT solve America's health problems Healthier lifestyles are needed

# Improving American's Health

### Need for Social Responsibility:

- We have to create the opportunities to promote good health for all
- We have to remove the barriers that make it almost impossible for some Americans to make healthy choices

We need to build a science base that will guide us in developing the political will to support the needed policies to effectively address social inequalities in health

#### Conclusions

- 1. All policy that affects health is health policy
- 2. Inequality in health is created by inequalities in society
- 3. SES and racial/ethnic disparities in health reflect the successful implementation of social policies.
- 4. Eliminating them requires <u>political will, and a commitment</u> to new strategies to improve living and working conditions.
- 5. Health officials need to work collaboratively with other sectors of society to initiate and support social policies that promote health & reduce health inequality
- 6. Our great need is to begin in a systematic and comprehensive manner, to use all of the current knowledge that we have.
- 7. Now is the time