A CALL TO ACTION TO IMPROVE HEALTH EQUITY IN SOUTH CAROLINA

When it comes to healthcare in South Carolina, we all agree there’s room for improvement. Because of economic, racial and geographic disparities, it’s hard for many children or adults in the Palmetto state to live healthy lives. Many organizations are trying to improve health and healthcare in South Carolina, but their efforts often aren’t as coordinated as they could be which can result in fragmented, duplicative activities that don’t always achieve the best results.

We’re trying to change that. Members of the Alliance for a Healthier South Carolina are forging common ground among many different players and coordinating action on shared goals. In critical areas, we’re aligning existing efforts throughout South Carolina to improve health and healthcare, while also lowering costs. Underpinning the effort is a commitment to equity, where everyone has the same probability of attaining the best health status independent of gender, age, race, sexual orientation, neighborhood, ethnicity, disability status, educational attainment or socioeconomic status. Results are intended to meet the tenets of healthcare’s “Triple Aim” – improved population health, better quality care, and lower per-capita costs of care.

To be successful, we need to work together. Organizations and people working to improve health and healthcare need to be part of this effort to transform South Carolina.

The Situation
The health outcomes of South Carolinians rank worse than those of people in 41 other states.

An analysis of the distribution of these outcomes inside South Carolina shows significantly poorer health for some groups in the population, such as rural communities, low income communities and minorities.

Unless we do something bold, and soon, our children will live even shorter lives than us.

The recognition of these major challenges sparked the creation of the Alliance for a Healthier South Carolina; an unprecedented partnership of senior leaders in 48 organizations committed to optimizing the health of everyone in South Carolina through collaboration and goal alignment.

In June 2014, the Alliance leadership approved its common agenda of five goals for health improvement by 2020 which included six equity indicators:
- Decrease by at least 8% the Low-Birth Weight rate of African Americans and for births paid by Medicaid
- Decrease by 19% the proportion of low-income third graders not reading at grade level
- Decrease by 25% the number of geographic primary care shortage areas
- Decrease by 10% the proportion of people who needed to see a doctor but couldn’t due to cost
- Decrease by at least 10% preventable ED visits for African Americans
- Decrease by 20% the proportion of low-income people who spent more than a week feeling mentally unhealthy last month

On June 23, 2015, the Alliance released a framework to collectively accelerate health improvement for all in South Carolina.

There is growing recognition among health experts that the conditions in which we live and work, our income, our education, the impact of systemic barriers rooted in history, the services available to us, and the choices we make, all influence our ability to fulfill our potential for optimal health. While the extent of the challenges may vary, many South Carolinians of all ages experience daily obstacles to good health.
Since resources are limited, targeted interventions must be used to maximize the value of resources for achieving of our health improvement goals. A high-level analysis of South Carolinians’ health status has shown striking differences among groups of the population that need to be decreased or eliminated through collective action. Some of these are presented below:

- **3 in 10** adults with incomes less than $15,000 a year spent more than a week during the previous month feeling mentally unhealthy. Only **1 in 10** adults with an income more than $50,000 experienced the same health status.
- African Americans, for reasons related to greater prevalence of diseases, overrepresentation in the lowest income brackets, and other factors, rely twice as much as Whites on emergency department care for conditions that could be prevented or managed by better access to and use of primary care services.
- The proportion of African American low birth-weight babies is **93% higher** than White babies.
- When comparing two school districts in the same area of the state, in one district **7 in 10** low-income third graders are not reading at grade level, while only **1 in 10** low-income third graders in the other school district is reading below grade level.

National groups such as the American Hospital Association, American College of Healthcare Executives, Association of American Medical Colleges, America’s Essential Hospitals, Catholic Health Association of the United States, Robert Wood Johnson Foundation, and the Department of Health and Human Services, have issued calls to action to eliminate racial, economic and ethnic disparities in health. In South Carolina, we have the collaborative capacity to lead the nation in this process.

National and state-level focus on these issues is of utmost importance. More in-depth analyses and coordinated action at the local and community level, spearheaded by concerned organizations, offer the greatest potential to generate a reinforcing loop that would accelerate health improvement in a way never before seen in South Carolina. Over the past year, a team of subject matter experts in the Alliance for a Healthier South Carolina and other partners has developed a systematic approach to how organizations can most effectively engage in this acceleration process.

**The Call to Action for Health Equity** focuses on changing the way organizations see their role in helping diverse populations make healthy choices, access health and social services, and enjoy healthier physical and social environments. It is composed of four actions that will help our organizations understand obstacles to health improvement and how to work together to develop sustainable solutions for accelerating health improvement for everyone in South Carolina.

### CALL TO ACTION FOR HEALTH EQUITY

1. **Collect and use data to identify and guide decision making** regarding the health equity challenges in South Carolina.
   - a. Collect data to identify health equity challenges experienced by our employees and clients and use it to design and implement targeted interventions.
   - b. Use secondary data to identify health equity challenges in the geographic areas of influence of our organizations and use it to design and implement targeted interventions.

2. **Develop and maintain a culturally competent and responsive organizational culture** for employees, clients and partners

3. **Ensure our organizations are designed to guarantee inclusive decision making**. This, through enhanced emphasis on the recruitment of highly qualified minorities for leadership positions, and the investment in filling the pipeline with diverse leaders for this and future generations.

4. **Engage the community as partners** in the design and delivery of sustainable health solutions.

Enroll in the health equity call to action now! Email agallego@scha.org for more details.
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