



Creating the conditions in which all people  
can be healthy and thrive

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Public Health Metaphysician

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# Charles Dickens

## Died on June 9, 1870

*“It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness, it was the epoch of belief, it was the epoch of incredulity, it was the season of light, it was the season of darkness, it was the spring of hope, it was the winter of despair.”*

*Tale of Two Cities 1859*



Charles Dickens  
February 07, 1812 – June 09, 1870

# Georgia Neese Clark

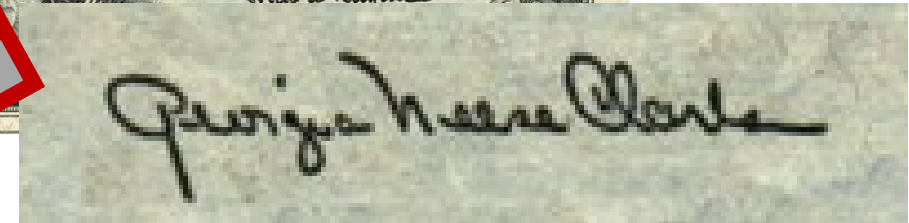
On June 9, 1949 she became the 1st woman treasurer of US



Georgia Neese Clark

January 27, 1898 – October 26, 1995

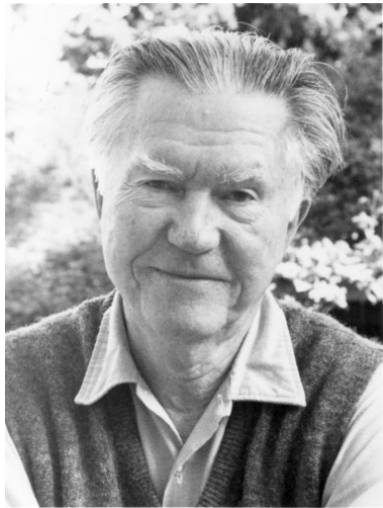
Born in Richland, Kansas



Truman pointed out the disadvantages of the job of Treasurer, including low pay, and asked her if she could afford to take the job. She replied, "***Can I afford not to?***"



# William Stafford, “The Way It Is.”



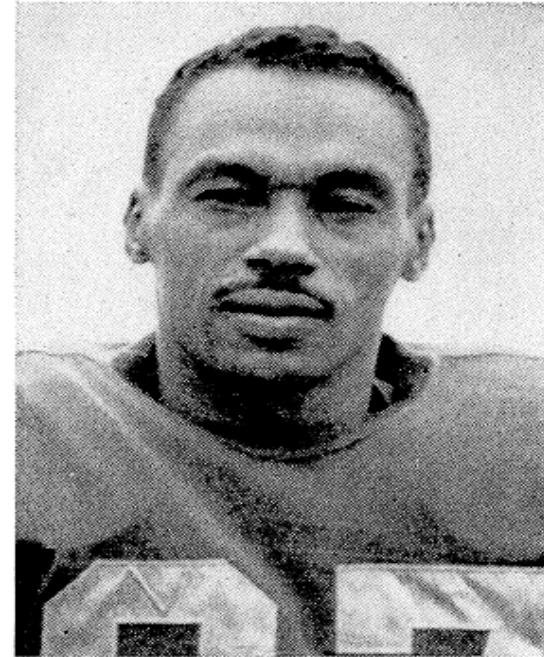
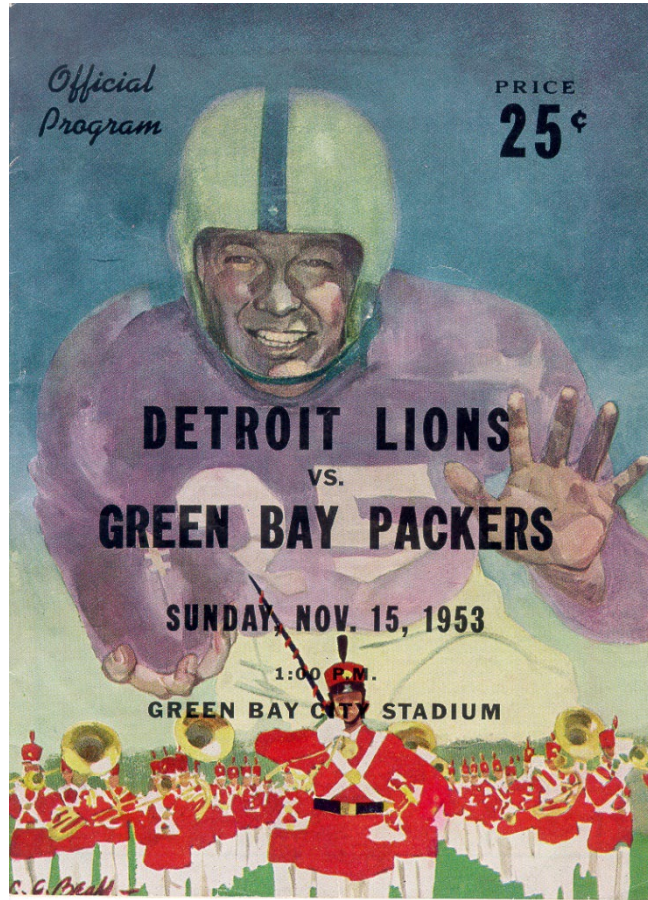
William Edgar Stafford  
Born in  
Hutchinson, Kansas

***There's a thread you follow. It goes among  
things that change. But it doesn't change.  
People wonder about what you are pursuing.  
You have to explain about the thread.  
But it is hard for others to see.  
While you hold it you can't get lost.  
Tragedies happen; people get hurt  
or die; and you suffer and get old.  
Nothing you do can stop time's unfolding.  
You don't ever let go of the thread.***



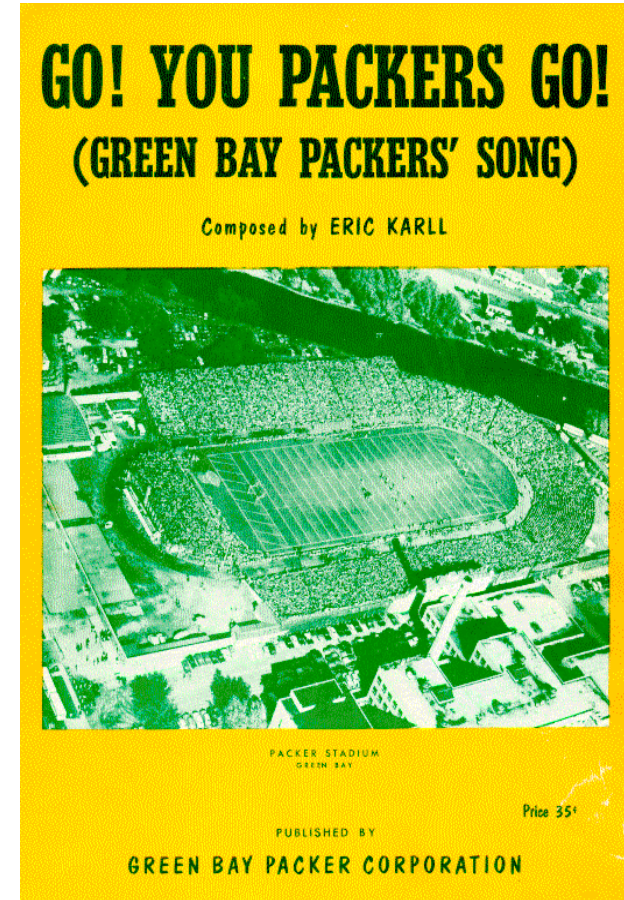


# My thread goes back to early childhood experiences



ROBERT (Bob) MANN  
No. 87 — End

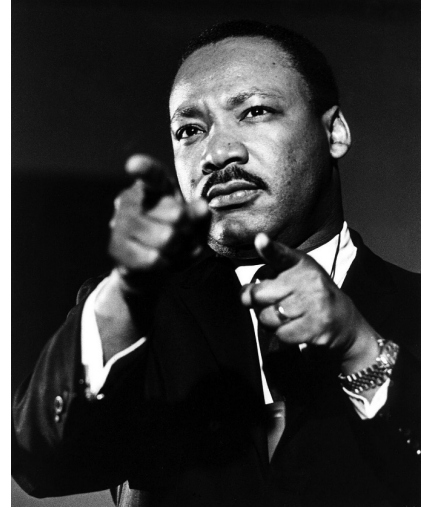
Sixth season in professional football... Played two seasons with the Detroit Lions catching 66 passes for 1,014 yards in 1949... One of the outstanding receivers in pro football... Teams up with Bill Howton to give the Pack the best pair of receivers in the league... Led the Packers in receiving in 1951 and caught 30 passes for 517 yards and 6 touchdowns in 1952... Former ALL BIG-TEN end and Rose Bowl star... Negro descent... Married and in the Real Estate business with Len Ford of Cleveland Browns in the off season... Residence: Detroit, Michigan.





The strands of the thread include  
the questions and values of my parents

*“Life's most persistent and urgent question  
is, 'What are you doing for others?'"*



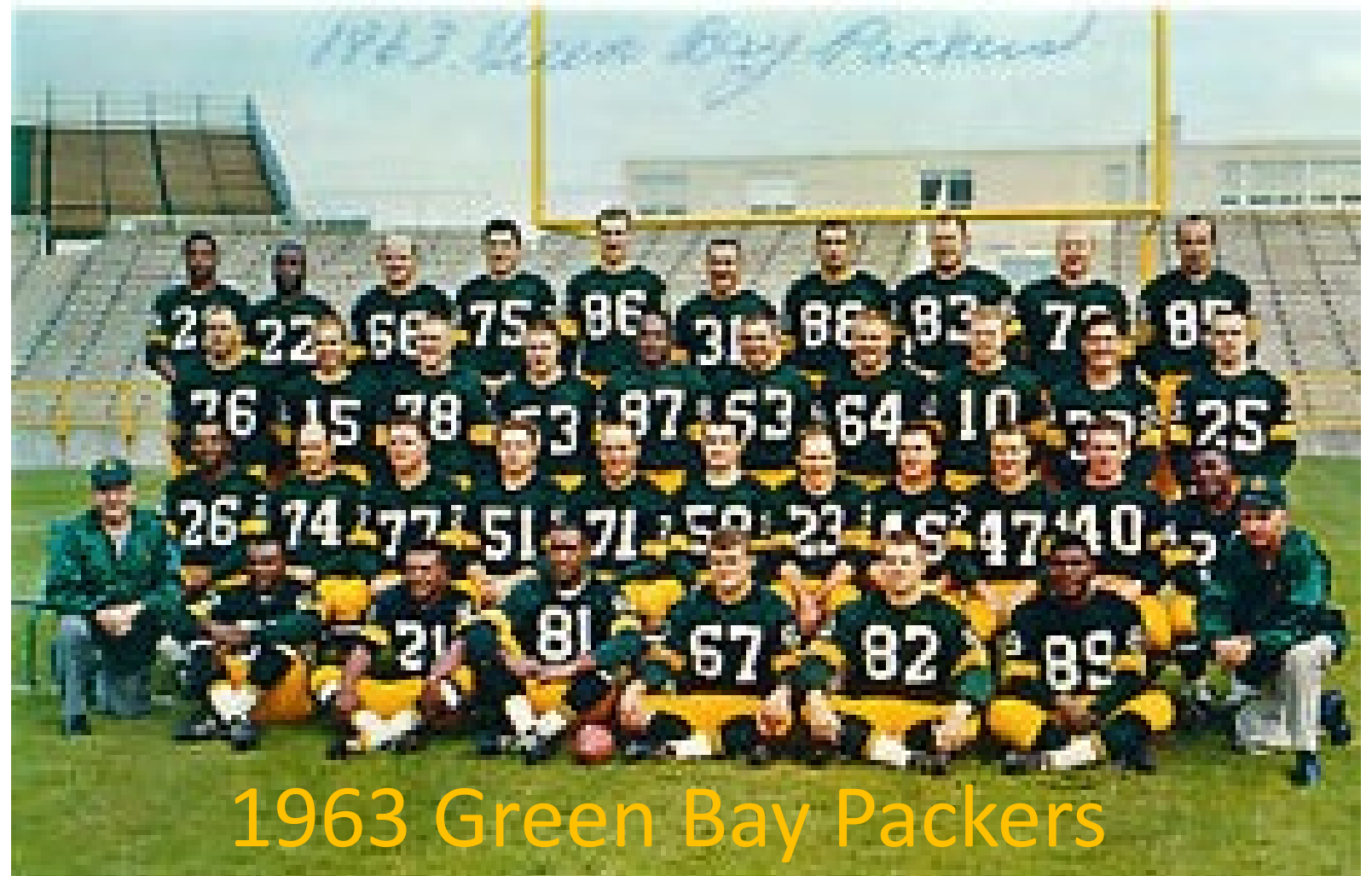
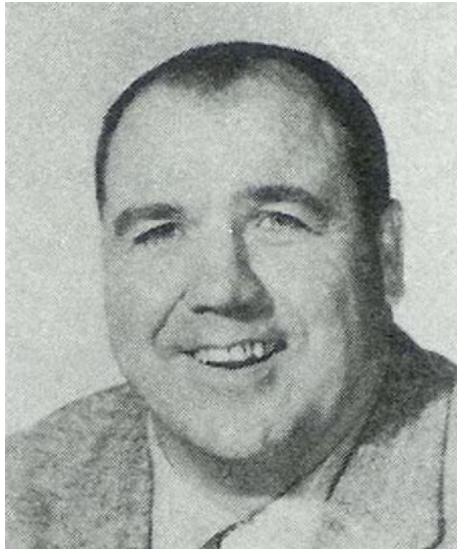
Dr. Martin Luther King, Jr

*“No one is useless in this world who lightens  
the burdens of another.”*



Charles Dickens

The thread ran through high school



1963 Green Bay Packers



# The Other America - 1962

*“**There is a familiar America.** It is celebrated in speeches and advertised on television and in the magazines. It has the highest mass standard of living the world has ever known...(but), **there exists another America.** In it dwell somewhere between 40,000,000 and 50,000,000 citizens of this land. **They are the poor... maimed in body and spirit, existing at levels beneath those necessary for human decency.** ... They are hungry. They are without adequate housing and education and medical care.”*



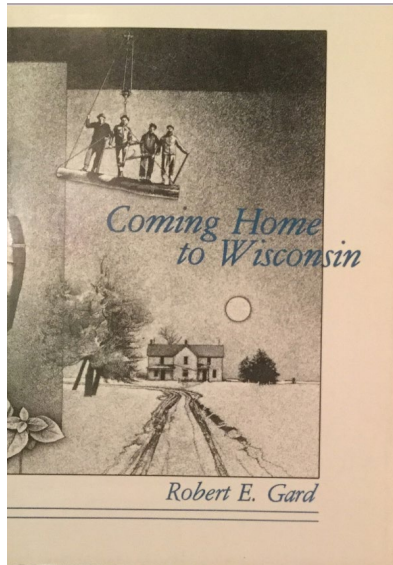
Michael Harrington  
Born in St. Louis, MO

# That thread ran through college and medical school



**Robert Gard**

born in Iola, Kansas  
College, U of KS



## Wisconsin Idea

- *“University should be dedicated to service to the state...an instrument for the advancement of the welfare of the people.”*
- Legislation should benefit all people of the state - as should educational and cultural opportunities.
- ***“There never was a higher call to greater service than in this protracted fight for social justice.”*** Robert (Fighting Bob) LaFollette

# The thread ran through graduate school

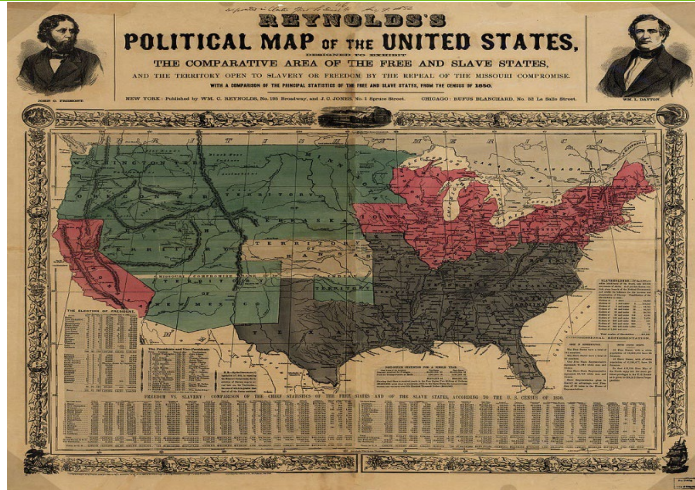
- First Provost, KU Medical Center
- Dean of the University of Kansas Medical School
- Medical Director, KU Medical Center
- Director, Children's Rehabilitation Unit
- Head of MCH at UNC-Chapel Hill



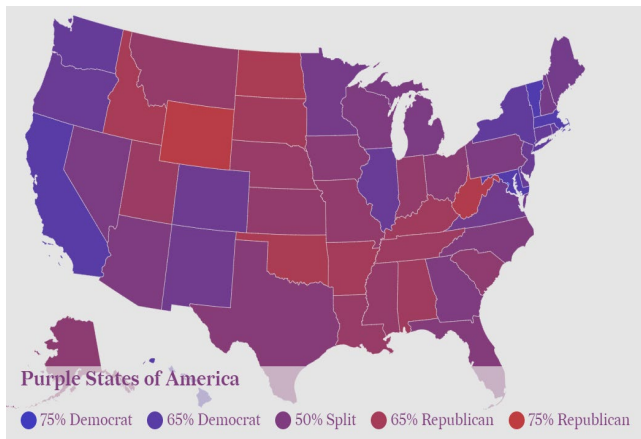
C. Arden Miller, MD



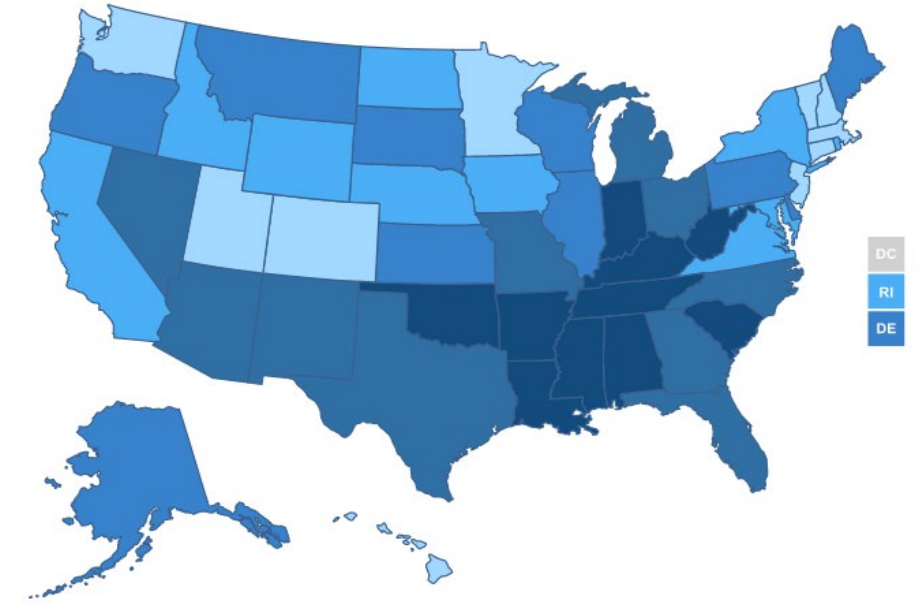
# Kansas is more than just the geographic center of the USA



Kansas–Nebraska Act of 1854  
Bleeding Kansas – 1854 to 1859

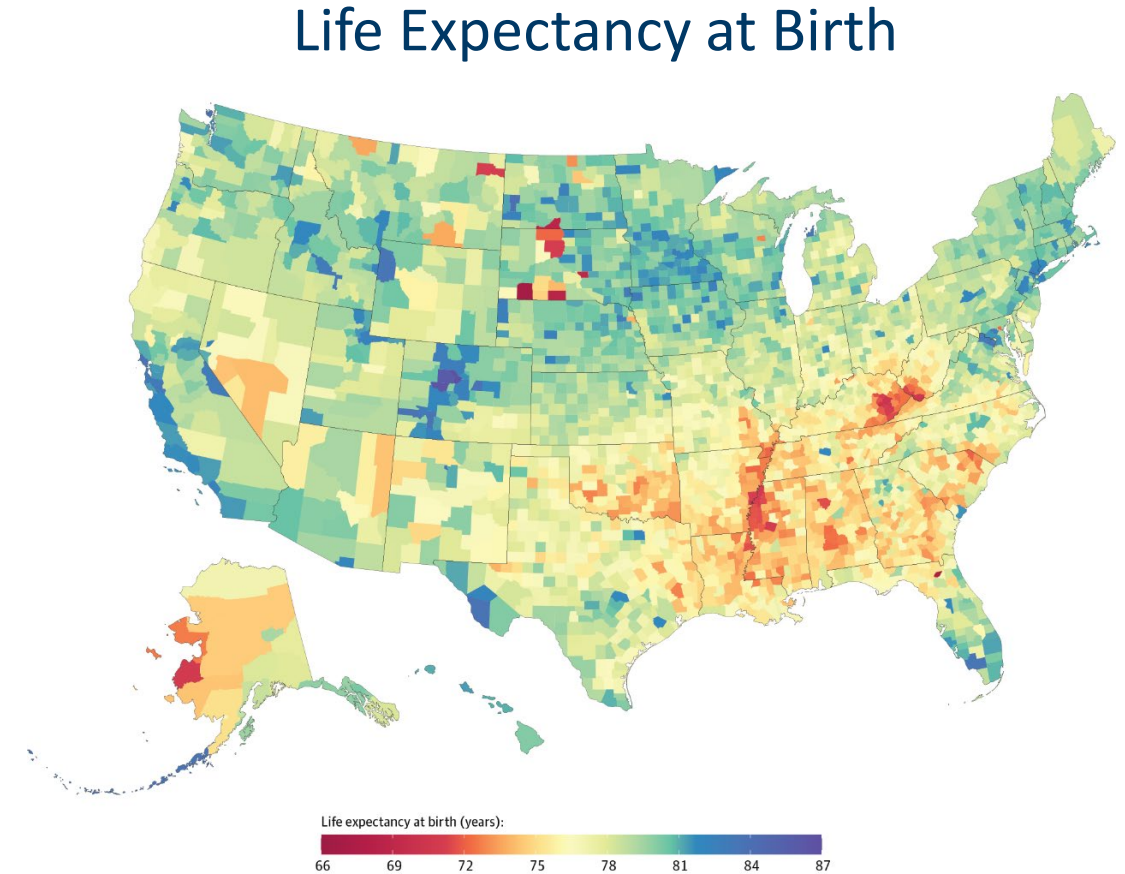
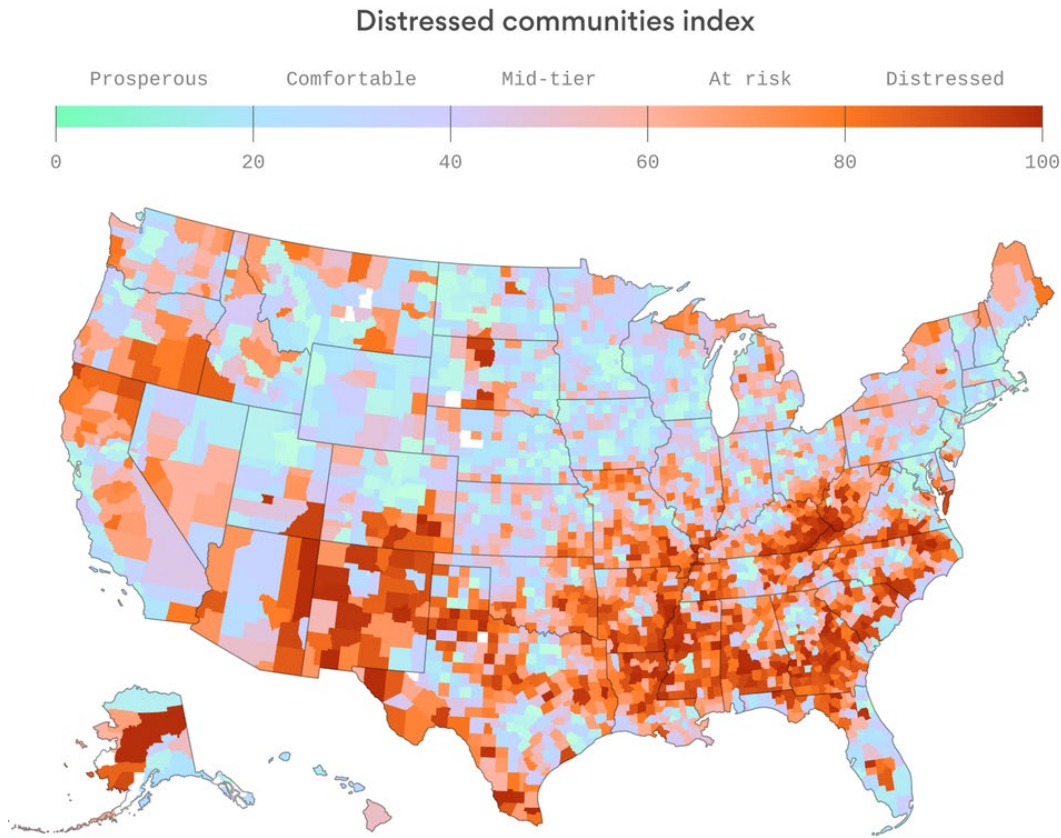


Lebanon, Kansas



State Health Rankings

# Kansas - in the center of everything

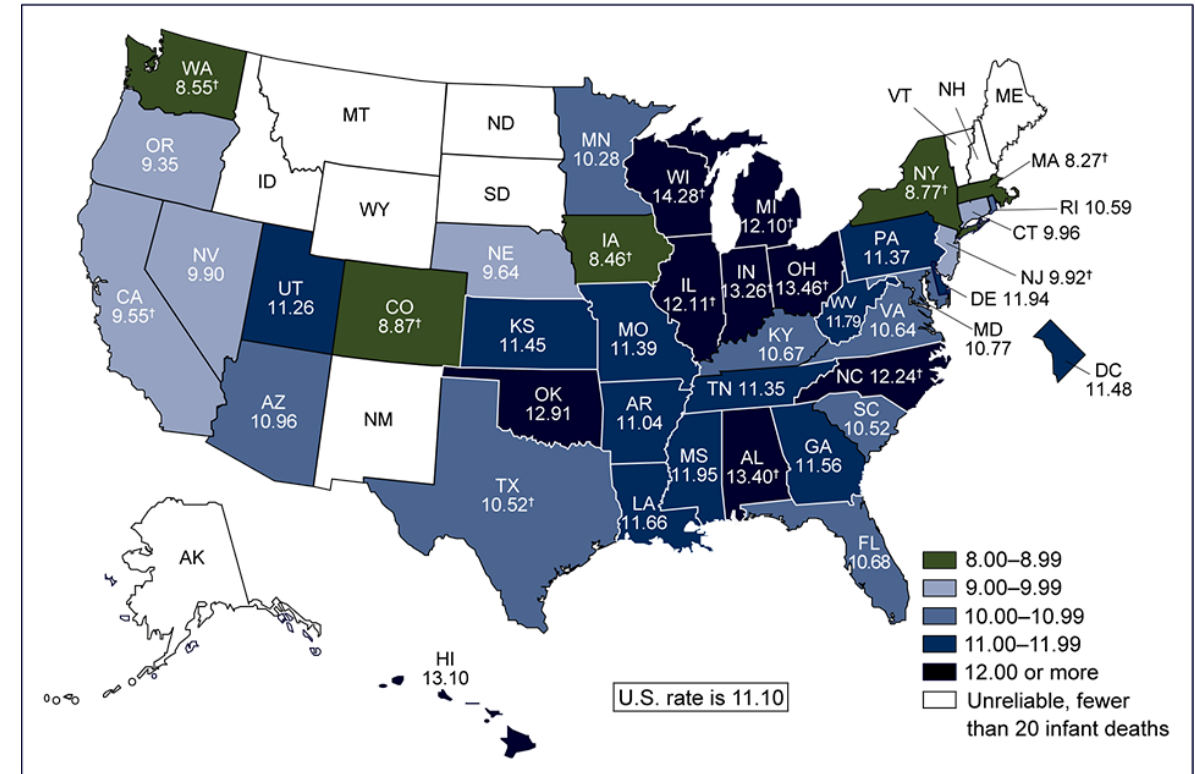


Mortality rates from mental health conditions 64% higher in distressed areas.  
People in distressed areas die five years earlier than people in prosperous regions.



- Health outcomes for women #30
- Health outcomes for children #35

Figure 3. Infant mortality rates for infants of non-Hispanic black women, by state: United States, 2013–2015

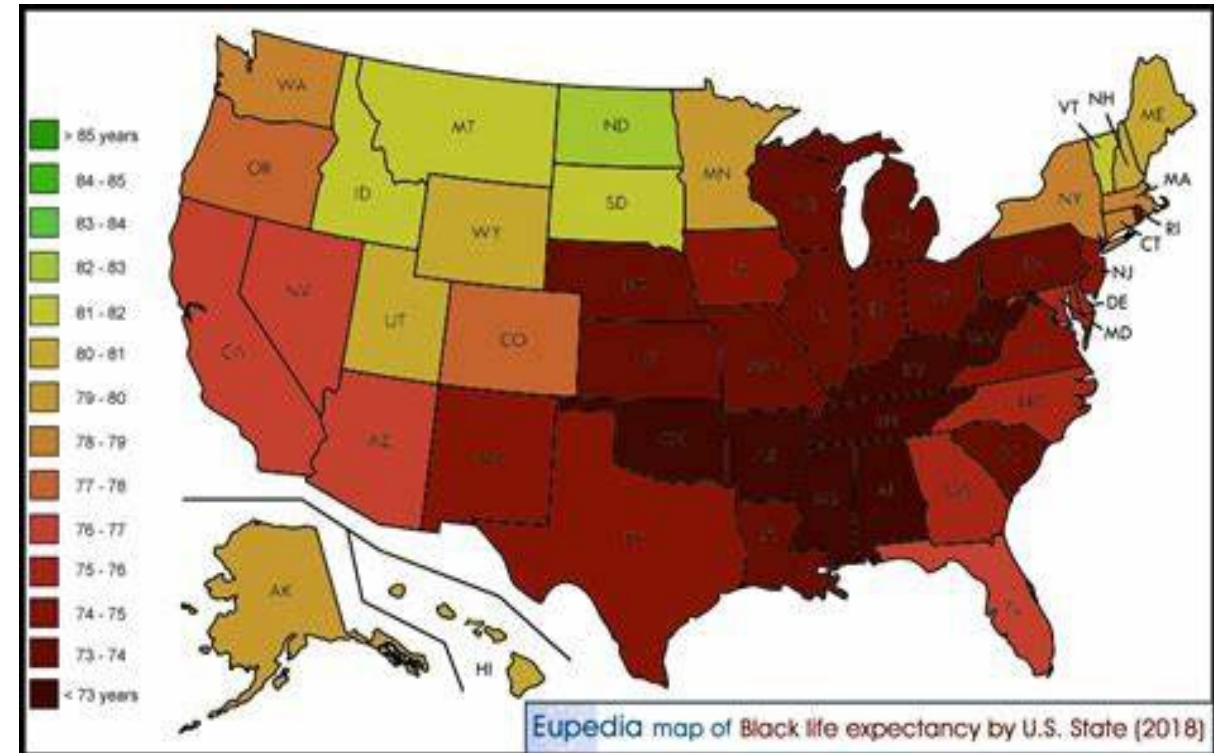
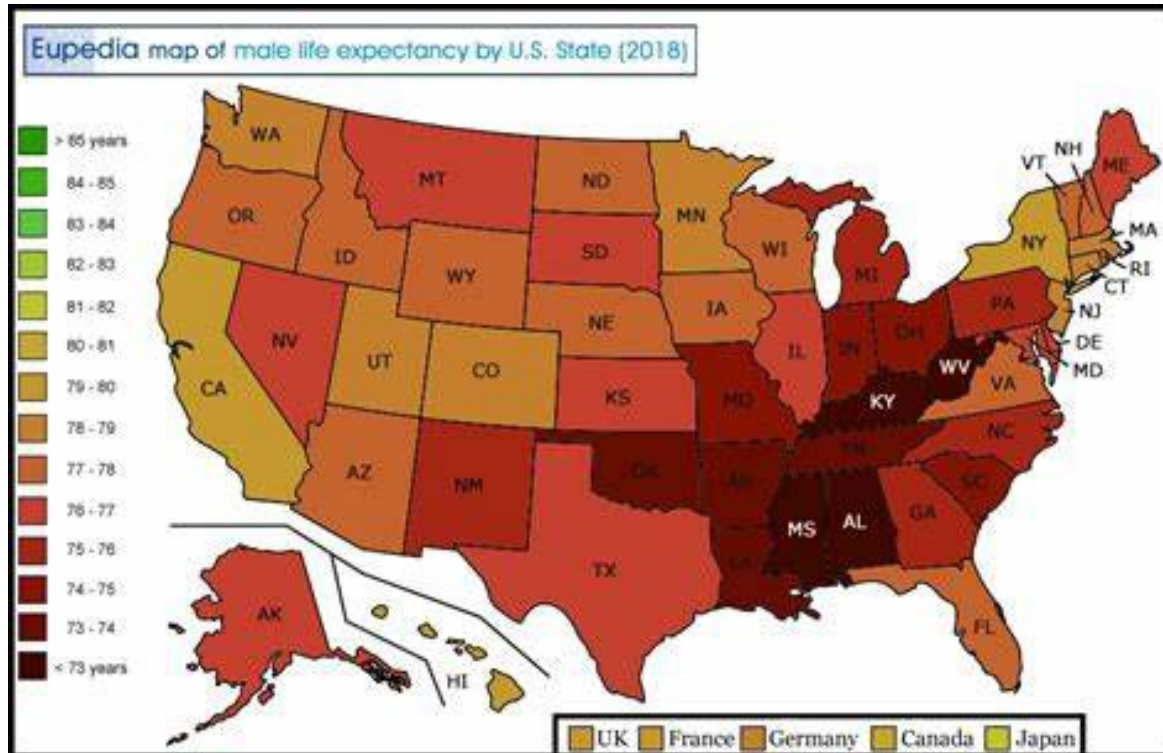


NOTES: Rates ranged from 8.27 to 14.28 per 1,000 live births. Access data table for Figure 3 at: [https://www.cdc.gov/nchs/data/databriefs/db295\\_table.pdf](https://www.cdc.gov/nchs/data/databriefs/db295_table.pdf).  
SOURCE: NCHS, National Vital Statistics System.

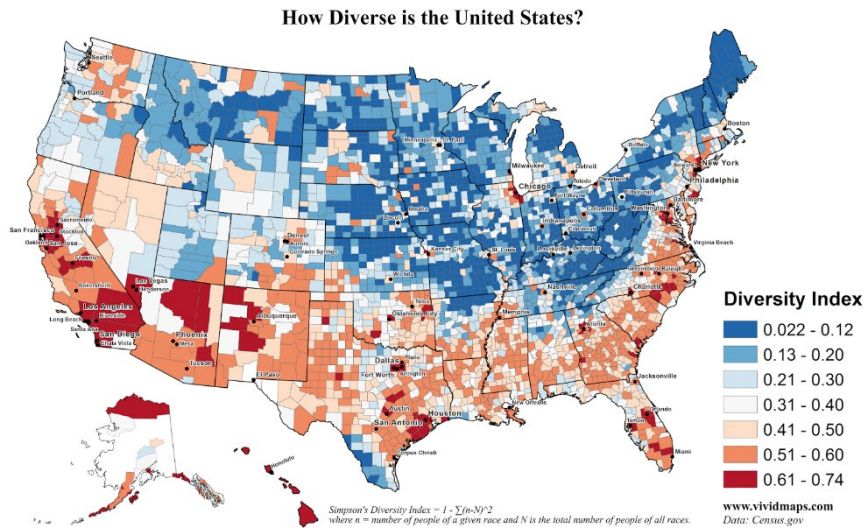


# Kansas - in the center of everything - except in disparities

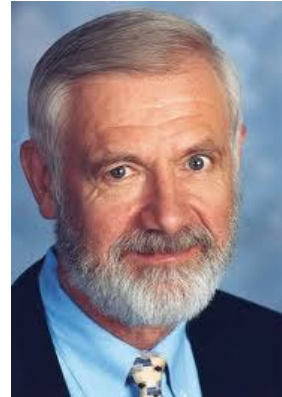
## Life Expectancy



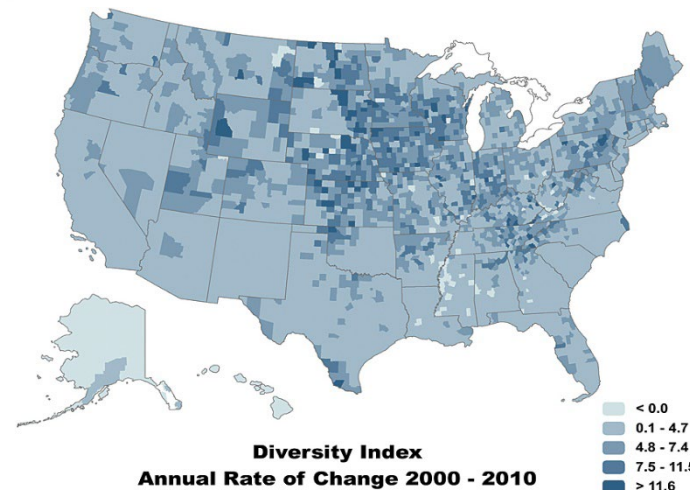
# Why Should People Be Concerned About Equity?



*It's a math problem*



William Foege  
CDC director  
1977-1983



*It's a social justice problem...*

*"The philosophy behind science is to discover truth.*

*The philosophy behind medicine is to use that truth for the benefit of your patient.*

*The philosophy behind public health is social justice."*

# Diversity is more than just race/ethnicity:

## Categories of potential inequities

- Race and ethnicity
- Gender
- Sexual preference
- Educational attainment
- Geography
- Community vitality
- Physical environment
- Urban/suburban/rural
- Economic status
- Physical and mental ability
- Language
- Immigration status
- Religion
- And...



# Why Should We Care About Equity?

We have vested interests in the outcomes.



Michael Harrington  
Author of "The Other America."

*"One cannot raise the bottom of society without benefitting everyone above."*



Senator Paul Wellstone

*"We all do better when we all do better."*



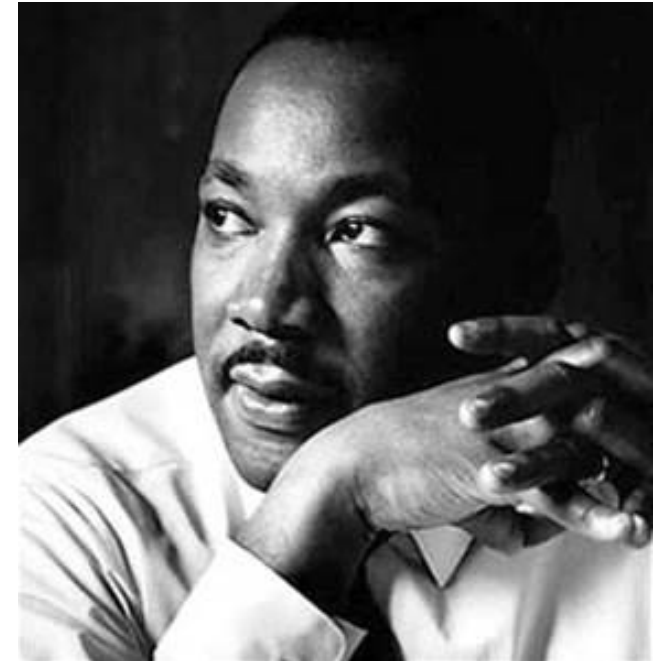
Martin Luther King , Jr.

*"We may have all come on different ships, but we're in the same boat now."*

# Why Should We Care About Equity?

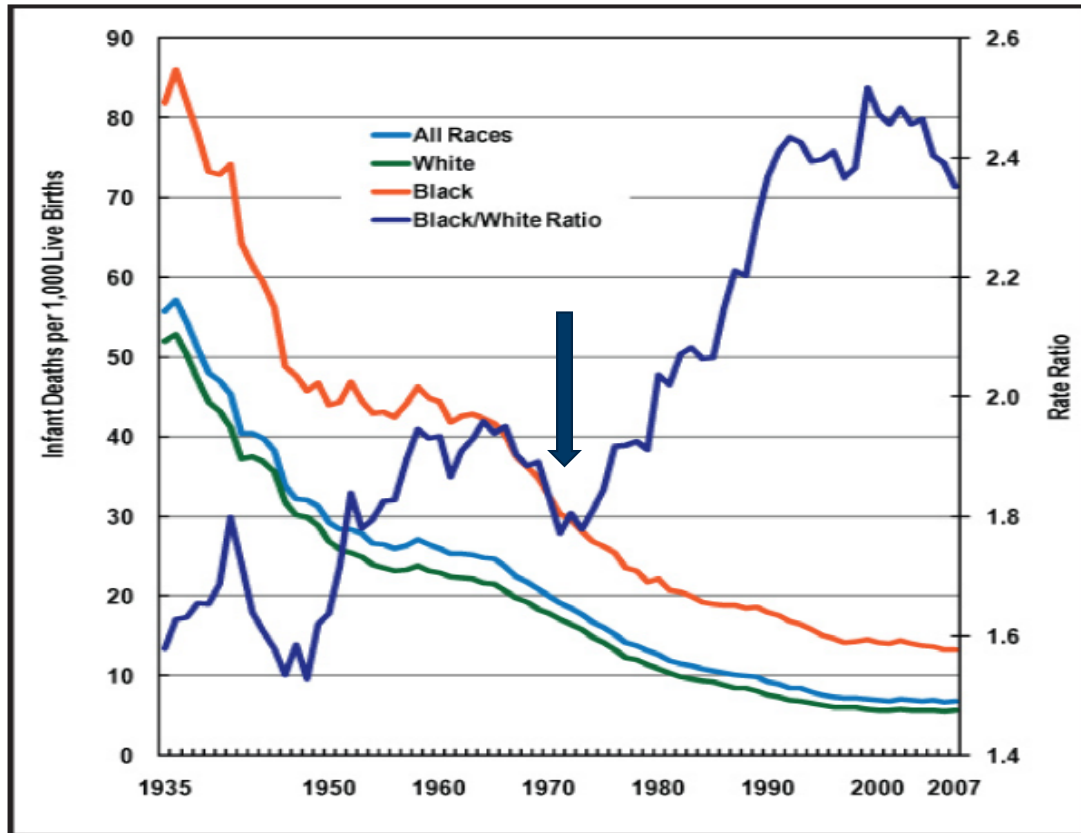
We have vested interests in the outcomes.

*“Injustice anywhere is a threat to justice everywhere. ... Whatever affects one directly, affects all indirectly.”*

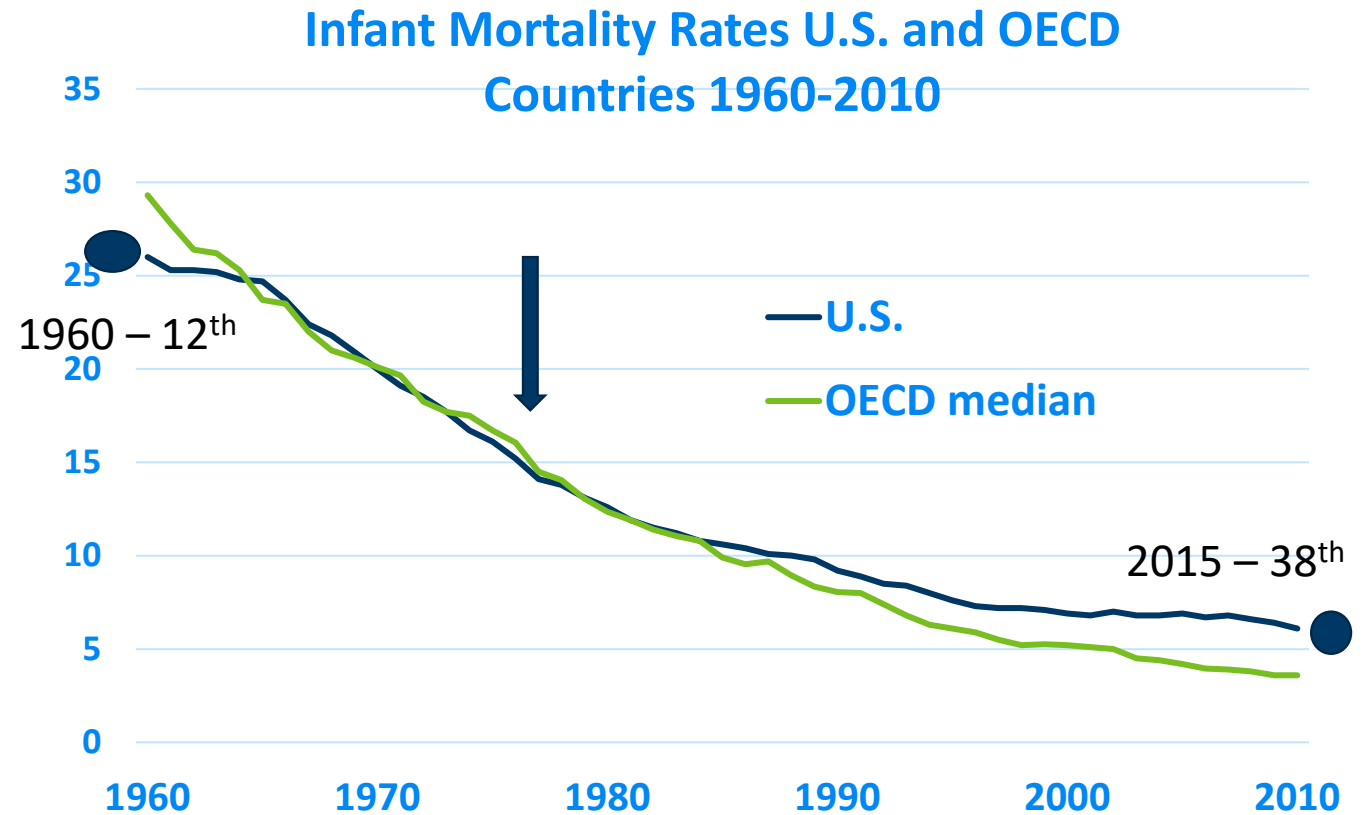


MLK, Jr, Letter from Birmingham Jail, April 16, 1963

*“Injustice anywhere... ..is a threat to justice everywhere.”*



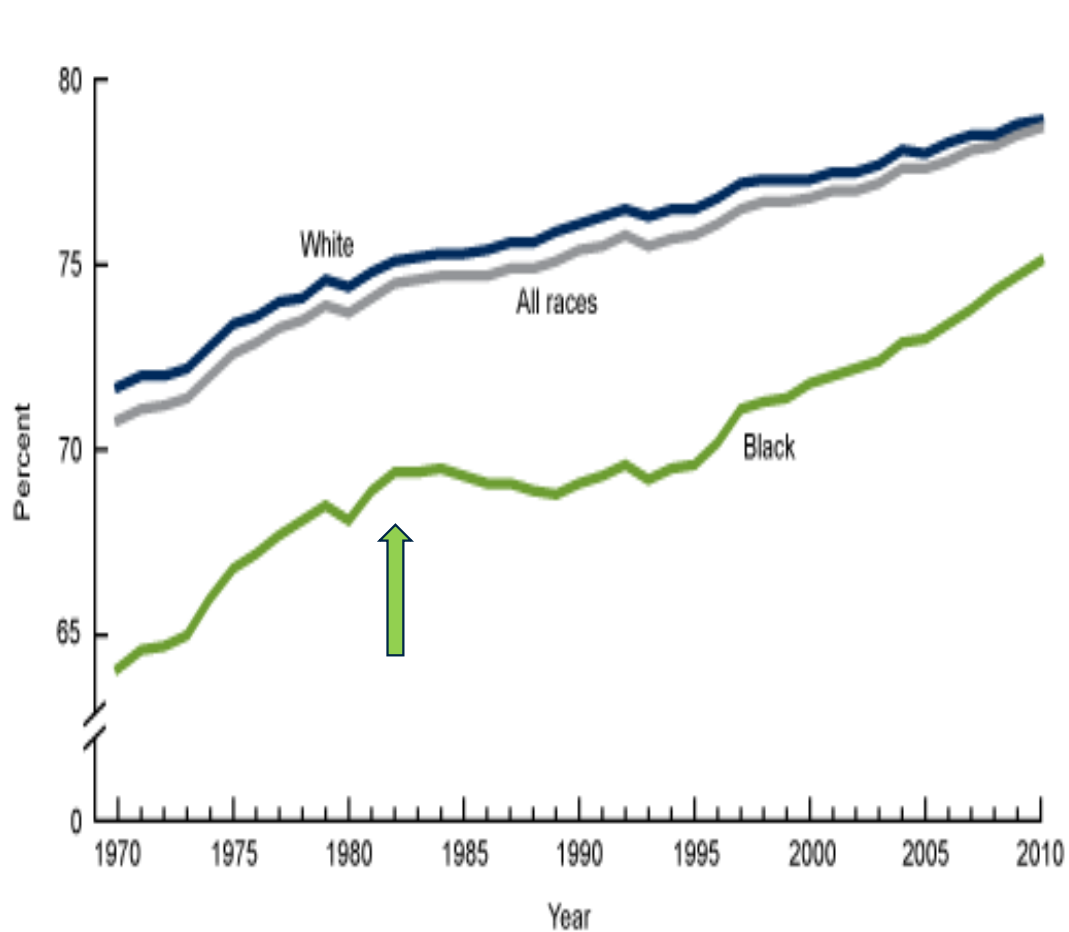
Mortality Rates by Race and  
Black/White Ratio US, 1935 – 2007





*“Injustice anywhere...*

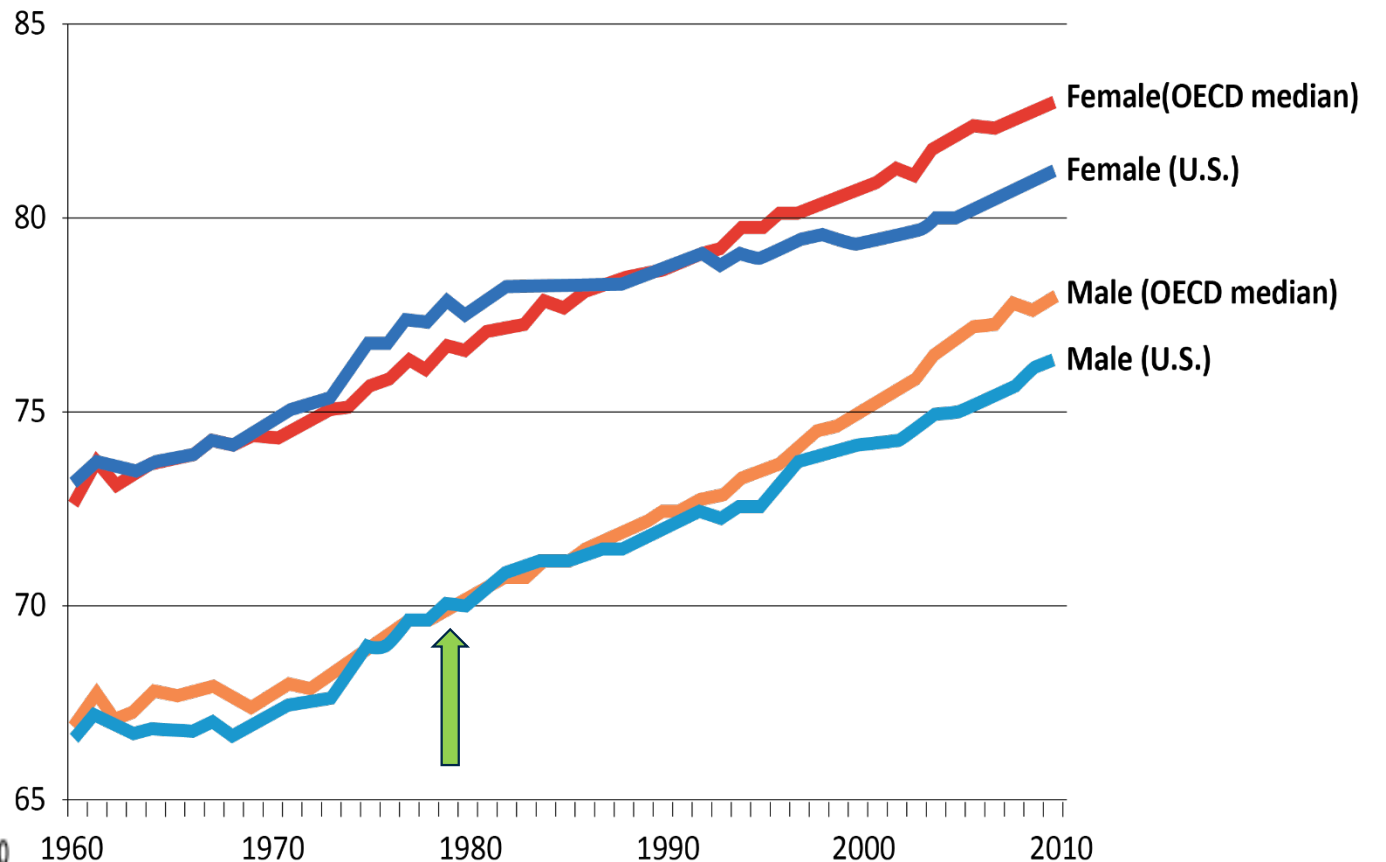
*...is a threat to justice everywhere.”*



**Life Expectancy, by race: United States,  
1970 - 2010**

8/24/2022

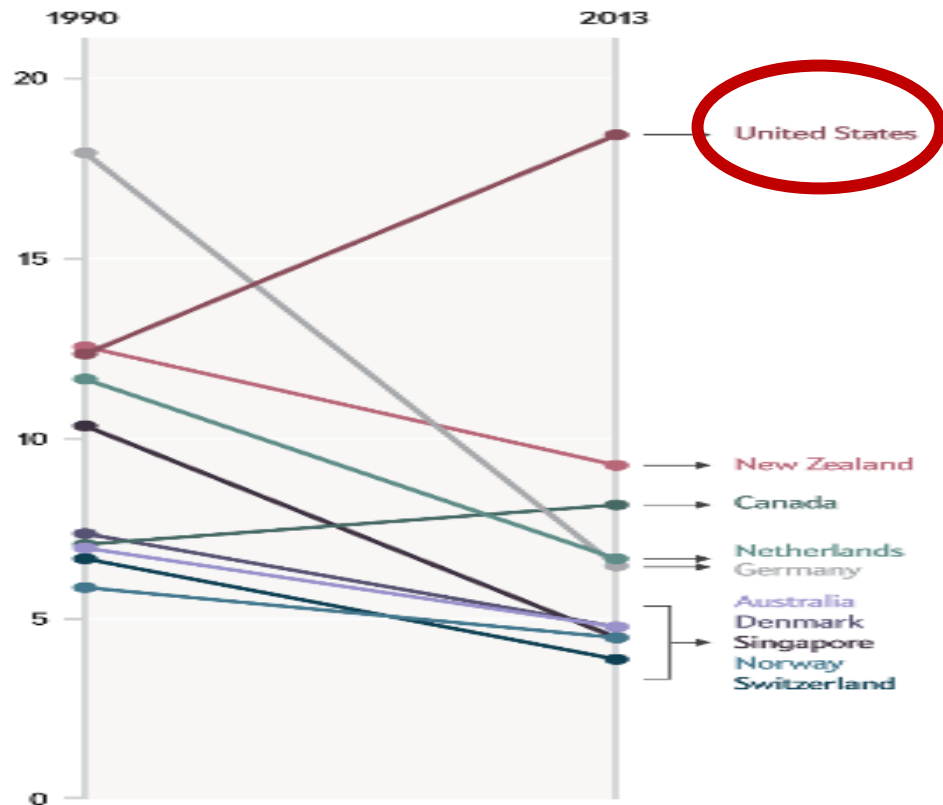
SOURCE: CDC/NCHS, National  
Vital Statistics System, Mortality.



**Life Expectancy at Birth US and OECD Countries by  
Gender 1960-2010**

# U.S. Ranked 49<sup>th</sup> in Maternal Mortality in 2008

Maternal Mortality Ratio (MMR) by Developed Country  
Maternal deaths per 100,000 live births



Source: Institute for Health Metrics and Evaluation

Graphic by Tiffany Farrant-Gonzalez, for **SCIENTIFIC AMERICAN**

U.S. maternal mortality rates continue to climb even as other developed countries improve.

African-American women were 3.2 times more likely to die due to pregnancy/childbirth than white women.

African-American  
**34.8 DEATHS**  
per 100,000 live births



Caucasian

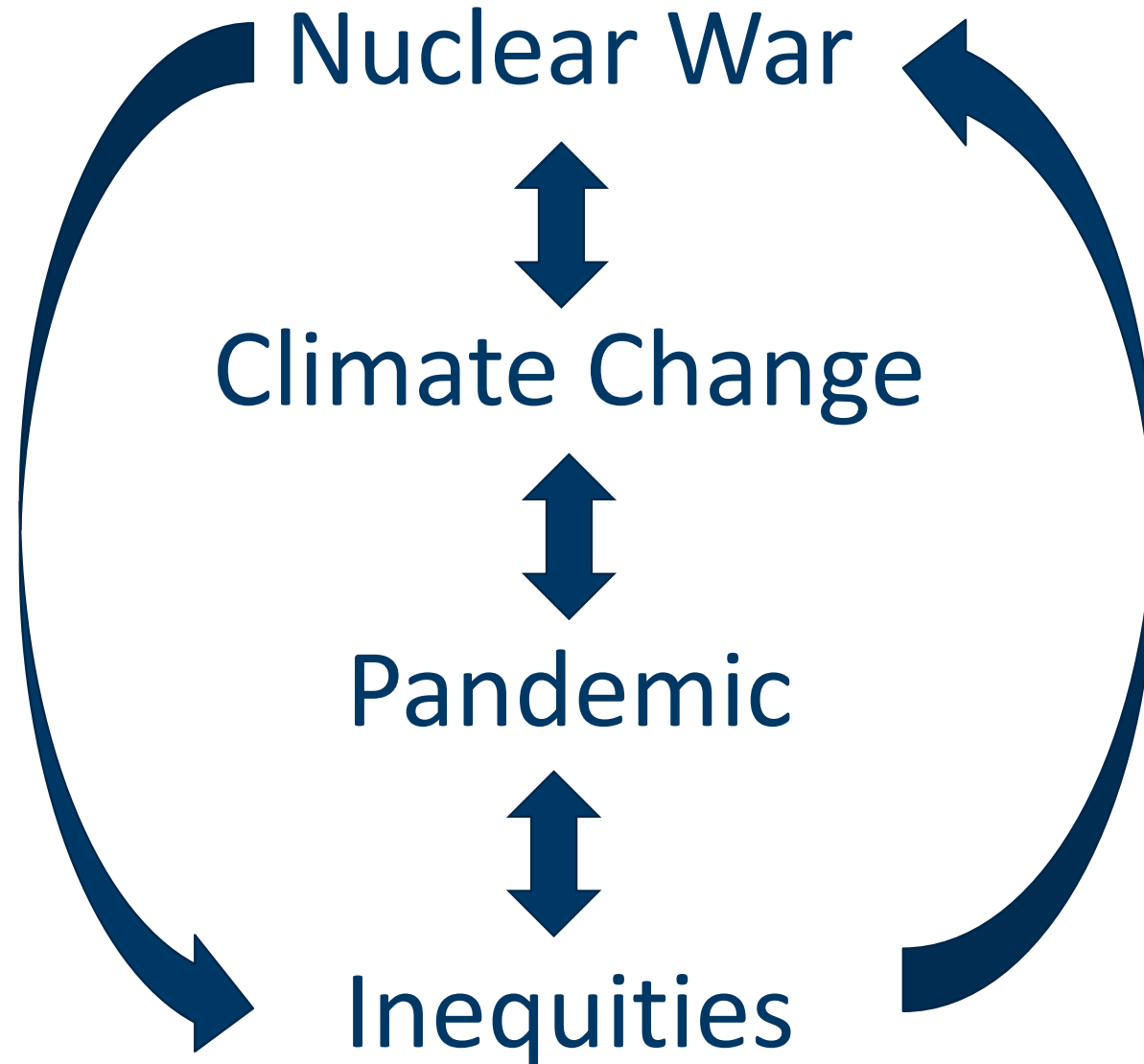
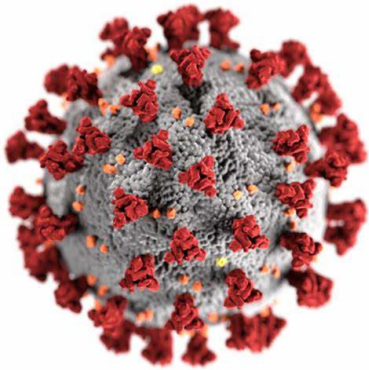
**11 DEATHS**  
per 100,000 live births



Data from UNICEF, WHO, UN Population Fund, and World Bank with standardized methodology.

# Why Should We Care About Equity?

## Equity and Social Justice are Existential Issues

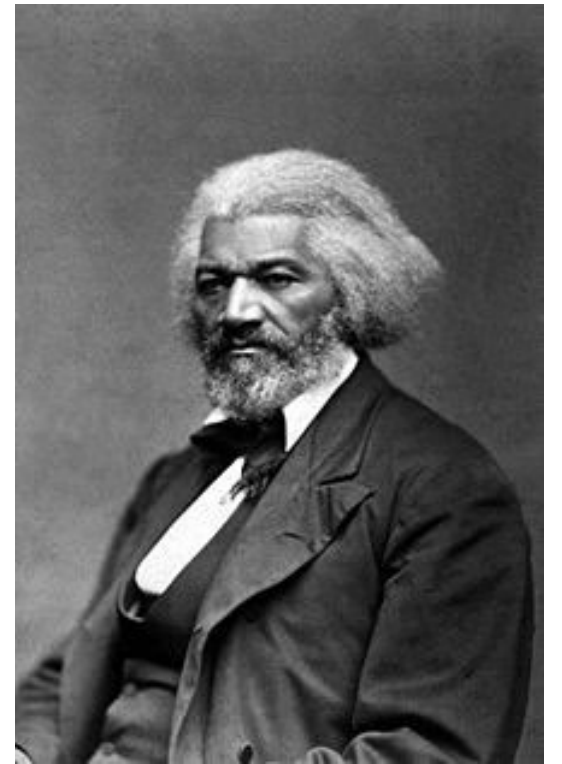




# Frederick Douglass

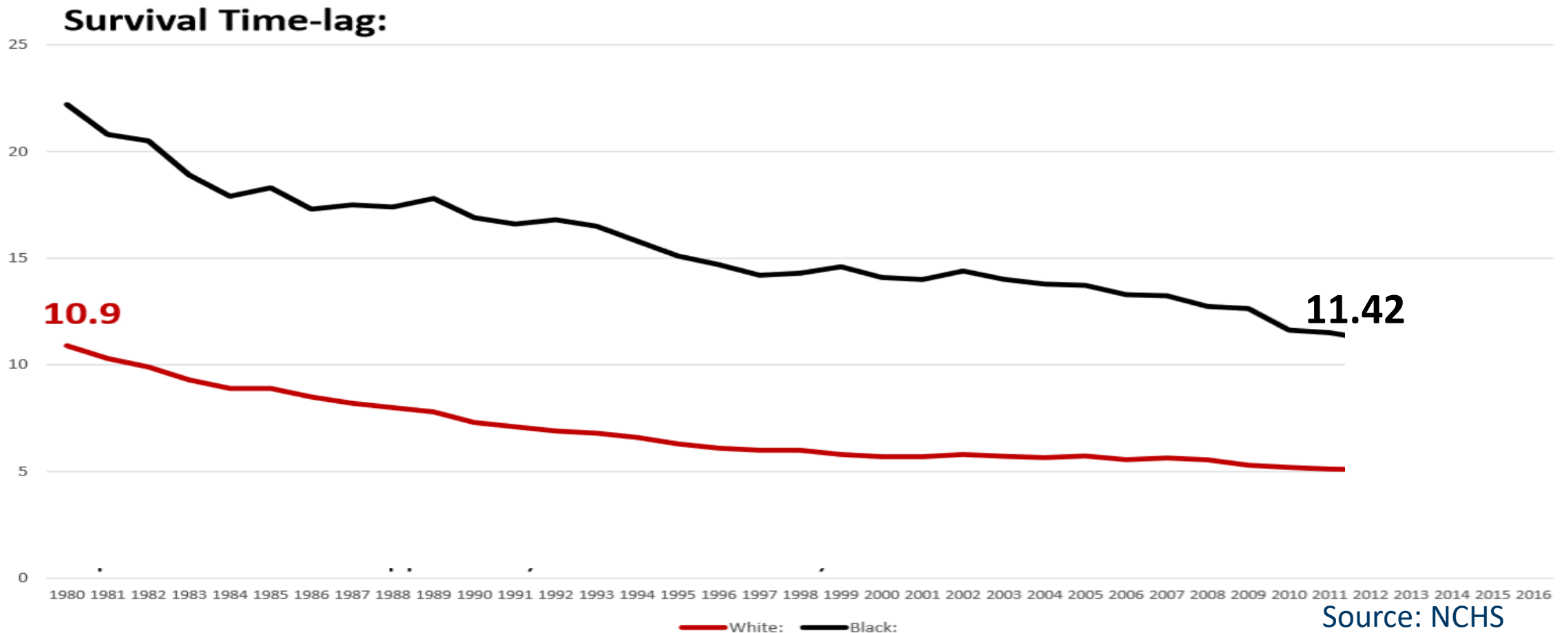
Social reformer, abolitionist, orator, writer, and statesman

*“Where justice is denied, where poverty is enforced, where ignorance prevails, and where any one class is made to feel that society is an organized conspiracy to oppress, rob and degrade them, neither persons nor property will be safe.”*



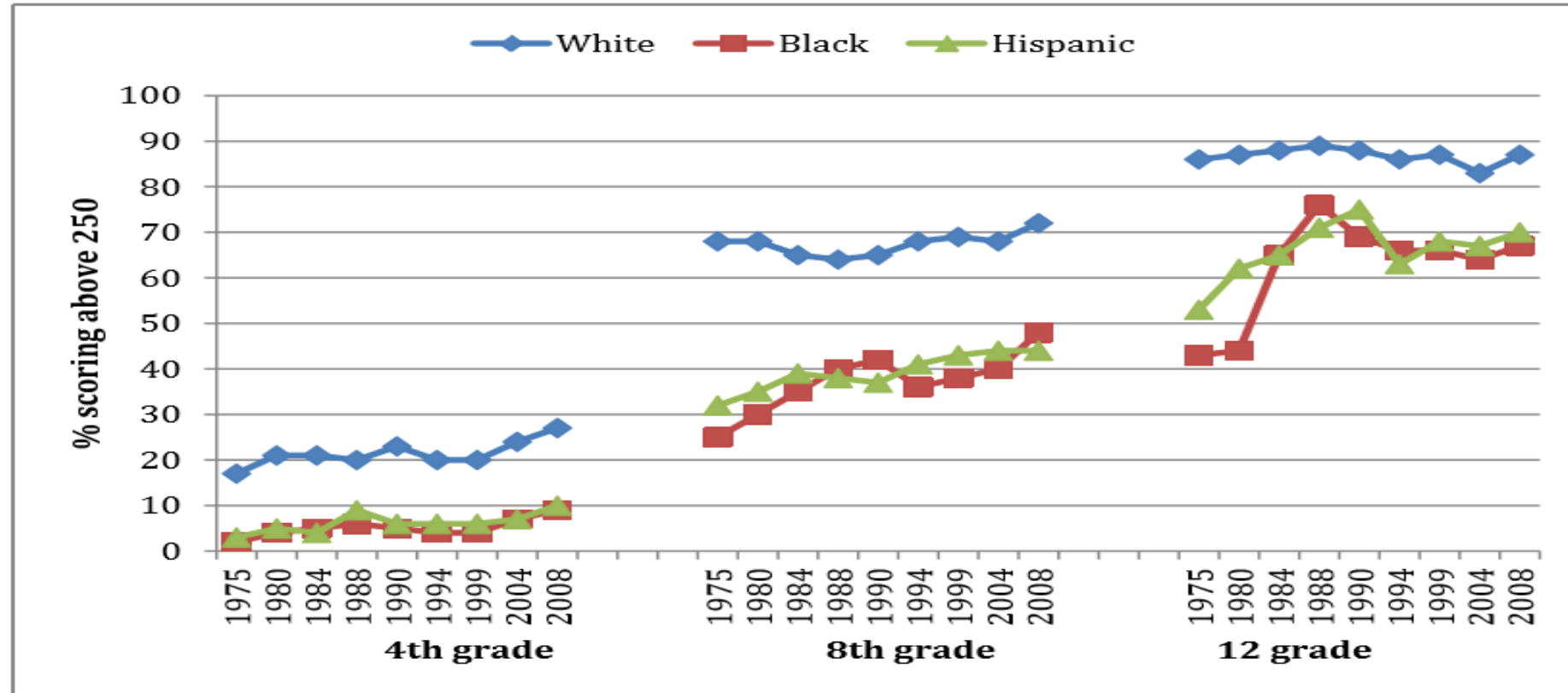
What we are doing to advance health equity is not working.  
And may, in fact, be inhibiting progress.

## US IMR, 1980-2016: White and Black Race



# What we are doing to advance educational equity is not working. And may, in fact, be inhibiting progress.

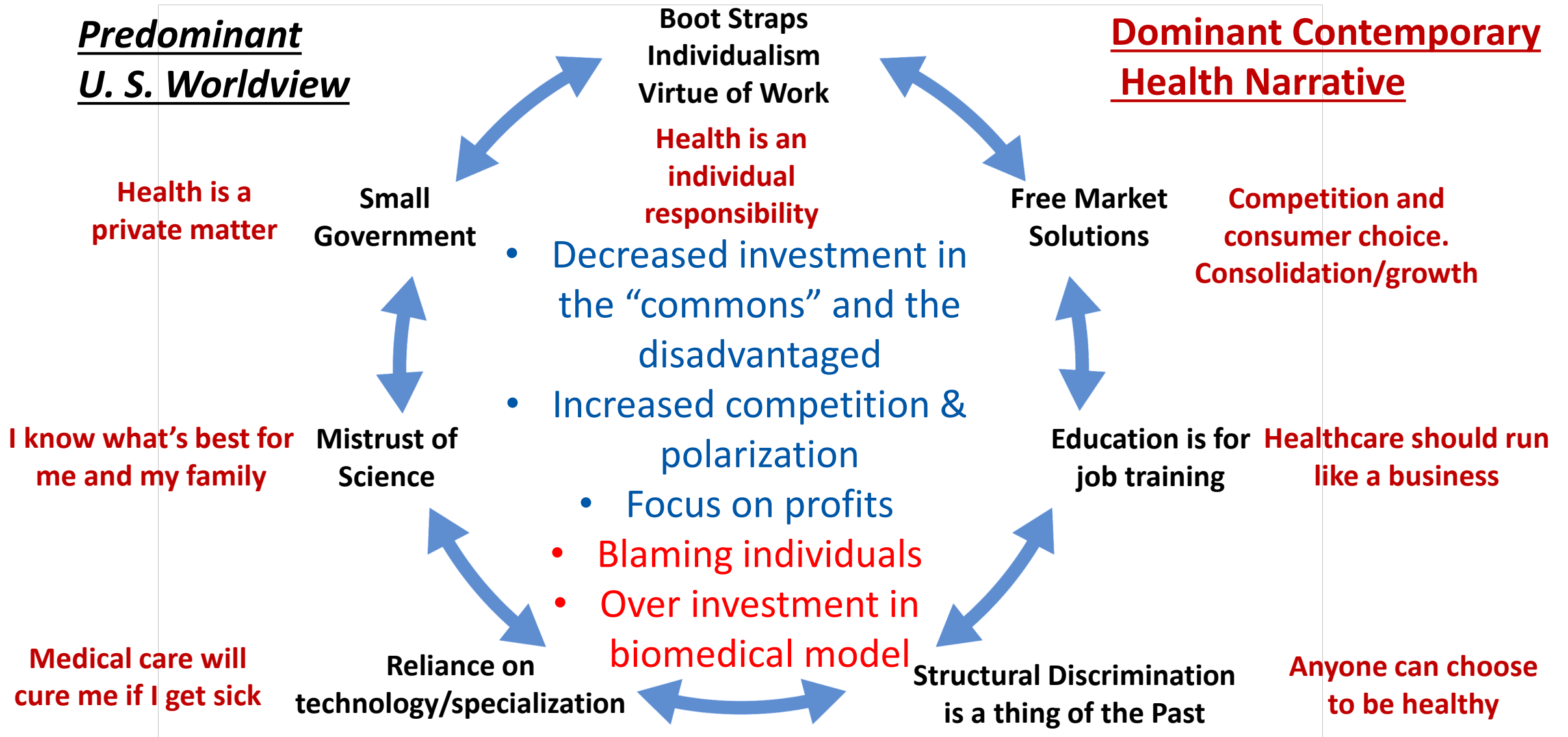
Figure 2: Percent Reading Scores at or above 250 for 4<sup>th</sup>, 8<sup>th</sup>, and 12<sup>th</sup> grades



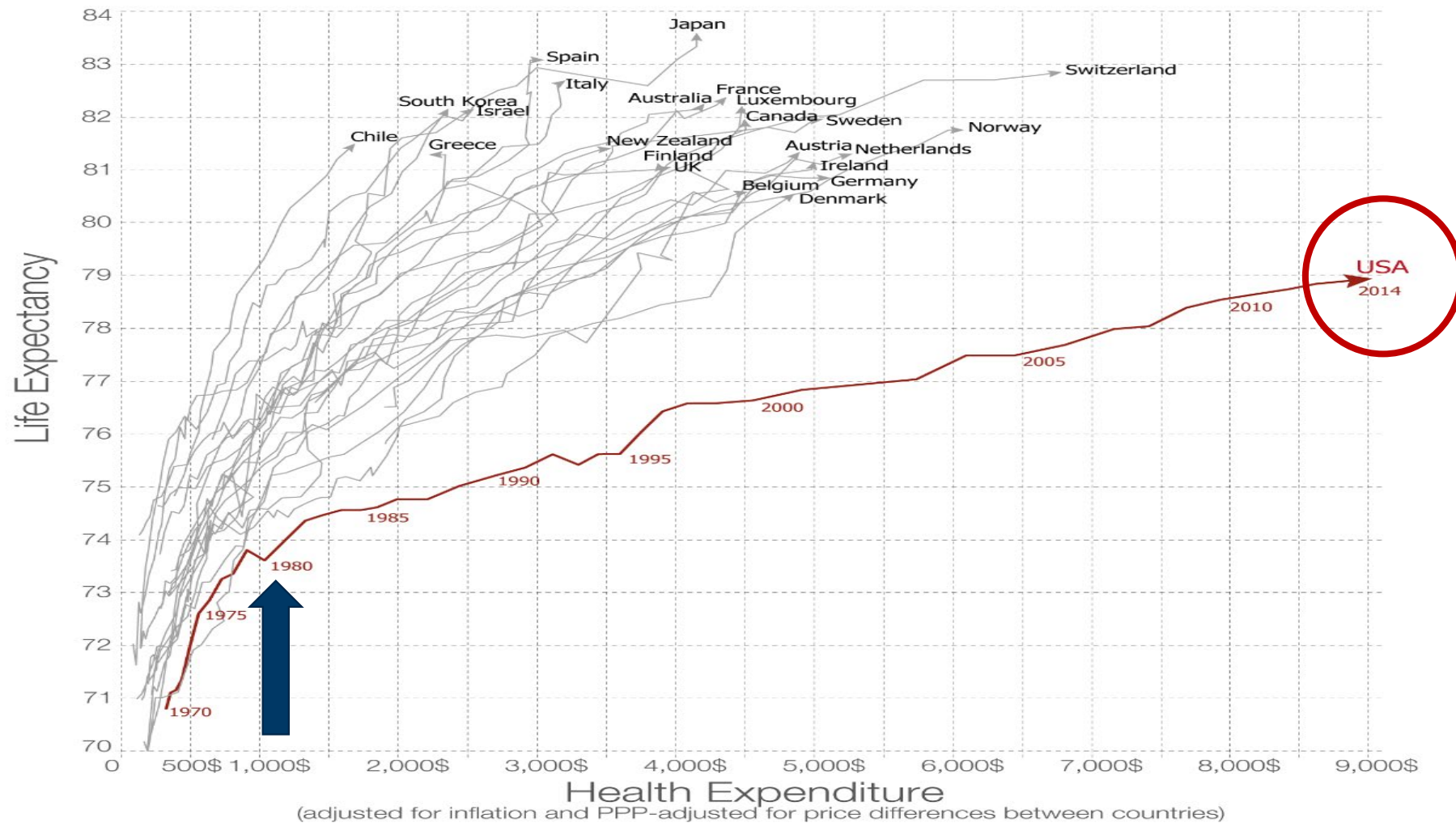
Source: Educational Digest, NAEP 2010; Reading scores above 250 reflect ability to search for specific information while reading, interrelate ideas and make generalizations about literature, science, and social studies materials.



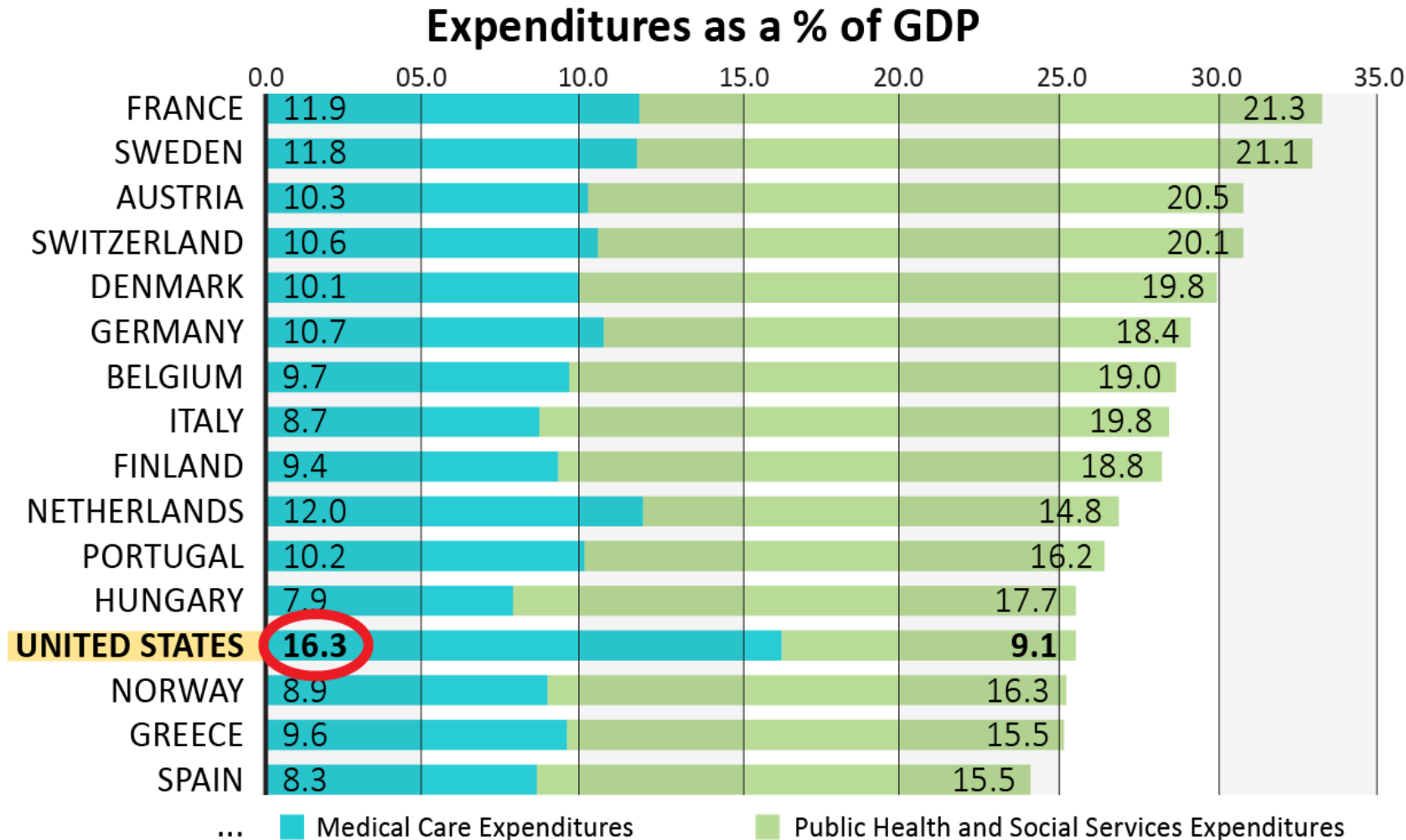
# How did we get to this point?



# Life expectancy vs health expenditures - U.S. and OECD Countries 1970 - 2014



# Total Investment in Health and Human Services



In OECD countries, for every \$1 spent on health care, about \$2 is spent on public health and social services.

In the U.S., for every \$1 spent on health care, about 55 cents is spent on public health and social services.



We need to change how we do our work

*“Public health is what we, as a society, do collectively to assure the conditions in which (all) people can be healthy.”*

*The Future of Public Health  
Institute of Medicine, 1988*

CHWs can help change the conditions in which people can be healthy.

# Living Conditions Impact Health

## Communities of Opportunity

- Social/economic inclusion
- Thriving small businesses and entrepreneurs
- Grocery stores
- Parks & trails
- Sufficient healthy housing
- Good transportation options and infrastructure
- Financial institutions
- Home ownership
- Better performing schools
- IT connectivity
- Strong local governance

Good  
Health  
Status

Poor  
Health  
Status

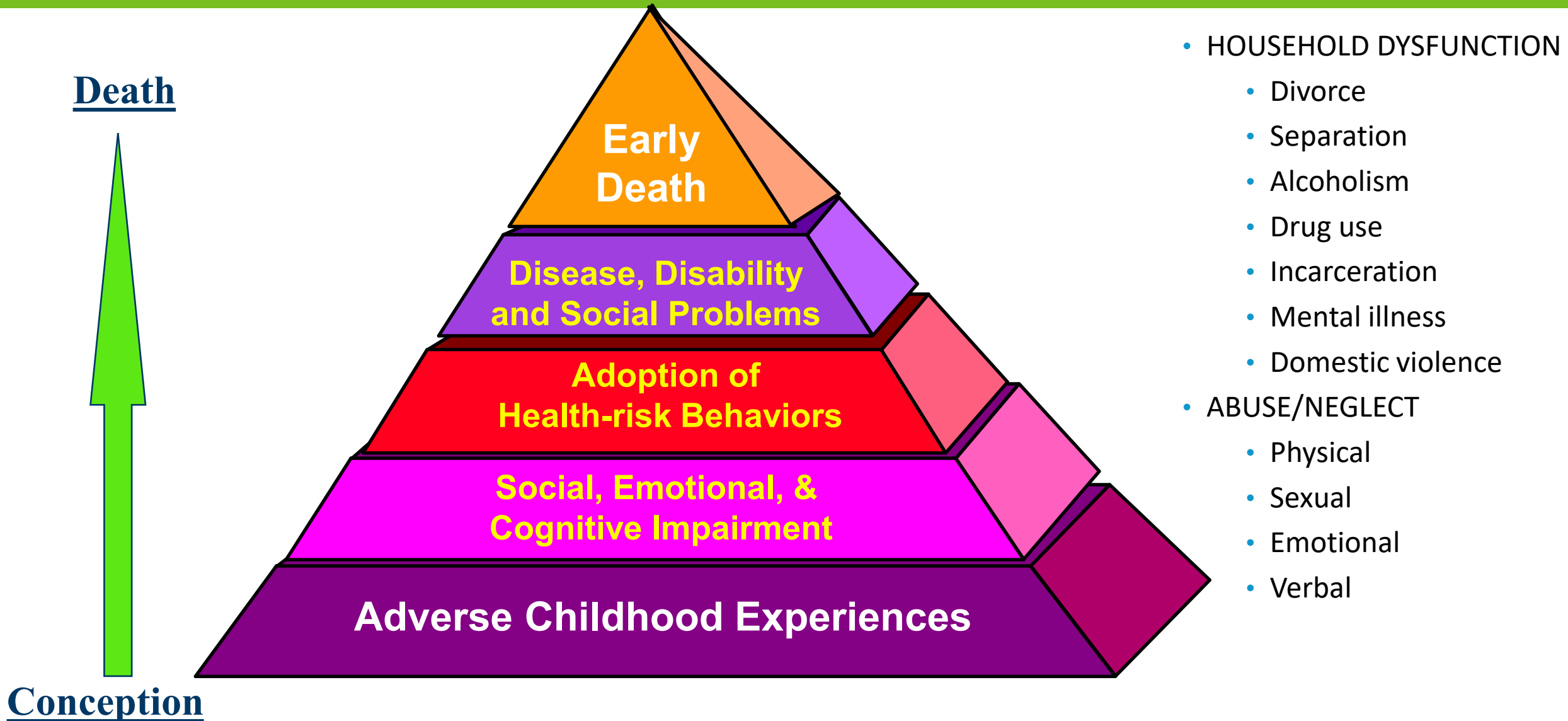
Contributes  
to health  
disparities:

- Obesity
- Diabetes
- Asthma
- Cancer
- Injury

## Low-Opportunity Communities

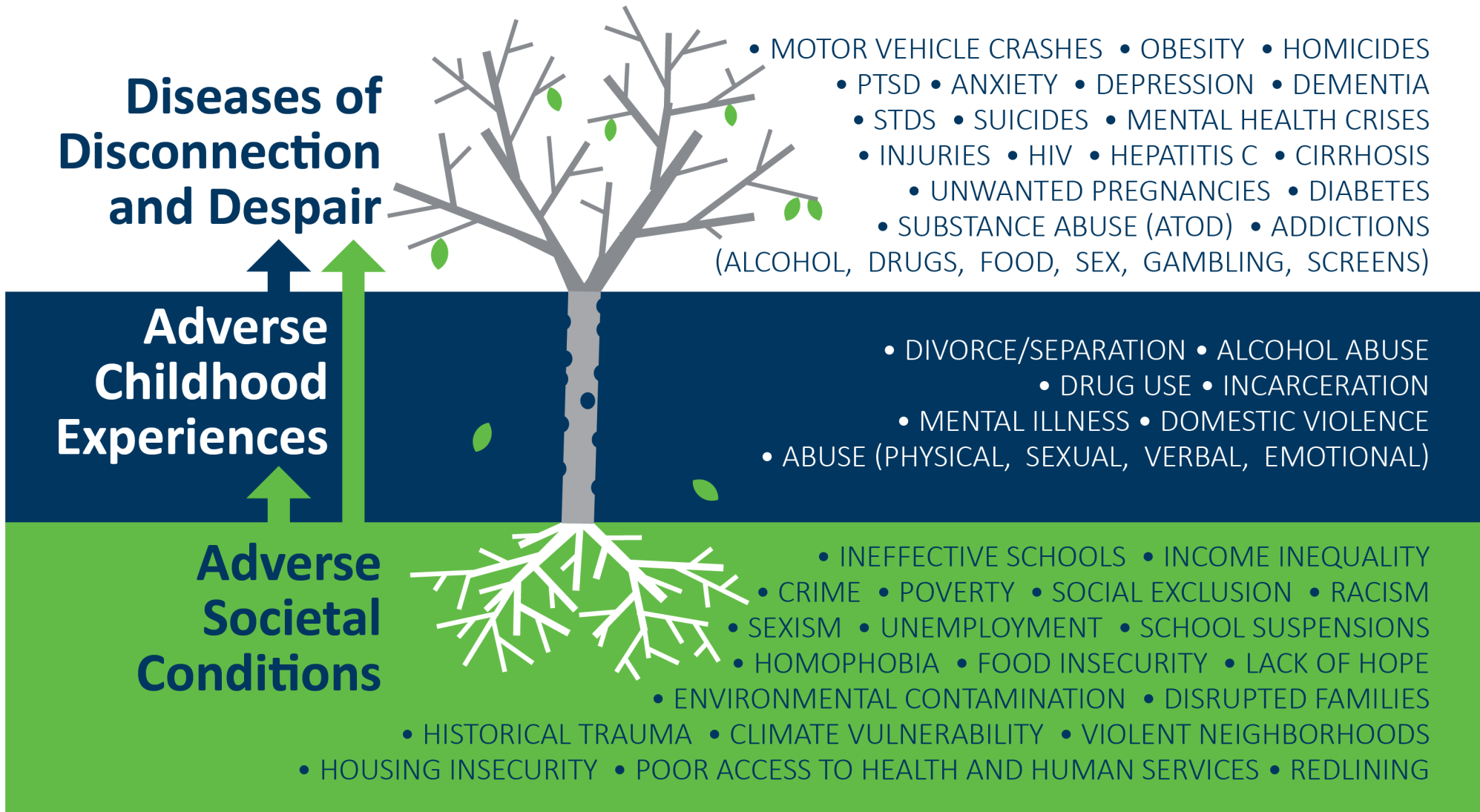
- Social/economic exclusion
- Few small businesses
- Fast food restaurants
- Unsafe/limited parks
- Rental housing/foreclosure
- Poor and limited housing stock
- Few transportation options
- Payday lenders
- Poor performing schools
- Pollution/contaminated drinking water
- Limited IT connections
- Weak local governance

# Adverse Childhood Experiences (ACEs) Impact Long-term Health

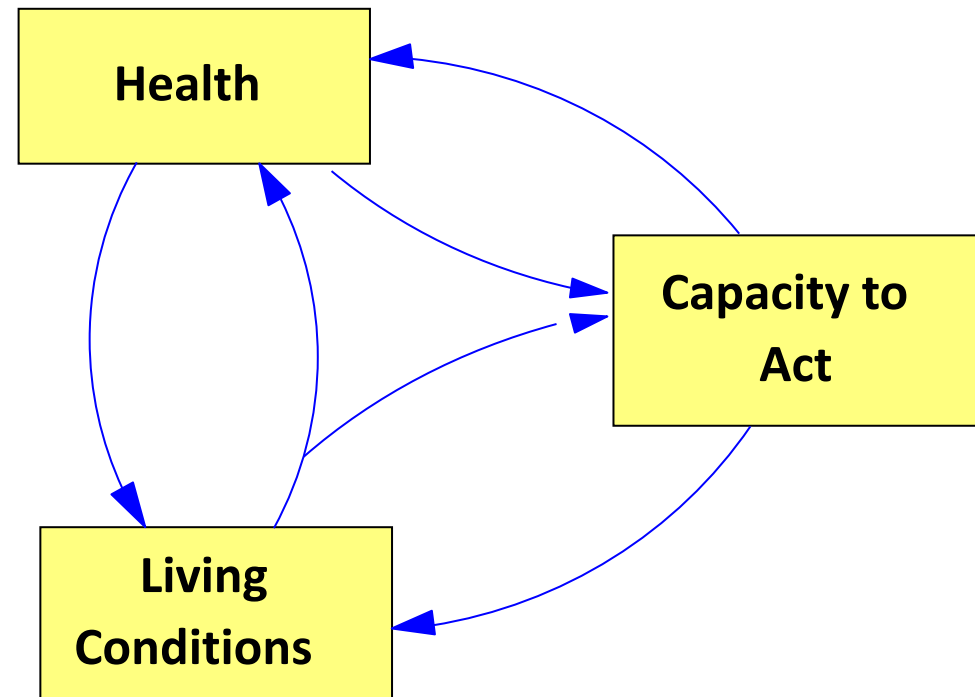




# Diseases of Disconnection and Despair



# Changing the Conditions that Affect Health Requires the Capacity to Act



# How do we change the conditions that impact health?

## Create/Strengthen our “**Capacity to Act**”

### Organize:

**Resources:** Identify/shift the way resources, systems and processes are structured.

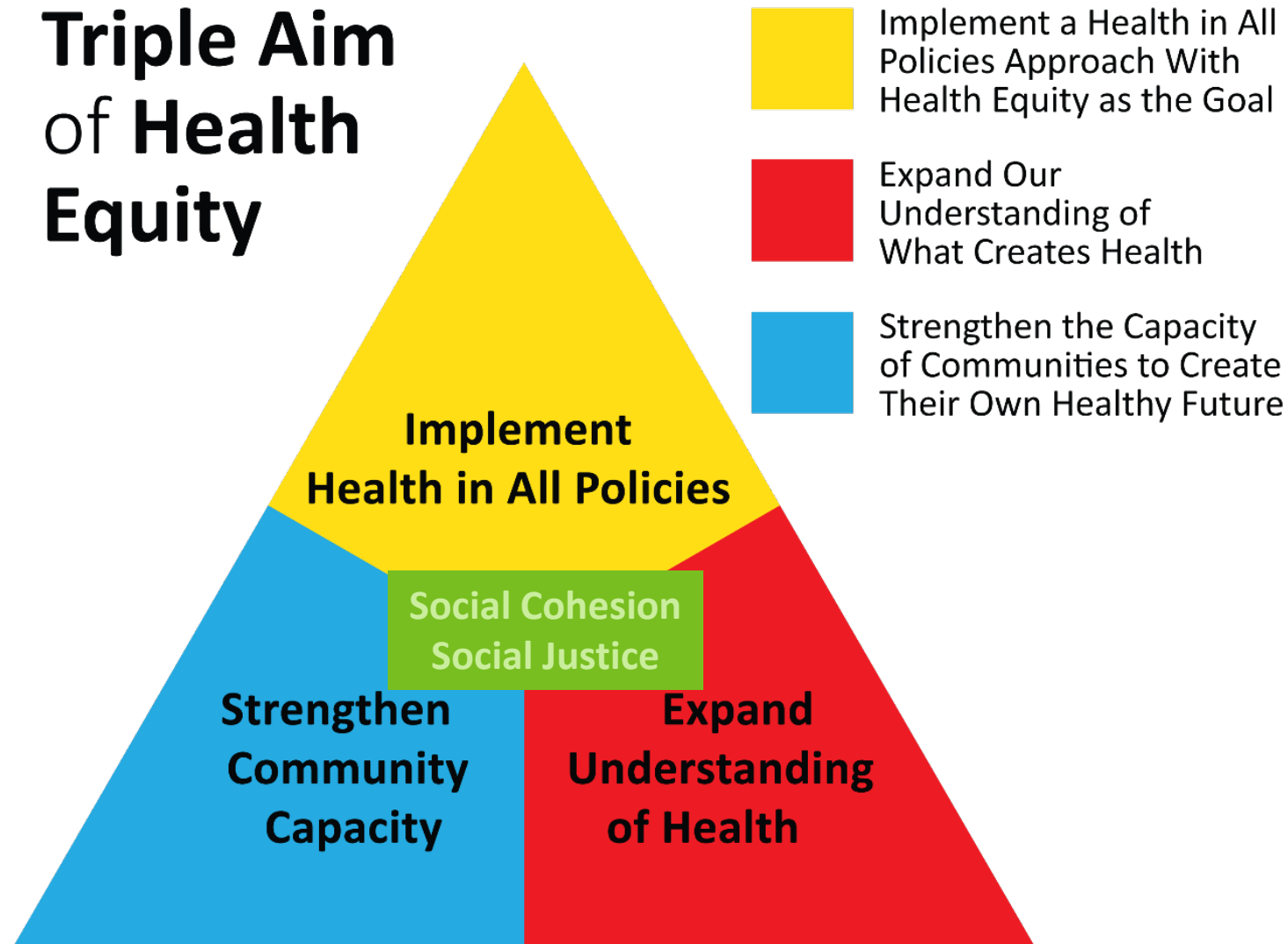
**People:** Directly impact decision makers, develop relationships, align interests.



**Narrative:** Align the narrative to build public understanding and public will.

# To Advance Health Equity and Optimal Health for All we need to influence policies and change living conditions

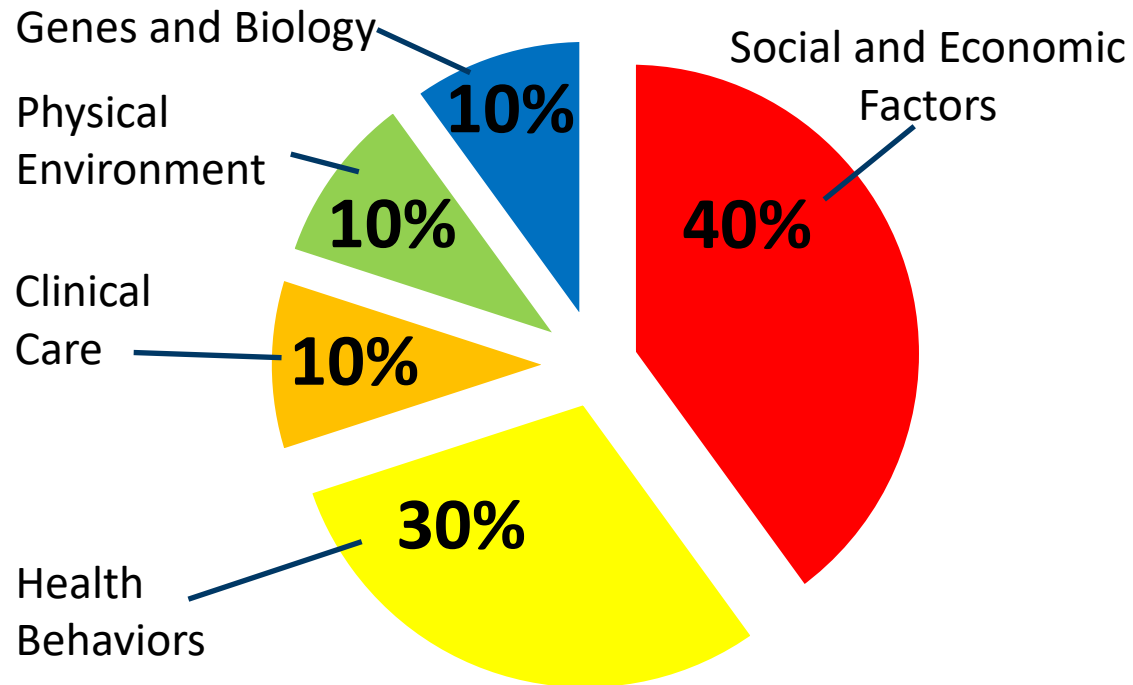
## Triple Aim of Health Equity





# Expand the Understanding of What Creates Health

## Determinants of Health



## Vital conditions for health (WHO)

- Peace
- Shelter
- Education
- Food
- Income
- Stable eco-system
- Sustainable resources
- Social justice and equity
- IT connectivity
- Mobility

**Conditions and circumstances in which people are born, live, work, and age**

Determinants of Health Model based on frameworks developed by: Tarlov AR. *Ann N Y Acad Sci* 1999; 896: 281-93; and Kindig D, Asada Y, Booske B. *JAMA* 2008; 299(17): 2081-2083.

World Health Organization. Ottawa charter for health promotion. International Conference on Health Promotion: The Move Towards a New Public Health, November 17-21, 1986 Ottawa, Ontario, Canada, 1986. Accessed July 12, 2002 at <http://www.who.int/hpr/archive/docs/ottawa.html>.

# Top Ten Causes of Death: 1850 – 1900 – 2000

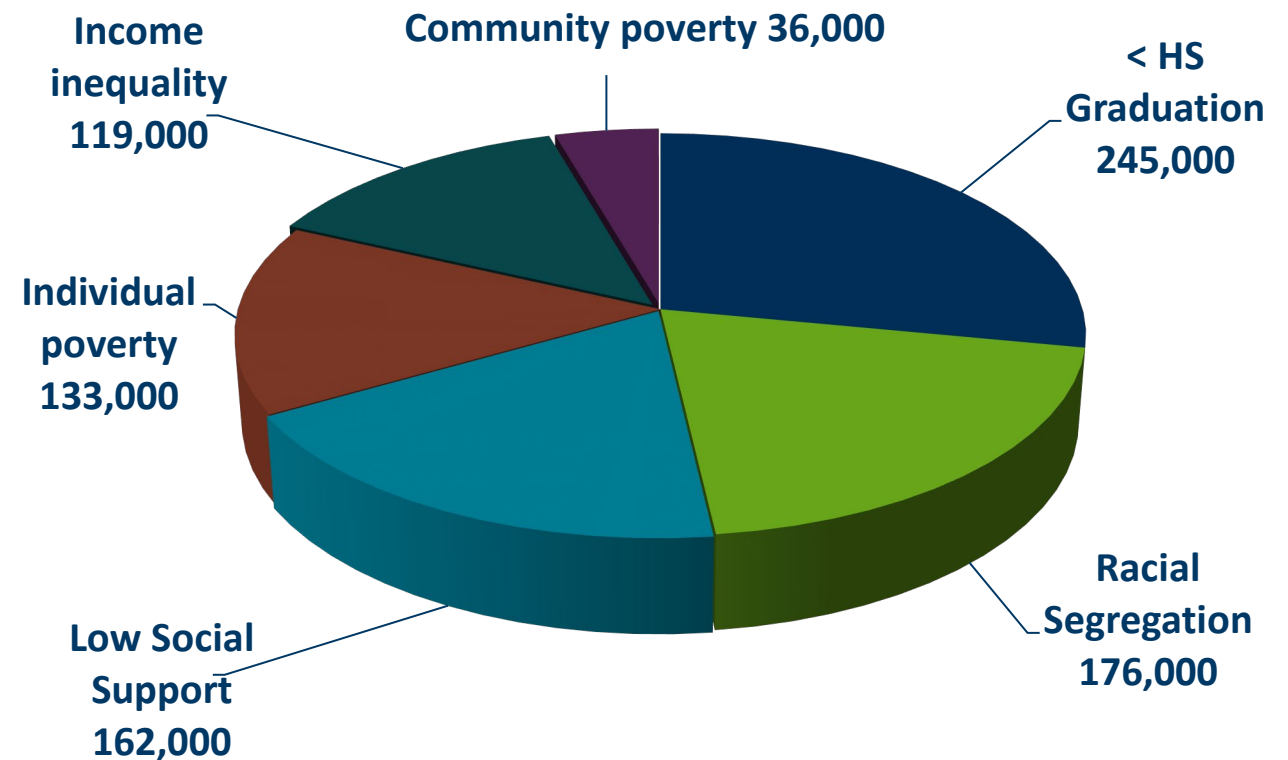
## Death Certificate Causes

1850	1900	2000
Tuberculosis	Pneumonia	Heart disease
Dysentery/diarrhea	Tuberculosis	Cancer
Cholera	Diarrhea	Stroke
Malaria	Heart Disease	Lung disease
Typhoid Fever	Stroke	Accidents
Pneumonia	Liver Disease	Diabetes
Diphtheria	Accidents	Pneumonia/Influenza
Scarlet Fever	Cancer	Alzheimer's disease
Meningitis	Diseases of Old Age	Kidney disease
Pertussis	Diphtheria	Blood poisoning

# Actual Causes of Death

## The new social/environmental issues

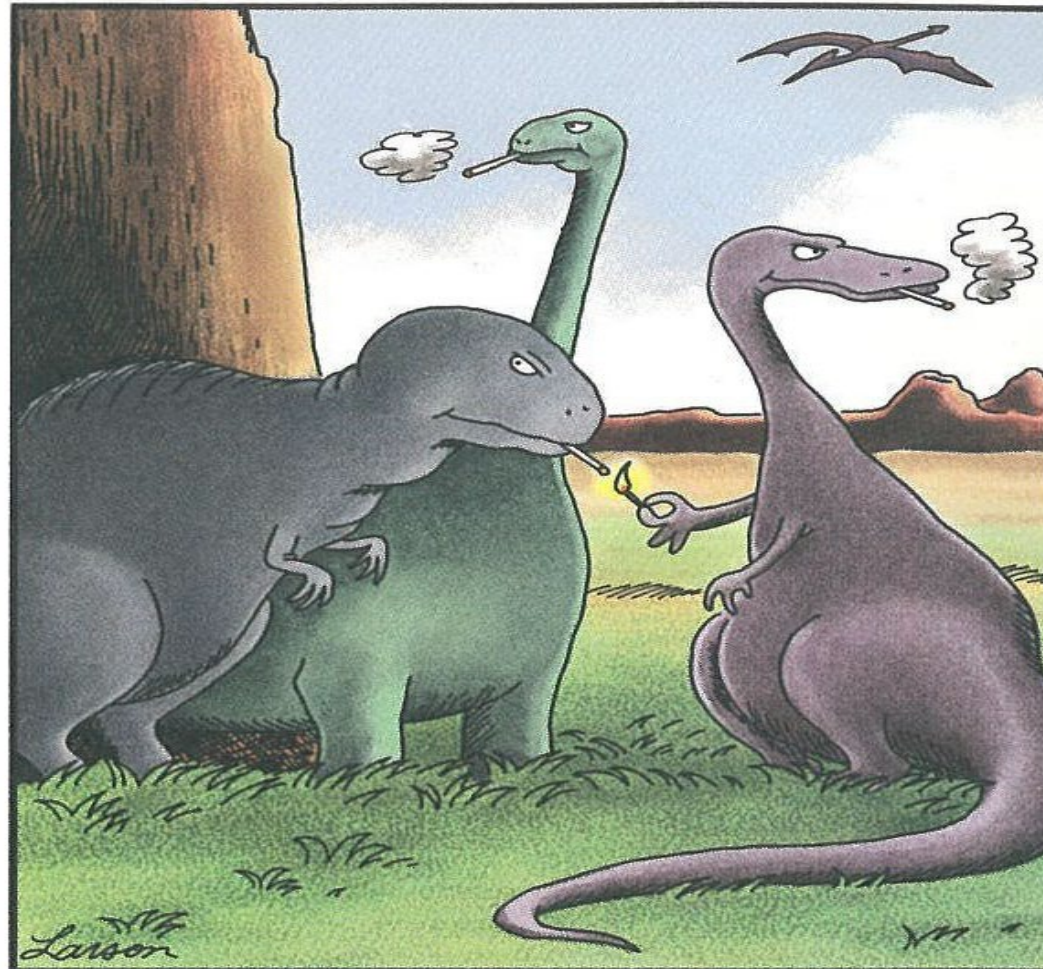
Cause of Death	#	% of total deaths
Tobacco	435,000	18%
Diet/activity	400,000	16%
Alcohol	85,000	4%
Microbial agents	75,000	3%
Toxic agents	55,000	2%
Firearms	29,000	1%
Sexual behavior	20,000	<1%
Motor vehicles	43,000	<1%
Illicit use of drugs	17,000	<1%



Cause of Death	Number of Deaths
Tobacco	435,000
Diet/Activity	365,000
Less than High School Graduation	245,000
Racial Segregation	176,000
Low Social Support	162,000
Individual Poverty	133,000
Income Inequality	119,000
Alcohol	85,000 (Other Drugs add 75,000)
Microbial Agents	75,000
Toxic Agents	55,000
Community Level Poverty	36,000
Firearms	29,000



# Is the healthy choice a possible choice?



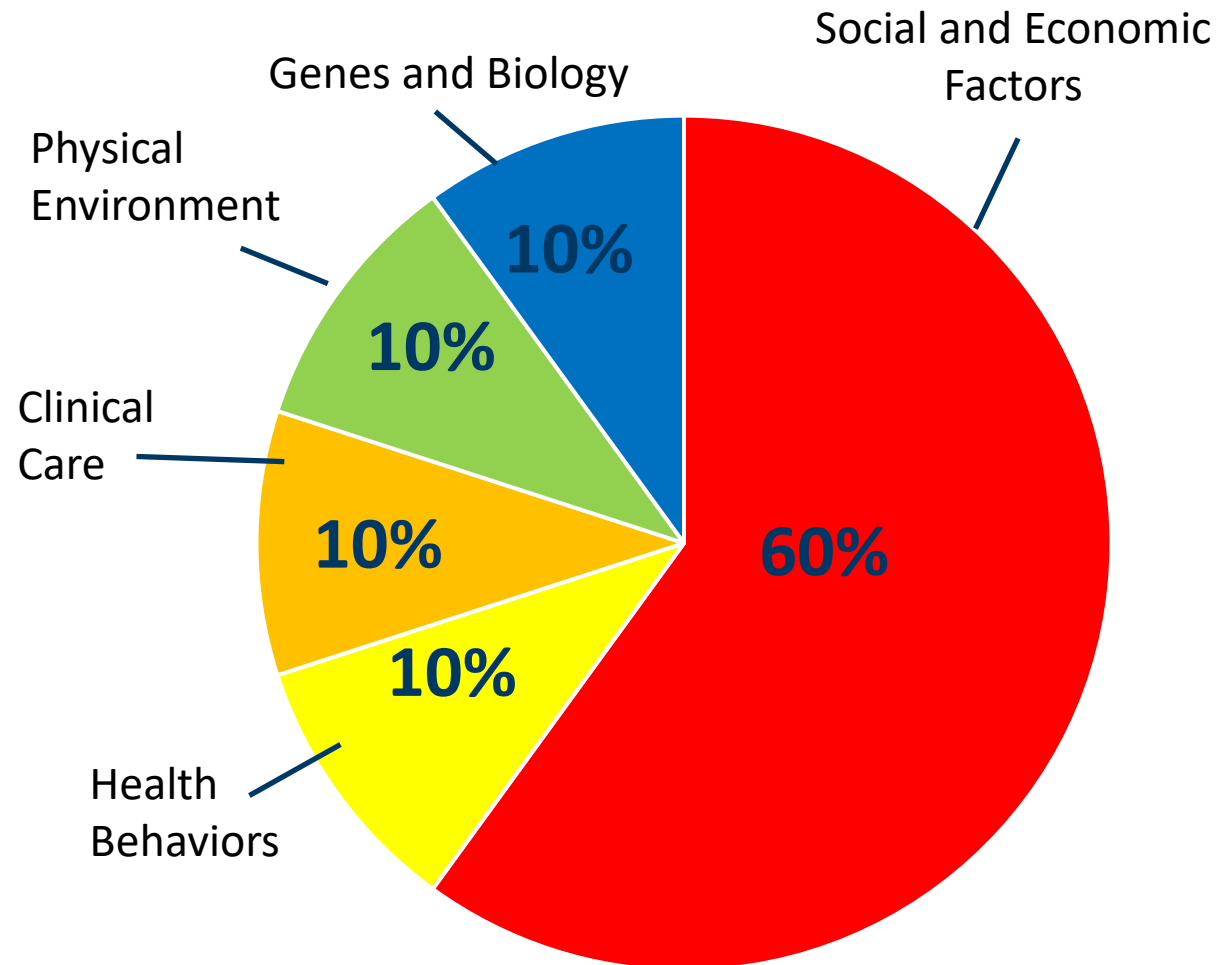
The real reason dinosaurs became extinct



**States:**

- marketing tobacco
- marketing alcohol
- marketing soda (by

# Expand the Understanding of What Creates Health



## **Social Determinants of Health** (Vital Conditions for Community Well-being)

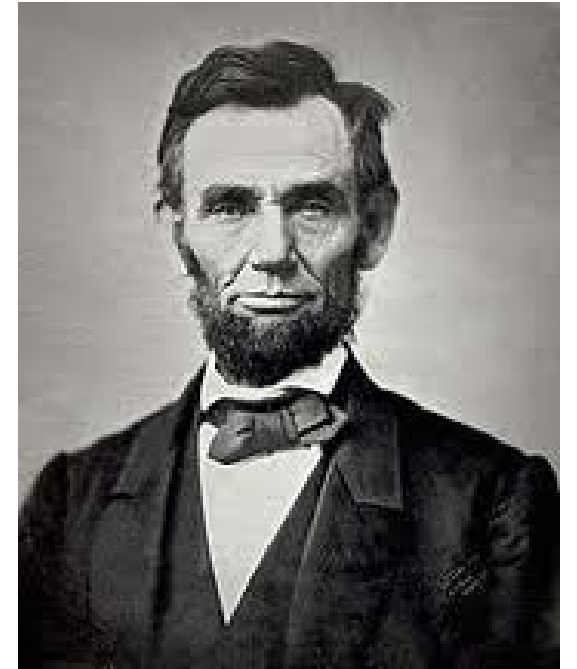
- Shaped by the distribution of money, power, social policies, & politics that are beyond the control of the individual.
- Disproportionately affect individuals from Black, brown, and Indigenous communities.
- **Structural racism**

Ehlinger's beliefs about the contributions to health determinants

# Expand our understanding about what creates health: Importance of Narrative

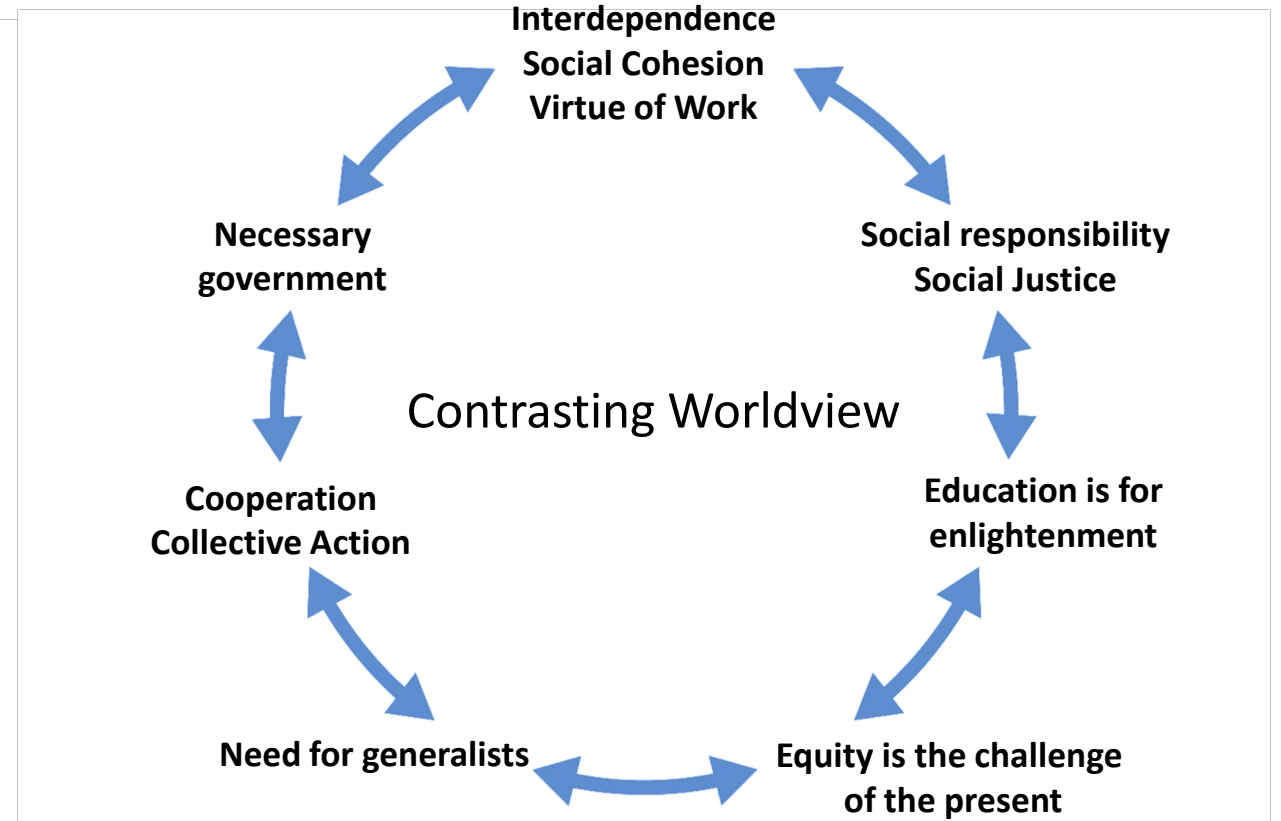
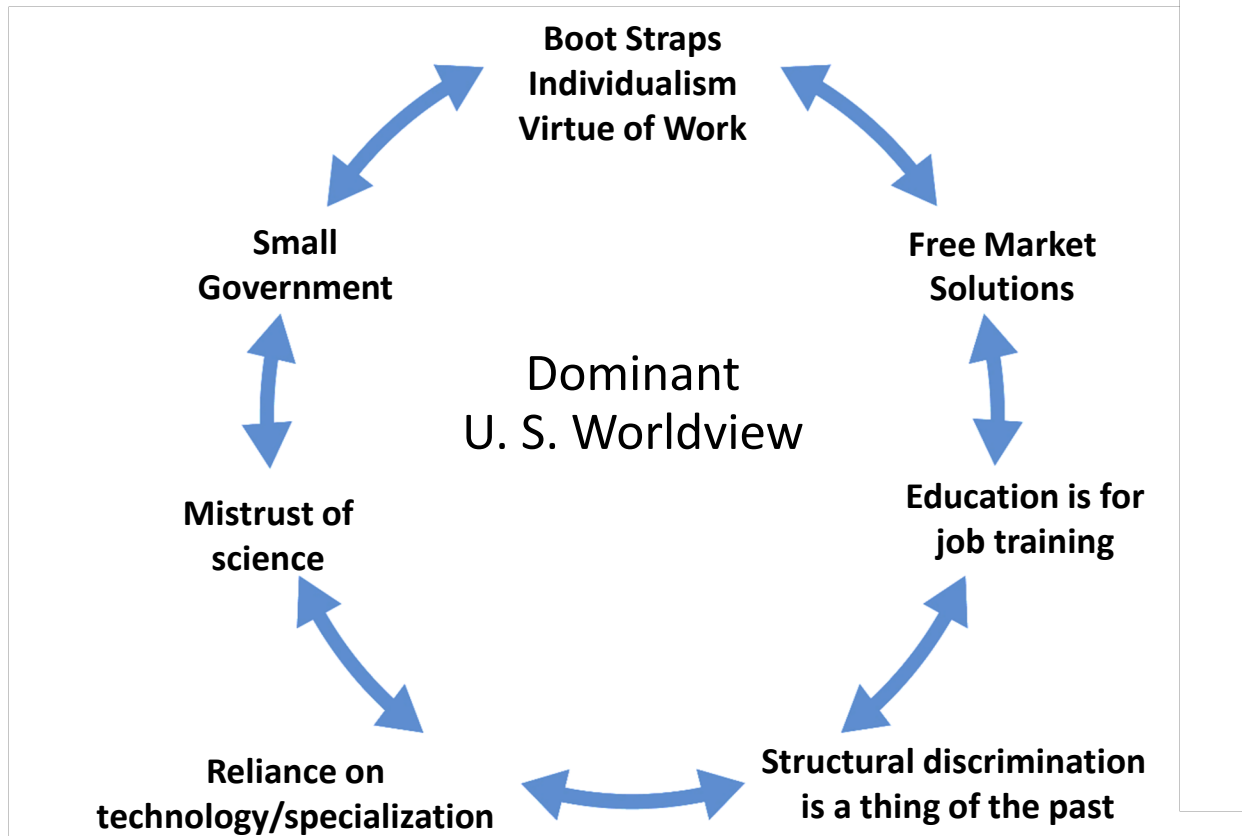
*“Public sentiment is everything. With public sentiment, nothing can fail; without it nothing can succeed.”*

-Abraham Lincoln



# Expand the understanding about what creates health.

## Contrasting/Alternative Worldviews





# Alternative Health Narrative



# Change the Narrative about what is health?

*"Health is*

*the absence of disease or infirmity)."*

# Implement a Health in All Policies and Sectors Approach with Health Equity as the Goal

- **Minimum Wage**
- **Paid Leave**
- **Criminal justice**
- **Energy**
- **Transportation**
- **Broadband connectivity**
- **E-Health**
- **Housing/Homelessness**



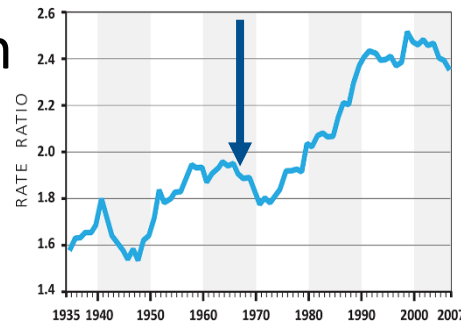
- **Air/Water quality**
- **Ag Buffer strips**
- **Food Charter**
- **Marriage Equity**
- **Payday Lending**
- **Freedom to Breathe**
- **Health Care Reform**
- **Climate Change**

**This should be the Portfolio of CHWs**

# War on Poverty Components

## 1965-1967 - 89<sup>th</sup> Congress

- Title V – C & Y, MIC, FP Projects
- Head Start
- Medicare and Medicaid
- School lunch program
- Neighborhood health centers
- Food stamps
- Elementary & Higher Education Act
- Education of the Handicapped Act
- Housing & Urban Development Act
- Voting Rights Act
- Vocational Rehabilitation
- Job Corps
- VISTA
- Peace Corps



- Older Americans Act
- Freedom of Information Act
- Cigarette labeling and advertising act
- Public Works & Economic Development Act
- National Foundation on the Arts and Humanities Act
- Immigration and Nationality Act
- Motor Vehicle Air Pollution Control Act,
- Highway Beautification Act,
- National Traffic and Motor Vehicle Safety Act
- National Historic Preservation Act,
- National Wildlife Refuge System Act,
- Department of Transportation Act,
- Etc.



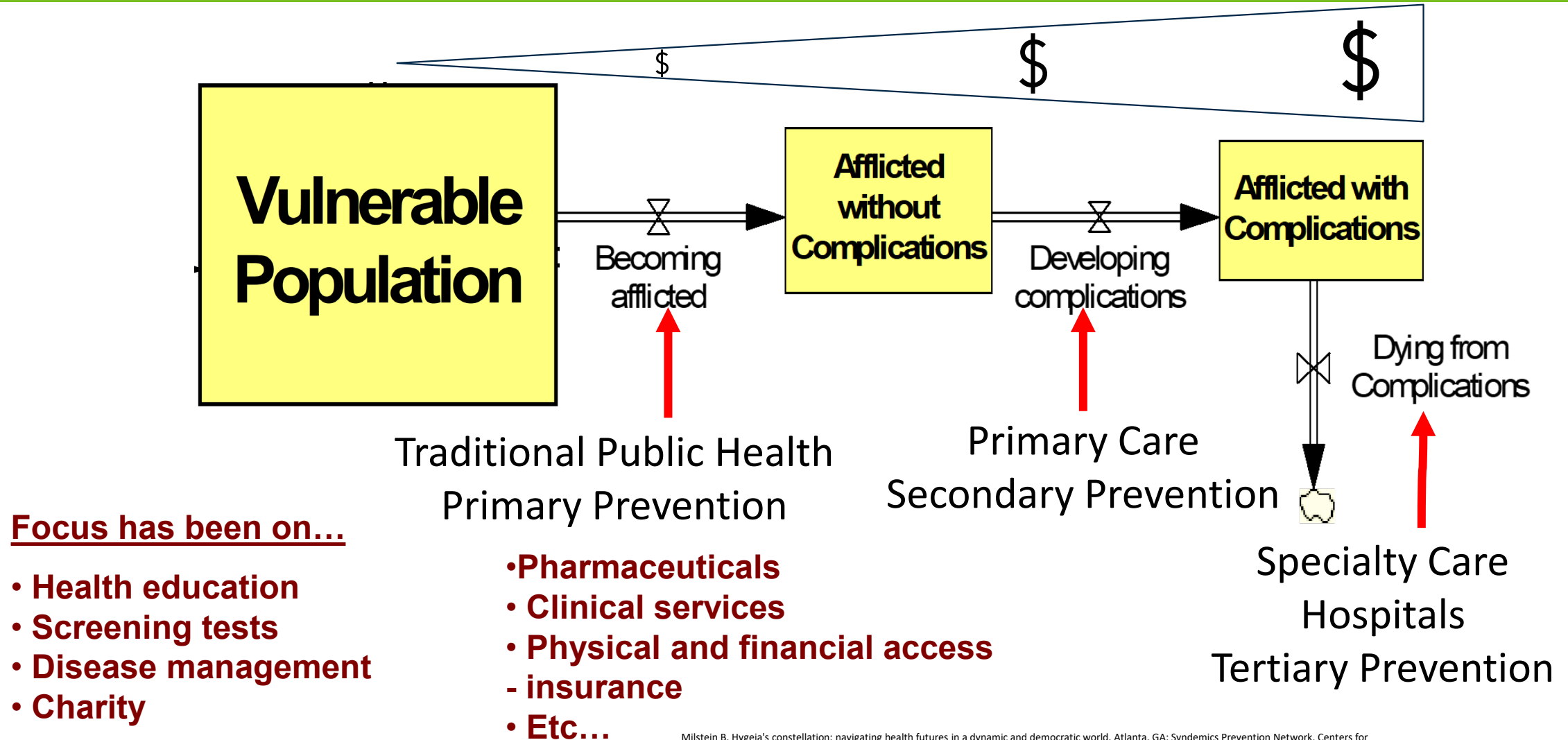
# A Brief History of Community Health Worker Programs

## Henry Perry, September 18, 2013

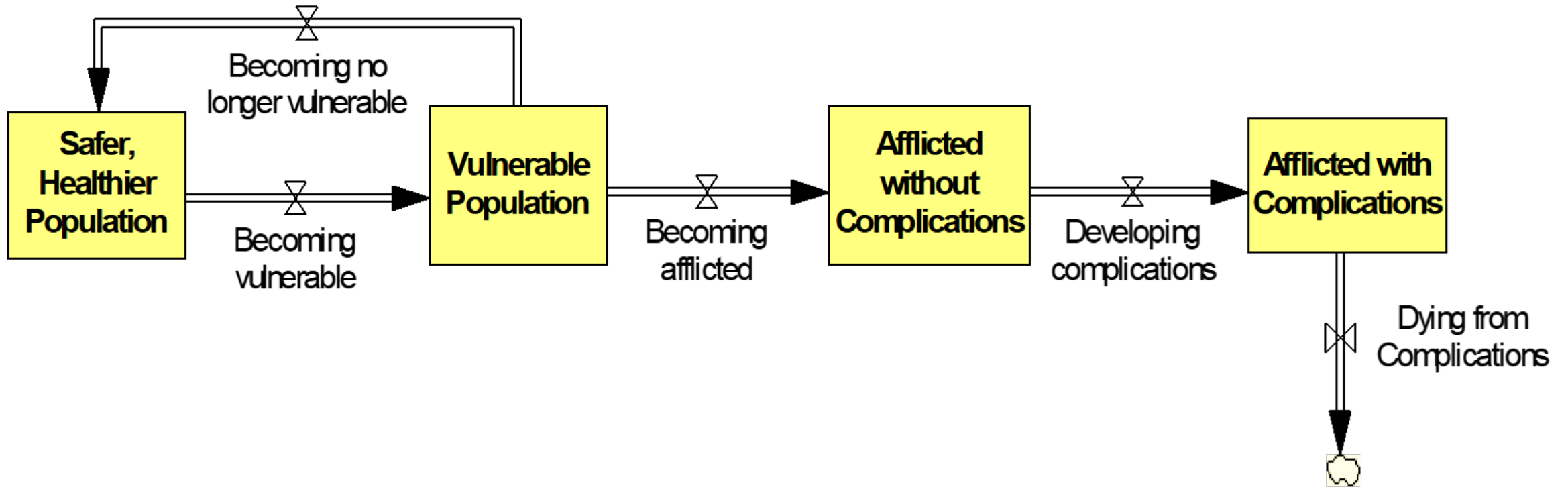
*“...the (early CHW) movement incorporated two agendas: the first was a **service-oriented agenda** of extension of preventive and curative services within the existing health system, while the second was a **transformative agenda** concerned with engagement of communities in the process of taking responsibility for their health, and addressing the environmental, social, and cultural factors that produce ill health, including inequity and deep poverty.”*

[https://www.mchip.net/sites/default/files/mchipfiles/02\\_CHW\\_History.pdf#:~:text=The%20first%20Community%20Health%20Workers%20%28CHWs%29%20were%20%E2%80%98%E2%80%99Farmer,emerge%20in%20various%20countries%2C%20particularly%20in%20Latin%20America.](https://www.mchip.net/sites/default/files/mchipfiles/02_CHW_History.pdf#:~:text=The%20first%20Community%20Health%20Workers%20%28CHWs%29%20were%20%E2%80%98%E2%80%99Farmer,emerge%20in%20various%20countries%2C%20particularly%20in%20Latin%20America.)

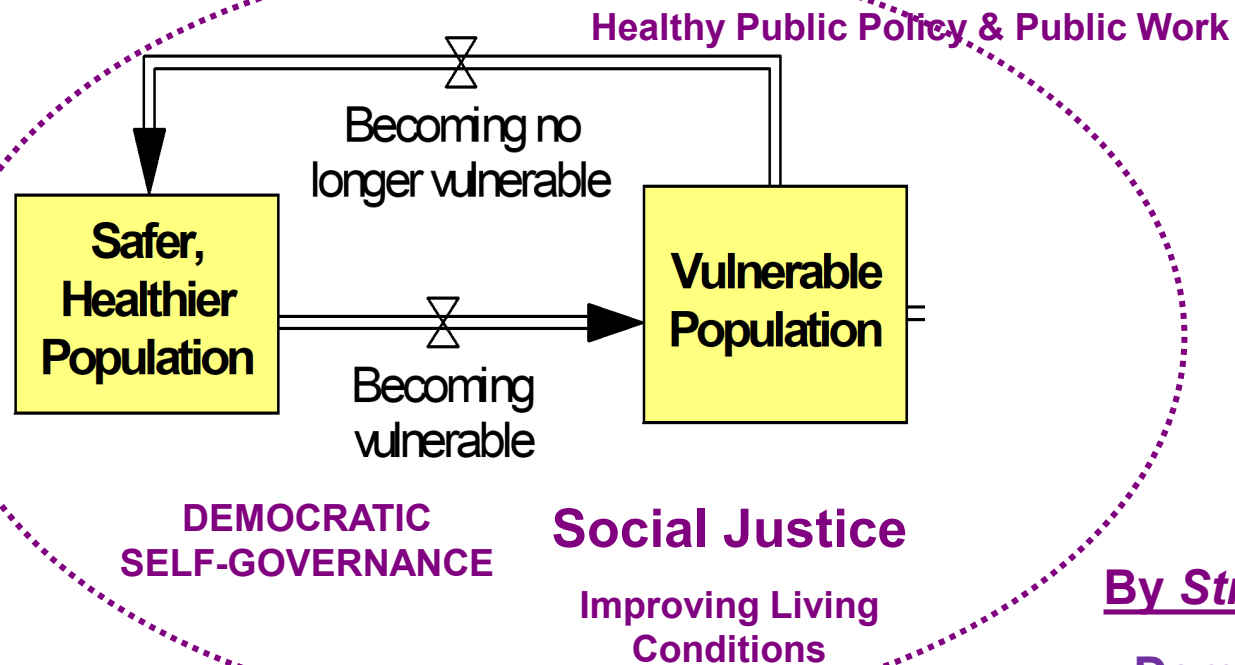
# Strengthen the Capacity of Communities to Create Their Own Healthy Future



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*"...the community in the fullest sense is the smallest unit of health...to speak of the health of an isolated individual is a contradiction in terms."*

*Wendell Berry*

## By Strengthening...

- Democracy
- Food and Water Sovereignty
- Mutual accountability
- Leaders and institutions
- Plurality
- The meaning of work, etc....

## World of Transforming...

- Deprivation
- Dependency
- Violence
- Disconnection
- Environmental decay
- Stress
- Insecurity
- Etc...

**This is where CHWs can be most influential!**

# Social Cohesion/Belonging

*“The greatest epidemic today is not TB, HIV or leprosy, it is being unwanted. Being unwanted, unloved, uncared for, forgotten by everybody is a much greater hunger, a much greater poverty, than the person who has nothing to eat.”*



**Mother Teresa  
Saint Teresa of Calcutta**



# Social Cohesion

## Social Justice

- A community ethic that works toward the well-being of and embraces a responsibility for all community members, fights exclusion and marginalization, promotes trust, and creates a sense of belonging.
- Elements of **social cohesion** are:
  - **social capital** – the resources that result from people working together toward a common goal,
  - **social mobility** – the ability to move up in social or economic status,
  - **social inclusion** – having connection to, ownership of, and responsibility for community goals; having a **sense of belonging** – being wanted & needed.



# Health is in relationships – Health is in community

*“A proper community is a commonwealth: It answers the needs, practical as well as social and spiritual, of its members - among them the need to need one another.”* *The Art of the Commonplace*

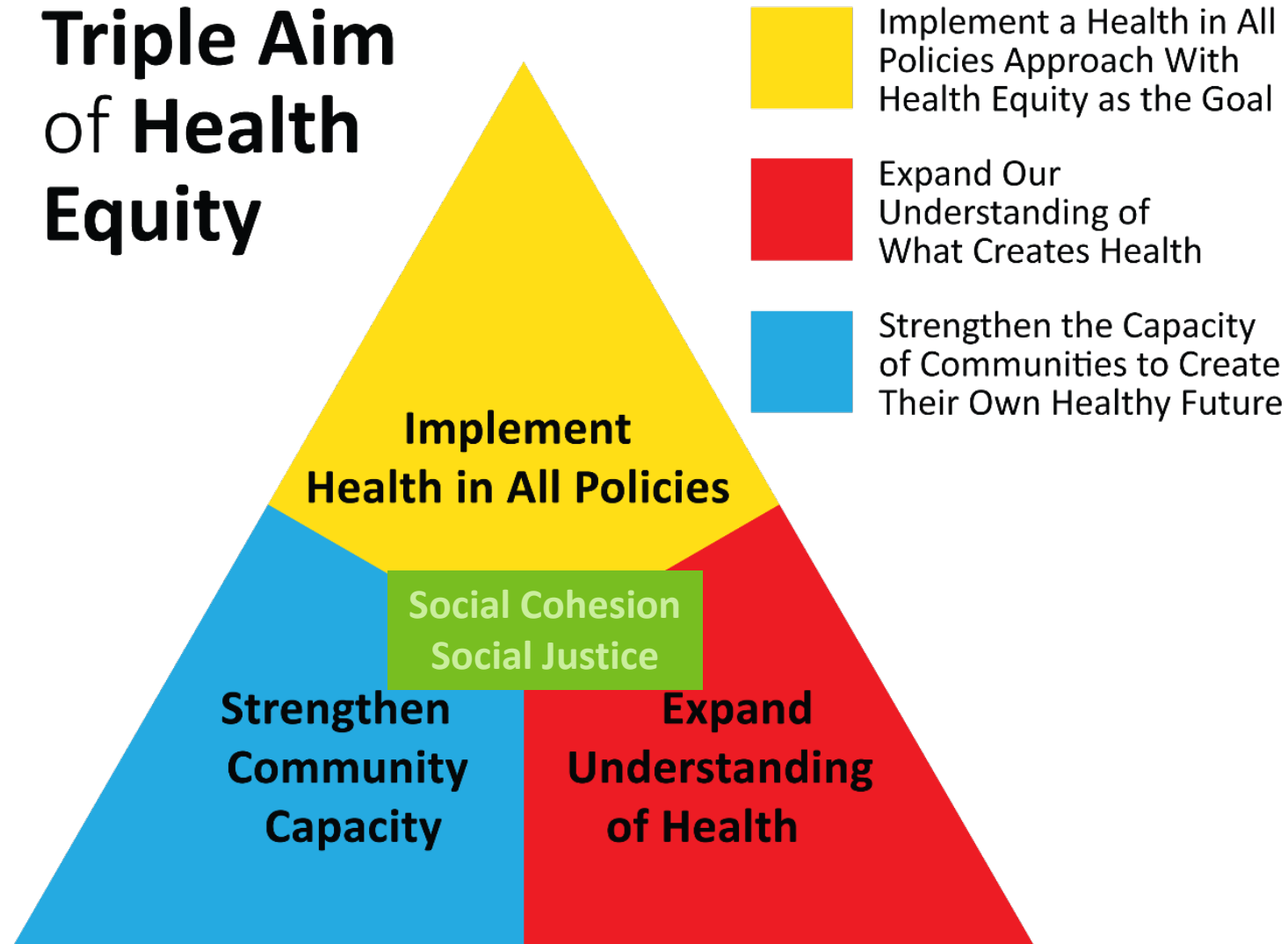


*Wendell Berry*

Health is in belonging

*What would it look like if equity was the starting point for decision-making?*  
***Our work would be different.***

## Triple Aim of Health Equity



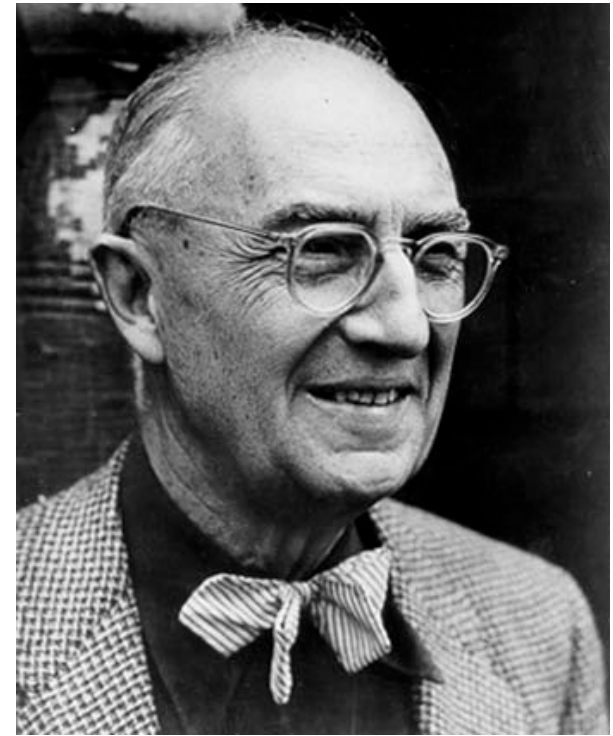
# Our work would be based on the principles on which public health and CHWs are built



- broad definition of health and well-being,
- focus on overall health and education of the entire population, (emphasis on making populations less vulnerable)
- balance of intervention and prevention,
- good science,
- long-term responsibility,
- collaboration and inclusion,
- social justice, social responsibility, and equity.

# How is that thread colored?

*It is difficult  
to get the news from poems  
yet men die every day  
for lack  
of what is found there.*



William Carlos Williams, MD  
"Asphodel, That Greeny Flower"



# Dream Deferred – (inspired MLK, Jr)

What happens to a dream deferred?

Does it dry up

Like a raisin in the sun?

Or fester like a sore--

And then run?

Does it stink like rotten meat?

Or crust and sugar over--

like a syrupy sweet?

Maybe it just sags

like a heavy load.

Or does it explode?



## **Dream Deferred**

by Langston Hughes

Written in 1951

# Don't Defer Your Dreams Keep Your Eyes on the Prize

*...history has its eyes on us..  
And so **we lift our gazes not to** what  
stands between us  
but **what stands before us....***

*Amanda Gorman,  
Inauguration poem,  
The Hill We Climb*



We can't defer our dreams,  
or be deterred by other schemes  
Keep your eyes on the prize, hold on.

We must embrace our dream  
with health equity as the theme  
Keep your eyes on the prize hold on.

**Hold on, hold on, Keep your eyes on  
the prize, hold on .**

# Keep Your Eyes on the Prize

We all must take a stand,  
when there's inequity in our land  
Keep your eyes on the prize, hold on.

Social justice is our goal  
for the community as a whole  
Keep your eyes on the prize, hold on.

**Hold on, hold on. Keep your eyes  
on the prize, hold on.**

From history we all know  
we can't accept the status quo  
Keep your eyes on the prize, hold on

That's why we're here today  
to help find a better way  
Keep your eyes on the prize, hold on.

**Hold on, hold on. Keep your eyes on  
the prize, hold on.**

# One Foot in Front of the Other and Lead with Love

Melanie DeMore



***“The field is very important, but the work is incessant.”***

Mary Ann Shadd, anti-slavery activist, teacher, and first black woman publisher in the U.S. and first woman publisher in Canada.

**Put one foot in front of the other  
And lead with love.**

**Put one foot in front of the other  
And lead with love.**

Don't give up hope (call & response)  
You're not alone  
Don't you give up  
Keep movin on

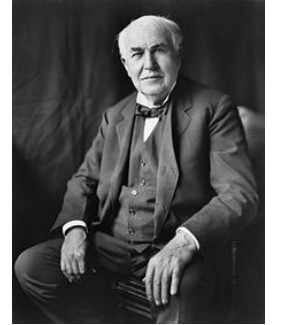
To give us hope  
For humanity  
Let's build a world  
Of equity.

# BAMBELELA – NEVER GIVE UP

## Nurture your dreams

June, 1868 Thomas Edison is issued his first patent application for an electrical vote recorder.

***“Our greatest weakness lies in giving up. The most certain way to succeed is always to try just one more time.”***



Bambelela, bambelela,  
O bambelela, bambelela  
Bamba, bamba, bamba, bamba, bamba,  
bamba, bamba, bambelela

Never give up, never give up,  
O never give up, never give up,  
Never, never, never, never, never,  
never, never, never give up.

Nurture your dreams, nurture your dreams.  
O nurture your dreams, nurture your dreams,  
Always, always, always, always, always,  
always, always, always nurture your dreams.



Gwendolyn Brooks  
Born June 7, 1917 in Topeka, KS

*“Live not for Battles Won.  
Live not for The-End-of-the-Song.  
Live in the along.”*

*Speech to the Young, Speech to the Progress-Toward*



**First African American to receive the Pulitzer Prize**  
**First African-American woman inducted into the American Academy of Arts and Letters.**  
**Honorary Doctorate of Literature, U of Wisconsin, June 3, 1972**



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**BAMBELELA – NEVER GIVE UP**

# Definitions: Disparities – Inequities

- **Health disparity:** A population-based **difference in health outcomes.**
- **Health inequity:** A **health disparity due to inequitable, socially-determined circumstances.** Because health inequities are socially-determined, change is possible.
  - This is what most people mean when talking about health disparities.
- **Health equity:** When every person has the opportunity to realize his/her/their health potential — the highest level of health possible for that person — without limits imposed by structural inequities. Health equity means achieving **the state in which all people have the opportunity to attain their highest possible level of health.**

# Definitions: Disparities – Inequities

- **Structural inequities: Structures or systems of society** — such as finance, housing, transportation, education, social opportunities, etc. — **that are structured in such a way that they benefit one population unfairly** (whether intended or not).
- **Structural isms:** The normalization of an array of **dynamics** — historical, cultural, institutional, political, and interpersonal — **that routinely advantage one group of people while producing cumulative and chronic adverse outcomes for non-members of that group.**
  - **E.g. Structural racism:** The normalization of an array of **dynamics** — historical, cultural, institutional, political, and interpersonal — **that routinely advantage white people while producing cumulative and chronic adverse outcomes for Black, brown, Indigenous, and People of Color.**
  - **Structural ableism, sexism, agism, elitism, etc.**

# Public Health Metaphysician

- Any subject (like being a physician) can have a **metatheory**, a theoretical and often abstract consideration of its properties. Basically, X about X : e.g., data about data – meta data; literature about literature – meta literature.
  - The term “meta” comes from the Greek preposition and prefix meta- (μετά-) which means "after", "beside", "with", "among", “from,” “about.”
- **A Public Health Metaphysician provides the perspective of being a physician from the viewpoint of a medical and public health practitioner.**

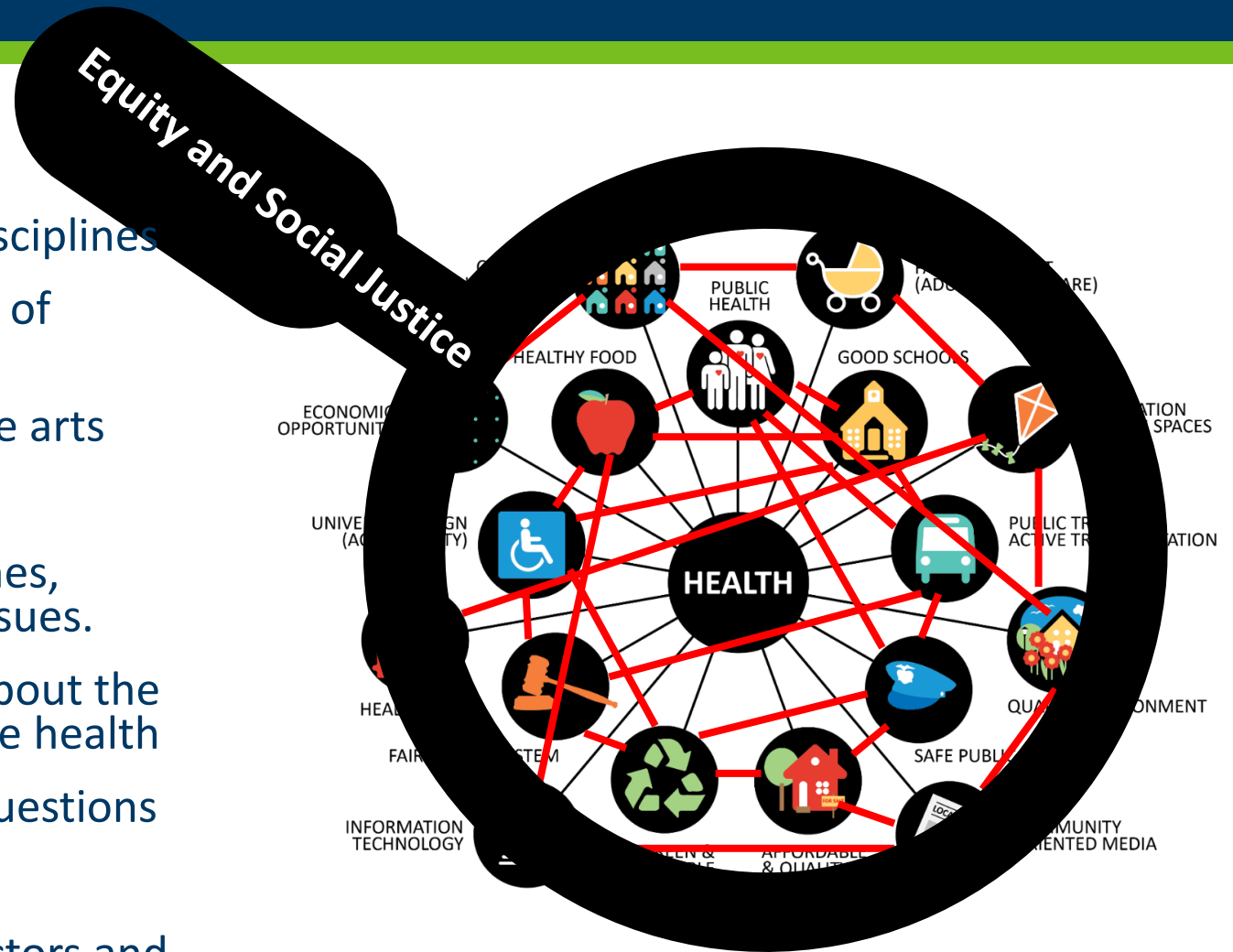


# Public Health Metaphysician

- **Metaphysics** is a traditional **branch of philosophy** concerned with explaining the fundamental nature of being and the world that encompasses it.
- **A Public Health Metaphysician is concerned with explaining the nature of being healthy as individuals, a community, and society and the conditions that create health; all viewed from the perspective of equity and social justice.**

# Public Health Metaphysician

- Integrates medicine, public health, & other disciplines
- Considers the objective and subjective factors of biological and social sciences
- Embraces the creativity and imagination of the arts
- Seeks to understand the lessons of history
- Uses a mosaic of information from all disciplines, sectors, and cultures in addressing complex issues.
- Addresses philosophical and abstract issues about the nature of health and the conditions that create health
- Asks epistemological (theory of knowledge) questions
- Practices humility
- Deals with the interconnection of multiple sectors and cultures
- Uses the lens of equity and social justice.



# Public Health Metaphysician

*"You think that if you understand one, you understand two—because one and one are two. But you must also understand 'and'."*

## Sufi saying

