

Looking Forward: Key Milestones in Health Equity!

December 14, 2021 by Eman Jibrel, MPH

The year is coming to an end and many of us are looking ahead to what 2022 holds. Here, in the United States, many of us are vaccinated and safely reuniting with our loved ones. Holiday traditions are commencing in person once again and the new year is quickly approaching. Before writing those new year's resolutions, I encourage you to reflect on the progress you have made this year and celebrate all of your accomplishments. Personal celebrations are paramount, but together we've made monumental milestones in advancing health equity.

Despite growing interest in health equity, some remain unclear of the importance of this work. Above all [health equity](#) is when all individuals have equitable access to quality health outcomes. Unfortunately, many racial and ethnic minority groups have long experienced disproportionate rates of [infectious and chronic diseases and their risk factors](#). While health care is essential, health equity reaches beyond the proximity of care facilities or one's access to adequate coverage. Achieving health equity is ultimately rooted in addressing drivers such as the [social determinants of health](#) and reducing health disparities.

Health equity is personal to so many of us public health professionals who have worked tirelessly at leading evidence-based research to examine the root causes of health disparities and work toward solutions that ensure everyone has the opportunity to live healthy lives. In the fall 2021 issue of [Health Equity Matters](#) e-newsletter, CDC Director Dr. Rochelle Walensky, MD, MPH expressed her immense enthusiasm in seeing health equity gain the spotlight it deserves. "It is important to me to bring my clinical and scientific commitment, passion, and advocacy for health equity to my role as director of the agency charged with protecting the health of all Americans," says Dr. Walensky.

As an agency, CDC is transforming its public health research, surveillance, and implementation efforts to shift from simply reporting on the markers of health inequities to addressing the drivers of disparities. [CDC's CORE Health Equity Science and Intervention Strategy](#) ensures the building of key partnerships to gain collective expertise and perspectives, inform next steps, and create a shared commitment to achieving health equity. The CORE strategy is one of this year's milestones because of its transformative impact in embedding health equity into the core of CDC's work.

In April, [CDC declared racism as a public health threat](#). Systemic racism and its implications on the health of people in some racial and ethnic minority groups have long been documented. Public health professionals were invited to [share perspectives](#) on a range of issues related to race and health. The COVID-19 pandemic has only exacerbated and spotlighted racial and other social injustices and inequities. The impact of racism is deeply embedded in our society, where social determinants of health are key drivers of health inequities among groups that have been economically/socially marginalized, placing people within these [groups at greater risk](#) for poorer health outcomes. To build a healthier nation, we must confront systems that create these injustices that give rise to racial and ethnic health inequities.

Another milestone this year was the rollout of COVID-19 vaccines. As of December 13, over 200 million people in the United States are [fully vaccinated](#), which is essential in protecting people against getting sick or potentially dying from COVID-19. Getting people vaccinated is essential to slowing the spread of COVID-19, although disparities in vaccine allocation emerged. [First responders](#) spent much of the year investigating factors that create challenges to vaccination access that often affect people in some racial and ethnic groups. Some of these challenges include education, income and wealth gaps, lack of transportation, and lack of trust of government institutions. To support vaccine equity, healthcare systems and providers, public health and policy agencies, and communities can work together to share accurate information and address the unique needs of the communities they live in and serve in a culturally appropriate manner.

Finally, addressing all people inclusively and respectfully is significant today due nation's growing diverse demographic. By 2030 the nation is expected to age considerably and become more racially and ethnically diverse. Proper use of terminology, gender identity terms, including pronouns, is crucial to make certain everyone feels included and accepted. When an individual is not appropriately identified, based upon how they identify, this can impact their well-being or job performance. The newly launched [Health Equity Guiding Principles for Inclusive Communication](#) is a resource to assist in developing communication materials and strategies adapted to the specific cultural, linguistic, environmental, and historical situations of audiences of focus. Importantly, we can avoid perpetuating inequities in communication and avoid implying an individual's

identity before engaging in conversation first.

We have accomplished several milestones this year to achieve our health equity goal, however, there is much more work to do **together**. This effort requires a united response—a commitment to centering health equity at the core of all that we do. I invite you to consider how you can better incorporate health equity in your work to improve the health and well-being of all.

See you in 2022!

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