

WASHINGTON STATE MEDICAL ASSOCIATION
HOUSE OF DELEGATES

Resolution: B-12
(A-20)

Subject: Social Determinants of Health

Introduced by: Barry Grosskopf, MD, Delegate
King County Medical Society

Referred to: Reference Committee B

1 WHEREAS, at a 1966 press conference before his address to the Second Medical Convention
2 for Human Rights, Martin Luther King Jr. said that, “of all the forms of inequality, injustice in
3 health care is the most shocking and inhumane;” [1] and
4

5 WHEREAS, inequities remain to this day, clearly visible in the disproportionately higher rates
6 of infant mortality, overall mortality, deaths by heart disease, hypertension, diabetes, disease,
7 suicide, and substance use disorders in people of color; and
8

9 WHEREAS, the simultaneous societal upheavals of the Covid-19 pandemic as well as the
10 reenergized civil rights protests of the Black Lives Matter movement have dramatically revealed
11 inequities in health care in the disproportionate number of deaths of people of color; and
12

13 WHEREAS, a 2015 King County report on the determinants of equity reviewed the county’s
14 social determinants of health identified 67 community-level indicators and found that nearly all
15 of the measures identified reinforce the previous research findings that race, place and income
16 impact quality of life for residents in King County;[2] and
17

18 WHEREAS, a similar report from Public Health - Seattle King County and 11 King County
19 hospitals noted that people of color and low-income residents are at disproportionate risk of
20 being uninsured and having poor health and social outcomes;[3] and
21

22 WHEREAS, the Agency for Healthcare Quality and Research has advocated for the goal of
23 eliminating disparities in healthcare in the United States and stated that this must begin with the
24 fundamental step of bringing the nature of the disparities and the groups at risk for those
25 disparities to light by collecting health care quality information stratified by race, ethnicity and
26 language data;[4] and
27

28 WHEREAS, income inequality leads to differences in life expectancy within our country
29 stratified by this risk factor,[5] but has also been found to contribute to a decreased life
30 expectancy for our country as a whole when compared to countries with less income
31 inequality;[6] and
32

33 WHEREAS, access to medical care is a fundamental human right;[7] and
34

35 WHEREAS, the WSMA supports universal health care coverage for all;[8] and
36

37 WHEREAS, mass incarceration is a major driver of poverty. Were it not for our current trends
38 of increasing prison population over the past few decades, we would have a 20% decrease in the
39 U.S. poverty rate;[9] and
40

41 WHEREAS, between 70 million and 100 million Americans have a criminal record which
42 relegates them to second class citizenship, potentially for life, with restrictions on voting rights,

References

1. <https://pnhp.org/news/getting-martin-luther-kings-words-right/>
2. https://www.kingcounty.gov/~media/elected/executive/equity-social-justice/2015/The_Determinants_of_Equity_Report.ashx
3. <https://www.kingcounty.gov/depts/health/data/community-health-indicators/~media/depts/health/data/documents/2018-2019-Joint-CHNA-Report.ashx>
4. <https://www.ahrq.gov/research/findings/final-reports/iomracereport/index.html>
5. <https://jamanetwork.com/journals/jama/fullarticle/2513561>
6. <https://inequality.org/facts/inequality-and-health/#cross-national-comparisons>
7. <https://www.who.int/mediacentre/news/statements/fundamental-human-right/en/#:~:text=The%20right%20to%20health%20for,the%20health%20services%20they%20need.>
8. https://wsma.org/WSMA/About/Policies/Whats_Our_Policy/Access_To_Health_Care_Health_Care_Reform/Universal_Coverage.aspx
9. <https://journals.sagepub.com/doi/pdf/10.1177/0011128708328864>
10. <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/incarceration>
11. <https://jamanetwork.com/journals/jama/fullarticle/2768249>
12. <https://www.urban.org/research/publication/assessing-evidence-about-work-support-benefits-and-low-income-families>

WSMA Policy

Health Equity

The WSMA believes that a healthy Washington will require leadership and partnership of businesses, advocacy groups, community non-profits, environmental justice organizations, chambers of commerce, religious organizations, labor organizations, educational organizations, professional associations and others. (Res B-4, A-13)

The WSMA: 1) Supports the goal of addressing social determinants of health; 2) Supports the efforts of community initiated and driven action projects, private, non-profit and academic sectors independently and in collaboration with government to achieve health equity and eliminate racial/ethnic inequities in Washington; and, 3) Supports reaching out to diverse communities to assist them in addressing health inequities (Res B-4, A-13)