# Health Equity FAQs

What is Health Equity?

Health Equity refers to efforts to ensure that all people have full and equal access to opportunities that enable them to lead healthy lives.

Personal responsibility plays a key role in health, but the choices we make depend on the choices we have available to us. While we can't ensure that each of us will be healthy, we can make it much more possible for everyone to have the opportunity to make healthy choices, and for health to be much more accessible to all.

Across the nation, gaps in health are large, persistent and increasing. Health equity means everyone has a fair and just opportunity to be healthier. It acknowledges that it's hard to be healthy without access to good jobs, homes and schools. It requires concerted effort to increase opportunities to be healthier for everyone - especially those whose obstacles are greatest.
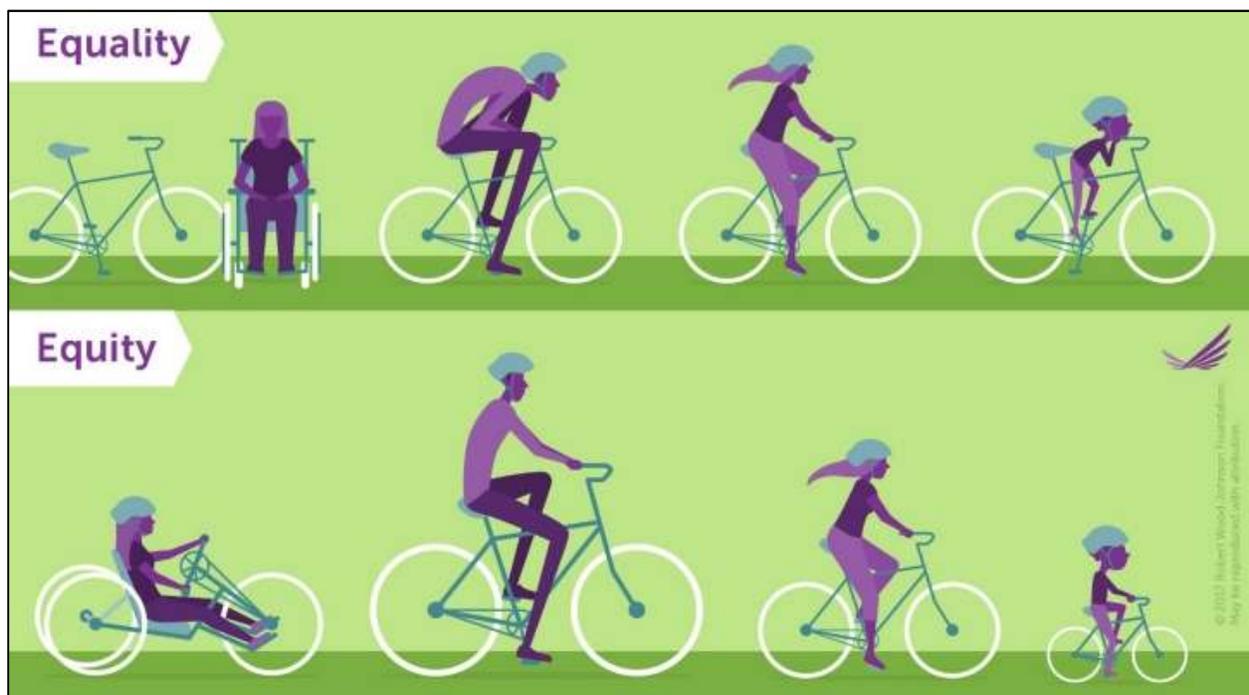
What are health and mental health disparities?

Health and mental health disparities are differences in health and mental health status among distinct segments of the population, including differences that occur by gender, age, race or ethnicity, sexual orientation, gender identity, education or income, disability or functional impairment, or geographic location, or the combination of any of these factors.

What are health inequities?

Health and mental health inequities are disparities in health or mental health, or the factors that shape health, that are systemic and avoidable and, therefore, considered unjust or unfair.

What are the determinants of equity?

Determinants of equity are defined as the social, economic, geographic, political, and physical environmental conditions that lead to the creation of a fair and just society.

What are vulnerable communities?

Vulnerable communities include, but are not limited to women; racial or ethnic groups; low-income individuals and families; individuals who are incarcerated or have been incarcerated; individuals with disabilities; individuals with mental health conditions; children; youth and young adults; seniors; immigrants and refugees; individuals who are limited English proficient (LEP); and Lesbian, Gay, Bisexual, Transgender, Queer, and Questioning (LGBTQQ) communities, or combinations of these populations.

What are the social determinants of health?

The World Health Organization (WHO) defines the social determinants of health as the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels.

Why is it so important to address health and mental health inequities?

Inequities in health status are quite literally a matter of life and death, shown by differences in death rates and life expectancy among the state's most vulnerable populations. Similar gaps among population groups exist for numerous chronic health conditions that drive the disparities in death rates. Beyond the moral case for addressing inequity, there is also a strong economic argument. Reducing health inequities will yield savings in health care costs. A study in 2011 estimated that more than 30 percent of direct medical costs faced by African Americans, Hispanics, and Asian Americans were excess costs due to health inequities – more than $230 billion over a three-year period, plus indirect costs of $1 trillion in lower workplace productivity due to associated illness and premature death. That three-year total of "excess costs" due to health disparities is equal to approximately half the total of all U.S. health care spending.

Source: California Department of Public Health
https://www.cdph.ca.gov/Programs/OHE/Pages/OfficeHealthEquity.aspx