

Achieving Health Equity: Psychology's Role

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Presentation Description: The US Centers for Disease Control defines health disparities as preventable differences in the burden of disease, injury, violence, or opportunities to achieve optimal health that are experienced by socially disadvantaged populations. Health disparities related to race are often the result of persistent unjust policies and discriminatory practices that increase the risk of Black, Indigenous, People of Color (BIPOC) populations for poor health. Health disparities have been observed across virtually all indicators of poor health, including cancer and decreased life expectancy). Environmental, social and behavioral factors— all areas of psychology's expertise— contribute to health disparities in interacting ways. Psychology must position itself as a force for achieving health equity by finding ways to make concrete improvements in overall health of populations affected by disparities, and APA needs to support individual practitioners' ability to do so in their own communities. This presentation will examine social determinants that contribute to health disparities, including, but not limited to, race, SES, gender and geographical location. The unique contribution that psychological science and practice can offer in achieving health equity will be discussed.

Learning Objectives

1. Participants will be able to describe three examples of how current health care practices contribute to health inequities.
2. Participants will be able to identify three examples of how environmental and social factors systematically contribute to health inequities.
3. Participants will be able to identify three examples of health disparities in the incidence of cancer and treatment outcomes.
4. Participants will be able to articulate at least two ways in which psychological science and practice can help to address health inequalities.