

Shared Language to Support Health Equity and Tobacco-Free Recovery

Rhode Island Leadership Academy for Tobacco Free Recovery & Wellness

Grounding Concepts

Health Inequality	Health Disparity	Health Inequity
Differences in health outcomes across population groups, which can sometimes be expected, such as cancer rates among the elderly vs. children ⁱ	Differences in health outcomes across various socioeconomic, ethnic, racial, gender, sexual orientation, and other groups ⁱⁱ	Unfair distribution of health determinants, outcomes, and resources within and between segments of the population, regardless of social standing ⁱⁱⁱ

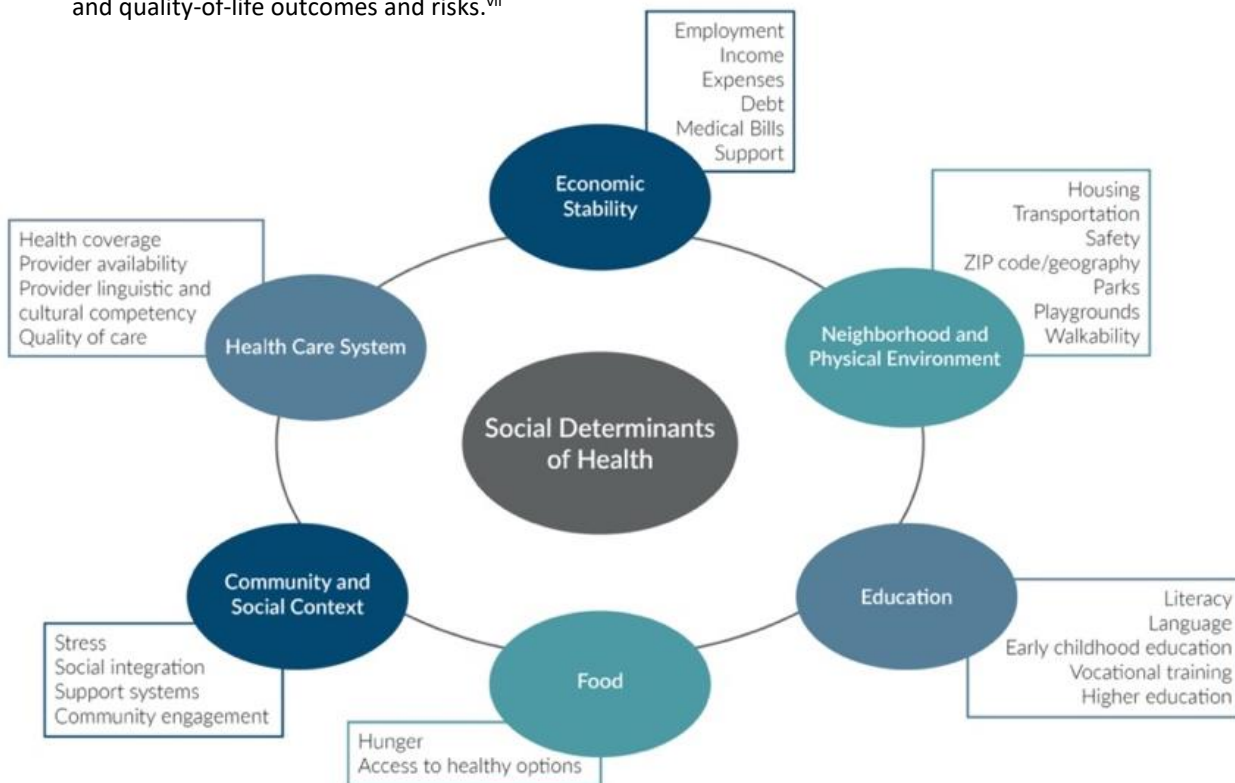
Health equity signifies social justice in health; every person has a fair and just chance to be healthy, unencumbered by obstacles to health such as racism, poverty, and their consequences. Health disparities are the metrics we use to measure progress toward achieving health equity.^{iv} Confusion or misuse of the meaning of health disparities and health inequalities could permit limited resources to be directed away from the intended purposes. If these terms remain vaguely defined, socially and economically advantaged groups could take over the terms and advocate for resources to address their advantaged social group's health needs.^v

Determinants of Health

- A range of personal, social, economic, and environmental (both built and natural) factors that influence health status. Determinants of health fall under five broad categories: policymaking, social factors, health services, individual behavior, and biology and genetics.^{vi}

Social Determinants of Health

- A subset of determinants of health, the social determinants of health (SDOH) are the conditions where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.^{vii}



Shared Language to Support Health Equity and Tobacco-Free Recovery

Rhode Island Leadership Academy for Tobacco Free Recovery & Wellness

Social Justice

- A concept of “rightness” that manifests in society, including fairness in healthcare, employment, housing, etc. This concept ensures that everyone has equal opportunity and individuals do not encounter barriers such as systemic discrimination, or structures of power.

Oppression

- Oppression refers to a combination of prejudice and institutional power that creates a system that regularly discriminates against some groups and benefits other groups. Often, oppressions overlap to cause people even more hardship. This overlapping of oppressed groups is referred to as [intersectionality](#).
- Some forms of oppression^{viii}:
 - **Racism**: the individual, cultural, and institutional beliefs and discrimination that systemically oppress people of color (Blacks, Latino/as, Native Americans, and Asians)
 - **Sexism**: the individual, cultural, and institutional beliefs and discrimination that systemically oppress women
 - **Ableism**: the individual, cultural, and institutional beliefs and discrimination that systemically oppress people who have mental, emotional, and physical disabilities
 - **Heterosexism**: the belief that heterosexuality is the only normal and acceptable sexual orientation. Now encompasses the individual, cultural, and institutional beliefs and discrimination that systemically oppress lesbian, gay, bisexual, transgender, queer (LGBTQ) people
 - **Classism**: the institutional, cultural, and individual set of beliefs and discrimination that assigns differential value to people according to their socio-economic class; and an economic system which creates excessive inequality and causes basic human needs to go unmet
 - **Ageism**: the individual, cultural, and institutional beliefs and discrimination that systemically oppress young and elderly people

Leadership Academy Priority Populations¹

Context for Referring to Subpopulations^{ix}

- It is critical when referring to subpopulations or communities of individuals that language avoid placing or insinuating blame on the individual, avoid contributing to or exacerbate stigma, and ensure that the population(s) of interest are referred to in a way that clarifies the systemic and societal causal factors.
- Inequity focused language: vulnerable populations/groups, marginalized communities, disparate populations, high/at-risk groups, underserved or underprivileged communities, hard to reach communities.
- Equity-focused language: Groups that have been historically marginalized or made vulnerable, groups/communities placed at increased/high risk of [outcome], under-resourced communities, communities that are underserved or have limited access to [resource/service], disproportionately affected groups.

¹ We acknowledge that there are many more populations that are disproportionately affected by both tobacco use, and behavioral health conditions not included as a priority population for purposes of the Leadership Academy work.

Shared Language to Support Health Equity and Tobacco-Free Recovery

Rhode Island Leadership Academy for Tobacco Free Recovery & Wellness

Individuals with Behavioral Health Conditions

- Behavioral health is a comprehensive umbrella term that includes mental health and substance abuse conditions, life stressors and crises, stress-related physical symptoms, and health behaviors. Behavioral health conditions often affect medical illnesses.

Individuals with Behavioral Health Conditions (Specific Diagnoses)

- Serious and Persistent Mental Illness (SPMI): a group of diagnosable mental health disorders that are sufficiently severe and enduring to cause functional/disabling impairment to an individual.
- Co-Occurring Disorders: also known as dual diagnosis, having a co-existing mental illness and substance use disorder.

Individuals with Adverse Childhood Experiences (ACES)

- Potentially traumatic events that occur in childhood (0-17 years). Examples include experiencing violence, abuse, or neglect, witnessing violence, or having a family member attempt or die by suicide. Additional environmental factors include growing up in a household with substance use, mental health challenges, and parental separation or parent/guardian incarceration.

LGBTQ+

- LGBTQ is an acronym for lesbian, gay, bisexual, transgender and queer or questioning. These terms are used to describe a person's sexual orientation or gender identity. Other and more inclusive variations of the acronym can be found [here on page 38](#).

Low Socioeconomic Status

- Adults with low educational attainment: Adults who have less than a high school education.
- Low-income adults: Individuals that indicate having a household income of less than \$25,000.²

Medicaid Beneficiaries

- Adults who indicate having Medicaid (including RIteCare, or Rhody Partners) as their primary form of health care coverage

Tobacco Use

Commercial Tobacco

- Commercial tobacco is manufactured by companies for recreational and habitual use in cigarettes, e-cigarettes/Electronic Nicotine Delivery Systems (ENDS), smokeless tobacco, pipe tobacco, cigars, hookahs, and other products. Commercial tobacco is mass-produced and sold for profit.^x

Traditional Tobacco

- Distinct from commercial tobacco, American Indians, and Alaskan Natives consider the tobacco plant to be sacred and used for spiritual and medicinal purposes.^{xi}

² Low income is typically defined as an individual whose household income is at or below 150% of the federal poverty amount. Due to data availability, a household income metric from the BRFSS is used as a proxy.

Shared Language to Support Health Equity and Tobacco-Free Recovery

Rhode Island Leadership Academy for Tobacco Free Recovery & Wellness

Health Systems and Recovery-Centered Terminology

[Provider](#)

A healthcare provider is a person or company that *provides* a healthcare service to you (not to be confused with health insurance plan).^{xii}

[Tobacco Treatment Specialist \(TTS\)](#)

A professional who possesses the skills, knowledge, and training to provide effective, evidence-based interventions for tobacco dependence across a range of intensities. The TTS may have various professional affiliations and may work in a variety of settings including but not limited to hospitals, community health centers, dental practices, social service agencies, tobacco treatment centers, telephonic Quitlines, substance use treatment programs, and mental health centers. The TTS may engage not only in providing treatment but also in educating others (health care professionals, administrators, scientists, smokers, nonsmokers) about tobacco dependence treatments.^{xiii}

[Peer Recovery Specialist](#)

Peer Recovery Specialists (or Recovery Coaches) are individuals who are in recovery from substance use or co-occurring mental health disorders. Their life experiences and recovery allow them to provide recovery support in such way that inspires hope that recovery is possible.^{xiv} Peer Support Services are non-clinical, person-centered, recovery-focused. In Rhode Island, peers can complete a process to become a Certified Peer Recovery Specialist and bill for services.

[Recovery](#) (to take the place of “treatment”)

Recovery is a process of change through which people improve their health and wellness, live self-directed lives, and strive to reach their full potential.^{xv}

[Abstinence](#) (to take the place of “cessation”)

1. Continuing to use the definition of no use of combustible tobacco products (regardless of use of noncombustible tobacco products [e.g., snus] and alternative products [e.g., e-cigarettes])
2. No use of combustible *or* smokeless tobacco products
3. No use of combustible *or* smokeless tobacco products *or* alternative products^{xvi}

[Medication-Assisted Treatment](#)

Medication-assisted treatment (MAT) is the use of medications, in combination with behavioral therapies, to provide a “whole-patient” approach to the treatment of substance use disorders. Medications used in MAT are approved by the Food and Drug Administration (FDA). The prescribed medication operates to normalize brain chemistry, relieve physiological cravings, and normalize body functions without the negative and euphoric effects of the substance used. MAT programs are clinically driven and tailored to meet patient’s needs. The term MAT is primarily used in reference to the treatment opioid use disorder.^{xvii}

Shared Language to Support Health Equity and Tobacco-Free Recovery

Rhode Island Leadership Academy for Tobacco Free Recovery & Wellness

-
- ⁱ Braveman P. What are health disparities and health equity? We need to be clear. *Public Health Rep.* 2014;129 Suppl 2(Suppl 2):5-8. doi:10.1177/003335491412915203
- ⁱⁱ *Disparities*. Disparities | Healthy People 2020. (n.d.). Retrieved from <https://www.healthypeople.gov/2020/about/foundation-health-measures/Disparities>
- ⁱⁱⁱ Klein, R, & Huang, K. (2010). *Defining and measuring disparities, inequities, and inequalities in the Healthy People initiative* [PowerPoint slides]. National center for Health Statistics, Center for Disease Control and Prevention. https://www.cdc.gov/nchs/ppt/nchs2010/41_klein.pdf
- ^{iv} Whitehead, M., & Dahlgren, G. (2006). Concepts and principles for tackling social inequities in health: Levelling up Part 1. *World Health Organization: Studies on social and economic determinants of population health*, 2, 460-474.
- ^v Braveman P. What are health disparities and health equity? We need to be clear. *Public Health Rep.* 2014;129 Suppl 2(Suppl 2):5-8. doi:10.1177/003335491412915203
- ^{vi} *Determinants of Health*. Determinants of Health | Healthy People 2020. (n.d.). Retrieved from <https://www.healthypeople.gov/2020/about/foundation-health-measures/Determinants-of-Health>
- ^{vii} *Social Determinants of Health*. Social Determinants of Health - Healthy People 2030. (n.d.). Retrieved from [https://health.gov/healthypeople/objectives-and-data/social-determinants-health#:~:text=Social%20determinants%20of%20health%20\(SDOH,of%20life%20outcomes%20and%20risks](https://health.gov/healthypeople/objectives-and-data/social-determinants-health#:~:text=Social%20determinants%20of%20health%20(SDOH,of%20life%20outcomes%20and%20risks)
- ^{viii} *Social Justice definitions*. NCCJ. (n.d.). Retrieved from <https://www.nccj.org/resources/social-justice-definitions>
- ^{ix} American Medical Association and Association of American Medical Colleges. (2021) Advancing Health Equity: Guide on Language, Narrative and Concepts. Available at ama-assn.org/equity-guide
- ^x *Commercial tobacco*. Commercial Tobacco | Keep It Sacred. (n.d.). Retrieved from <http://keepitsacred.itcmi.org/tobacco-and-tradition/commercial-tobacco/>
- ^{xi} *Traditional tobacco*. Traditional Tobacco | Keep It Sacred. (n.d.). Retrieved from <https://keepitsacred.itcmi.org/tobacco-and-tradition/traditional-tobacco-use/>
- ^{xii} Elizabeth Davis, R. N. (2022, March 27). *A provider is a fancy way of saying doctor... and much more*. Verywell Health. Retrieved from <https://www.verywellhealth.com/what-is-a-provider-1738759>
- ^{xiii} *Frequently asked questions*. Behavioral Health and Wellness Program. (n.d.). Retrieved from <https://www.bhwellness.org/programs/rmtts/faqs/#1>
- ^{xiv} NCPRSS. (n.d.). Retrieved April 22, 2022, from <https://www.naadac.org/ncprss>
- ^{xv} U.S. Department of Health and Human Services. (2022, March 22). *Recovery*. National Institutes of Health. Retrieved from <https://nida.nih.gov/drug-topics/recovery>
- ^{xvi} Megan E Piper, PhD, Christopher Bullen, MD, MPH, PhD, Suchitra Krishnan-Sarin, PhD, Nancy A Rigotti, MD, Marc L Steinberg, PhD, Joanna M Streck, BA, Anne M Joseph, MD, MPH, Defining and Measuring Abstinence in Clinical Trials of Smoking Cessation Interventions: An Updated Review, *Nicotine & Tobacco Research*, Volume 22, Issue 7, July 2020, Pages 1098–1106, <https://doi.org/10.1093/ntr/ntz110>
- ^{xvii} *Medication-assisted treatment (MAT)*. SAMHSA. (n.d.). Retrieved from <https://www.samhsa.gov/medication-assisted-treatment>