

Barriers to Health Fact Sheet

Barriers to Health are factors that prevent an individual, population, and/or community from acquiring access to health services and/or achieving best health.¹ Barriers to health are also recognized as systems (i.e. structural determinants) that offer health care and services; which are shaped by a wider set of forces (i.e. economics, social policies/social norms, politics, etc.).³

What may be a barrier to one person, population, and/or community may be an asset to others, based on social and cultural factors. A “one-size-fits-all” approach is not effective. Public health professionals must adopt intentional approaches when serving Louisianans by considering programmatic responses to the environments and circumstances of people, populations, and communities. In addition, intentionality is garnered by implementing best practices and policies that support optimal health.

- ⇒ **Systems Can Be Barriers!** Many of us understand that “... all social and political mechanisms that generate ... social class divisions in society and that define individual socioeconomic position within hierarchies of power, prestige and access to resources... cause and operate through ... housing, physical work environment, social support, stress, nutrition and physical activity—to shape health.”⁴ Thus, given what programs within departments of health do and how they are funded and supported, it is very important that these health entities not operate in a manner that contributes to the negative health outcomes of the people it serves.
- ⇒ **Operate from a Health Equity Lens!** Operationalizing health equity protocol and practices that support and ensure its programs and services are being provided in a manner that leverage Barriers to Health which reduce and eliminate inequities, supporting, and creating health equity.

LDH is Dedicated to Protecting and Promoting Health By:

- Ensuring access to medical, preventive, and rehabilitative services for all citizens of Louisiana
- Providing quality services
- Utilize available resources in the most effective manner
- Develop an agency-wide health equity plan, which will support the operationalizing of health equity protocols and practices agency-wide in LDH

LDH’s Five Priority Health Areas Which Inform the Office of the Secretary’s Health Equity Plan:

Priorities	Shared Barriers to Health	Barriers to Health
Maternal Health	<ul style="list-style-type: none"> ● Poverty, lack of access to healthcare and/or insurance, poor communities, poor educational opportunity, racism, stigma, discrimination ● Structural determinant factors: no or very limited resources to improve or leverage Barriers to Health or support agencies that can reduce or elimination health inequalities 	<ul style="list-style-type: none"> ● Lack—stable housing, social support
Cancer		<ul style="list-style-type: none"> ● Neighborhood and built environment ● Social and community context
HIV		<ul style="list-style-type: none"> ● Lack of stable housing ● Exposure—crime, violence, substance use
HEPATITIS C		<ul style="list-style-type: none"> ● Lack of stable housing ● Exposure—incarceration, substance use
Mental/Behavioral health		<ul style="list-style-type: none"> ● Poverty level—lack of safe places to play/be, food security

**Barriers to Health within this table are factors that contribute to prioritized health inequities.*

Improving LDH’s Public Health Professionalism - The barriers above prevent people, populations, and communities from achieving their best, fullest health outcomes. LDH’s planning, programming, and services, must be informed by these barriers, particularly as it relates to improving population health in order to eliminate health inequalities and draw on the perspectives and resources of all diverse communities.⁵

Leveraging Barriers to Health

The following will support the operationalizing of health equity practices and approaches agency-wide*:

Partner and work with stakeholders implementing “Place-Based” Interventions

- Improved economic opportunity with better access to good jobs
- Higher quality K-12 grade schools which enhance access to college
- More open green space, maintained sidewalks, and effective community policing;
- Local businesses promoting healthier food options
- Available health care that addresses risk behaviors, acute illness, preventive measures, and management of chronic diseases.

Improve program collaboration and service integration

- Sustainable housing efforts, housing resources (Louisiana Housing Council, HUD, etc.)
- Food security efforts, food resources, etc.
- Job employment efforts, Job Corp, career training programs, etc.
- GED/Adult Learning programs, educational resources, working with HBCUs, etc.

Develop policy approaches that change the context for prevention

- Ensuring LDH programming, services’ resources are not “siloed “ by making sure all programming and services, leverage available LDH resources within their respective program, and services
- Shifting prevention programming to encompass a more diverse portfolio of prevention approaches that includes individual, network, and community-level interventions
- Leveraging agency-wide LDH programs, campaigns, and efforts
- Develop/implement community health workers into pertinent programming and services

Increase LDH staff and the community’s understanding of their capacity to address barriers to disease prevention and control.

- Undoing Racism Training
- Undoing Transphobia Training
- Poverty Simulations
- Cultural Capacity and Competency Training
- Barriers to Health Awareness Trainings

Collaborate with community stakeholders and partners whom: a) work to improve daily living conditions; b) tackle inequitable distribution of power, money, and resources; and c) measure and understand the problem and assess the impact of action

Create and work with stakeholders that create safe-spaces for marginalized, vulnerable populations, to build resiliency

- Vulnerable, poor children
- Persons with mental/behavioral health issues
- African-American youth/young adults
- LGBT
- Pregnant Women

Implement Community-centered Health Home Models/Frameworks

- Prevention Institute’s Community Center Health Home model/components
- *Health Lead’s Essential Needs Roadmap* framework

Use an assets-based approach and engage the community as an equal partner by listening to the community’s health priorities and share the responsibility for developing strategies to address those priorities

**These approaches are not limited to the solutions above.
References for the document are available [here](#)*