

**RESOLUTION TO PROMOTE HEALTH EQUITY**  
**presented by the OKLAHOMA HEALTH EQUITY CAMPAIGN**  
**through the OPHA HEALTH EQUITY CAUCUS**

**WHEREAS**, health begins at home in our families, with a loving relationship between parents and their children, where kids can expect to be safe, nurtured and protected, and

**WHEREAS**, health begins with healthy communities, with safe streets and sidewalks, freedom from violence, and parks where kids can play, and

**WHEREAS**, health begins with a good education, where children learn not only how to read, write, and prepare for fulfilling, prosperous life, but how to treat each other with dignity and respect, and

**WHEREAS**, health begins with safe jobs and fair wage, where people derive a sense of personal satisfaction from their work and connection to their co-workers, and

**WHEREAS**, health begins with healthy relationships, healthy communities, and healthy jobs, which protect us from the stress of everyday life,<sup>1</sup> and

**WHEREAS**, we can't eradicate illness, but we can foster health by positively impacting the factors affecting health, and

**WHEREAS**, health equity is defined as when everyone has the opportunity to "attain their full health potential" and no one is disadvantaged from achieving this potential because of their social position or other socially determined circumstance,<sup>2</sup> and

**WHEREAS**, Oklahomans with lower socioeconomic status die earlier and have more disability,<sup>3,4</sup> and

**WHEREAS**, Oklahoma ranks near the bottom of the national health rankings, according to the United Health Foundation (46<sup>th</sup>) and the Commonwealth Fund State Scorecard (50<sup>th</sup>), and

**WHEREAS**, the 2008 State of the State's Health Report confirms Oklahomans suffer more unhealthy days (mentally and physically) than adults nationally with suicide being the most common type of violent death, and

**WHEREAS**, Oklahoma consistently ranks among the lowest states in the consumption of fruits and vegetables<sup>5</sup> and is ranked as the 8th most obese state,<sup>6</sup> and

**WHEREAS**, Oklahoma was 49<sup>th</sup> in the nation in the ratio of primary care physicians per 100,000 population,<sup>7</sup> and

**WHEREAS**, no institution alone nurtures families and communities to build a healthier Oklahoma, and so

**THEREFORE, BE IT RESOLVED** that a healthy Oklahoma will require leadership, and a partnership of business, government, civic and religious institutions, and

**THEREFORE, BE IT RESOLVED** that the Oklahoma Health Equity Campaign Partnership will collaborate with public and private organizations, governmental and community partnerships to build public commitment to achieve health equity and decrease the health inequities in Oklahoma. Our partners will include businesses, advocacy groups, community non-profits, environmental justice organizations, chambers of commerce, religious organizations, labor organizations, professional associations and others.

**FINALLY, THEREFORE BE IT FURTHER RESOLVED** that the **Oklahoma Health Equity Campaign** requests the **Oklahoma Public Health Association** to become an active partner in this campaign and adopt this resolution as its health equity position statement.

## Notes

1. Robert Wood Johnson Foundation. [A New Way to Talk About the Social Determinants of Health](#), July 28, 2010.
2. Brennan Ramirez LK, Baker EA, Metzler M. [Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health](#). Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2008.
3. Oklahoma Health Improvement Plan, 2010-2014. Urban Institute and Kaiser Commission on Medicaid and the Uninsured (Estimates of 2007-2008 data). U.S. Census Bureau, March 2008 and 2009, Current Population Survey (CPS: Annual Social and Economic Supplements). Retrieved November 22, 2009 <[www.statehealthfacts.org/](http://www.statehealthfacts.org/)>
4. DeNavas Walt, Carmen, Proctor, Bernadette D. & Smith, Jessica C. (2008, August). Income, poverty and health insurance coverage in the United States: 2007 U.S. Census Bureau. (U.S. Census Bureau, pp. 60-235 <[www.census.gov/prod/2008pubs/p60-235.pdf](http://www.census.gov/prod/2008pubs/p60-235.pdf)>).
5. Centers for Disease Control and Prevention (CDC). *Behavioral Risk Factor Surveillance System Survey Data*. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2007.
6. Oklahoma State Department of Health (2008). State of the State's Health Report <[www.ok.gov/health/pub/boh/state/index.html](http://www.ok.gov/health/pub/boh/state/index.html)>.
7. United Health Foundation America's Health Rankings Report, 2010.