What social issues are affecting the African American Race?

 As well as what policies will @ help?

 R**acism, Inequality, and Health Care for African Americans**

The American health care system is beset with inequalities that have a disproportionate

 impact on people of color and other marginalized groups. These inequalities contribute to gaps

in health insurance coverage, uneven access to services, and poorer health outcomes among

certain populations. African Americans bear the brunt of these health care challenges.

African Americans are also living longer, and the majority of them have some form of health

insurance coverage. However, African Americans still experience illness and infirmity at

extremely high rates and have lower life expectancy than other racial and ethnic groups.

They are also one of the most economically disadvantaged demographics in this country.

 Coverage Gains—and Obstacles—for African Americans Under the ACA

While coverage expansions under the Affordable Care Act have hastened the progress toward

universal coverage, the continued high cost of many coverage options means that access to

affordable health care is still a challenge for many Americans—particularly African Americans.

The high cost of coverage has kept the number of uninsured and underinsured unacceptably high:

 Systemic Health Care Challenges That Reform Must Address

Despite coverage gains, remaining health care challenges exist that have a disproportionate

impact on African Americans. The lack of Medicaid expansion in key states, health disparities,

and health care provider shortages make it incredibly hard to address America’s health care

needs in a comprehensive way. And while these challenges are factors that touch many

Americans in various parts of the country, the gravity of them is uniquely seen in the South, and

among the African-American population.

 The South’s Stubborn Approach to Medicaid Expansion

In states that have not expanded Medicaid under the Affordable Care Act (ACA), African

Americans and other people of color are most likely to fall within a coverage gap—meaning they

earn too much to qualify for the traditional Medicaid program, yet not enough to be eligible for

premium tax credits under marketplace plan.

 Disparities in Health Outcomes

Increases in health insurance coverage under the Affordable Care Act have improved access to

medical care and have been linked to better outcomes for African Americans, such as earlier

diagnosis and treatment of certain cancers.However, disparities still exist across health

conditions when comparing African Americans and whites, including maternal mortality, infant

mortality, heart disease, diabetes, cancer, and other health issues. Social factors, including

economic disadvantage, inequities in education, and lack of access to health care, impact a

person’s ability to lead a healthy and productive life. For people in American society that

 experience racism and inequality in their daily lives, and throughout the lifespan, the impact of

social factors on health are the most grave.

 Health Care Provider Shortages

Due to residential segregation, majority African-American are more likely to lack hospitals and

 other health care providers.Therefore, place matters. When health care providers are located

 within majority African-American , they tend to offer lower-quality care. Often, people of color

 find themselves relying heavily on community health centers, emergency rooms or outpatient

 care, and community-based providers due to the lack of available primary care and mental

health providers in a given geographic area.

Traveling outside of the immediate geographic area to access health care may be an option for

some people, yet this can be a challenge due to lack of access to transportation for those with

limited incomes or for those living in rural areas.

 Racism’s Wear and Tear on African Americans

African Americans have endured racism within American society for hundreds of years. Studies

conducted over time have been consistent in proving that racism not only impacts social

stratification, but also the ability of African Americans to be healthy—both mentally and

physically. This burden—a burden that is indeed inescapable for black and brown people in this country—causes African Americans to die prematurely and experience chronic illnesses and

 mental health challenges at higher rates than white Americans.

In addition to instigating poor health outcomes among African Americans, racism also creates

 barriers to economic opportunity and uneven access to health care. Even the health care

system itself perpetuates racism and bias toward African Americans. This has been well

documented with examples, including differences in pain management and treatment of African

Americans when compared to whites experiencing the same health conditions, use of African

Americans’ bodies in medical experimentation, and racial bias in health algorithms for the

purpose of guiding health decisions and assessing health care costs. Actions like these have

led to a general distrust of health Care system within African American country.

 Poverty

Across economic indicators, vast disparities exist between African Americans and whites that

mirror the proportions seen in health disparities. Due to structural barriers, African Americans

are more likely to be poor than white Americans and are less likely to have a full-time worker in

the household.

 Food Insecurity

Food insecurity is also an issue affecting many African Americans and has important

 implications for health outcomes and economic well-being. Food insecurity occurs when a

household or family lacks access to adequate nutritious food. This happens due to the lack of

 financial means to purchase healthy food or by living in impoverished geographic areas void of

grocery stores with whole, fresh foods

 The Lack of Safe and Affordable Housing

Housing and neighborhood safety are also important economic indicators that can impact

health. Unfortunately, far too many African Americans have to grapple with neighborhood

violence and environmental factors (such as a lack of clean water, exposure to lead paint, and

pollution) that can negatively impact both their mental and physical health. Additionally, a

 relative lack of affordable housing options and home ownership continues to plague the African

-American community, largely due to longstanding racist practices such as redlining and subprime mortgages.

 REMEDIES

 Medical care for all

Comprehensive health benefits under Medicare for All include medically necessary services

 in thirteen benefit categories, including home and community-based long-term care, dental

care, hearing, vision care, comprehensive reproductive health care (including abortion

services), and transportation to health care appointments for people with disabilities and

low-income people. Drug prices would be negotiated annually and a formulary would be

established. Medicare for All would also prohibit balance billing, also known as surprise

 billing, which

 Ensuring Health Care Access and Affordable Coverage for African Americans

Cost to the individual is certainly an important factor in the conversation about health coverage

and ensuring that people can access the health care services they need. However, in order for

African Americans to attain meaningful insurance coverage and access to quality health care,

the health care system must be transformed to better address the unique social factors that

cause African Americans to remain in the coverage gap and how racism plays a role in their

 health outcomes.Furthermore, the economic challenges African Americans face serve as

barriers to sustaining comprehensive coverage which can lead to poor health outcomes. It is

simply not enough for insurance coverage to be affordable or even “free”—it must also serve as

a tool in progress toward systemic change and equity that will help African Americans get

ahead.

This will enhance the following:

 1)Promote health equity by adequately addressing racism, bias, discrimination, and other

systemic barriers within the health care system. To do this, policymakers must acknowledge the

historical foundations of racism and ensure that health care providers, personnel and staff are substantively trained to recognize and eliminate all forms of bias in the health care system.

 Accountability measures at both the individual and systems levels should be in place, including

 measures that link payment, professional certification, and licensure to quality of care.

 2) Incorporate evidence-based tools to adequately address health disparities that focus on

quality of care that extend beyond health insurance coverage, including the impact of racism on

the health of African Americans throughout the life course. In health reform efforts,

policymakers must take into account the social determinants and address how they impact

health by working across sectors, including social support agencies and community-based

providers with patient-centered approaches to care. Racist practices, such as those in the

 treatment and pain management of African Americans, should be eliminated.

 3) Protect and expanding access to insurance coverage and comprehensive benefits and

bolstering the ACA benefit provisions and nondiscrimination guarantees. These efforts should

include preserving coverage for people with pre-existing conditions by further codifying

protections that ensure benefit inclusion and design decisions that do not result in limiting

access to care. Policymakers should also build on the essential health benefits package to

include important health care services currently omitted, such as long-term care and dental care.

 4) Support the development of a robust, diverse, and culturally competent health care

workforce by encouraging and facilitating diversity throughout the health care system and care

teams, and adequately training all staff to be culturally sensitive. Payment rates and coverage

guidelines for health care coverage should be developed in a way that supports fair, living

wages and pay equity in the health care professions and jobs.

 5) Limit the cost of premiums and out-of-pocket costs, helping to make health insurance

more affordable for individuals and families across the income spectrum. This should include

limiting deductibles, prescription drug costs and other point-of-service charges, and completely

eliminating surprise medical bills. All of these costs are major barriers to health care access,

particularly for individuals and families with limited incomes.

 6) Strengthen access to trusted community-based providers currently available through safety

-net programs, such as Medicaid, Medicare, and the Children’s Health Insurance Program (CHIP).

These programs are often lifelines for marginalized communities and they disproportionately serve people of color. Policymakers should develop health reform plans that are intentional in

ensuring continued access to these vital sources of care, as well as seamless coordination with

health insurance payers for people with coverage seeking care from community-based

providers