## Health Equity Video Transcript: Carolyn N Wester

We simply cannot achieve our viral hepatitis elimination targets without addressing social determinants of health. Social determinants like poverty, which leads to substance use disorder, unstable housing, lack of insurance, all contribute to increased incidence of viral hepatitis infections, as well as poor, uneven viral hepatitis outcomes.

Knowing that at the outcomes that access and outcomes are uneven is the first step. And then delving into what are driving those differences in access and outcomes. Within the field of viral hepatitis, most of our new infections are driven by injection drug use. And in that context, we absolutely need to be looking at the social determinants of health, which are leading to debut and ongoing drug use. A lot of those things contribute to the upstream factors that lend lead to the downstream health outcomes and inequities that we're seeing.

Further, people who are living with viral hepatitis don't have access to treatment evenly. We see racial and ethnic disparities, we see disparities driven by insurance status. And these type of policy levers, addressing them are gonna be critical for us to not only gain our collective outcome, but to ensure that no population is left behind.

Health equity is personal to me. I was raised by a hardworking, single mom who experienced significant health challenges. Fortunately, she was able to access high-quality care, which enabled her to continue to work and provide for our family. As a direct result, my brothers and I were able to pursue our dreams.

It's important to me that all families have access to that same kind of healthcare and those same kind of opportunities. As a public health professional, as a physician, as a mom, I wanna make sure that we have equitable access to promote and secure the health of individuals across all populations.