



## Guidance on Health Equity and Cultural Responsiveness Public Health Modernization 2017-2019 Grant

### Background:

A health equity assessment and plan is required of grantees by December 31, 2018.

The funding provided to teams was targeted to address communicable disease disparities and to address health equity.

The requirement for a health equity assessment and action plan are under 4.e.(10) and 4.e.(11) of Program Element #51

(10) Complete an assessment of the region's capacity to apply a health equity lens to communicable disease control programs and services and to provide culturally responsive communicable disease control programs and services.

(11) Complete an action plan that addresses key findings from the regional health equity assessment for communicable disease control.

Local public health authorities are coming into this work with varying history and capacity related to health equity. **The guidance for the health equity assessment and plan is designed to augment any existing health equity efforts. Therefore, grant requirements can be met with:**

- **Reference to existing work;**
- **Work completed in the last two years; and**
- **New work.**

Furthermore, the Public Health Division understands that some local public health authorities have already established broad work related to health equity which can apply to communicable disease control initiatives.

### Definitions:

#### Health disparities

Health disparities are differences in population health status that are avoidable and can be changed. These differences can result from environmental, social and/or economic conditions, as well as public policy. These and other factors adversely affect population health.

Health disparities are referred to as **health inequities** when they are the result of the systematic and unjust distribution of these critical conditions.<sup>i</sup>

**Health equity**

Health equity is the absence of unfair, avoidable, or remediable difference in health among social groups. Health equity implies that health should not be compromised or disadvantaged because of racism, classism, sexual discrimination, religious discrimination, linguistic discrimination, nationalism, ableism, or by neighborhood or other social condition.

- Achieving health equity requires the equitable distribution of resources and power resulting in the elimination of gaps in health outcomes between different social groups.
- Health equity also requires that public health professionals look for solutions outside of the health care system, such as in the transportation or housing sectors and through the distribution of power and resources. This approach is needed to improve health within communities.<sup>ii</sup>

**Community**

A group of people who have common characteristics; communities can be defined by location, race, ethnicity, age, occupation, interest in particular problems or outcomes, or other similar common bonds. Ideally, there would be available assets and resources, as well as collective discussion, decision-making and action.<sup>iii</sup>

**Stakeholders**

Stakeholders are people or organizations invested in the health issue, program, or policy being considered.<sup>iv</sup>

**Health Equity Assessment and Plan Guidance:**

In the context of addressing communicable disease disparities, grantees will advance health equity by forwarding work in two domains from the [Public Health Modernization Manual](#): (1) Foster Health Equity and (2) Communicate and Engage Inclusively. The guidance is based on local roles and deliverables included in the Public Health Modernization Manual.

Health Equity Assessment Guidance	Health Equity Plan Guidance
<p><b>A. Foster health equity</b> Grantee shall provide evidence of:</p> <p>A1. Collection and use of qualitative and quantitative data that reveal inequities in the distribution of communicable disease. Focus on the social conditions (including strengths, assets and protective factors) that influence health.</p>	<p><b>A. Foster Health Equity</b> The plan shall include the following:</p> <p>A1. Strategies co-created with community members and other stakeholders to address the root causes of communicable disease disparities.</p>

### Health Equity Assessment Guidance (continued)

A2. Collection and use of regional data on health resources and health threats (e.g., schools, parks, housing, transportation, employment, economic well-being and environmental quality) through local partnerships, or other sources.

A3. Identification of population subgroups or geographic areas characterized by:

- i. An excess burden of adverse health or socioeconomic outcomes;
- ii. Inadequate health resources that affect health (e.g., quality parks and schools).

A4. An assessment of staff knowledge and capabilities related to health equity.

#### Related resources:

Minnesota Department of Health, Health Equity Data Analysis  
<http://www.health.state.mn.us/divs/chs/healthequity/guide/index.htm>

HealthEquityGuide.org

- Strategic Practice: Mobilize Data, Research, and Evaluation <https://healthequityguide.org/strategic-practices/mobilize-data-research-evaluation/>
- Strategic Practice: Confront the Root Causes <https://healthequityguide.org/strategic-practices/confront-the-root-causes/>

### Health Equity Plan Guidance (continued)

A2. Strategies to ensure that public health communicable disease programs are effective, equitable, understandable, respectful and responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.

A3. Strategies to establish and/or maintain partnerships to:

- i. Enhance multidisciplinary and multi-sector capacity to forward health equity
- ii. Tackle the root causes of communicable disease health disparities

A4. Strategies to increase staff capacity to address the causes of health inequities, promote health equity, and implement culturally responsive communicable disease control programs.

A5. All strategies should include measurable objectives. and specified outcomes.

#### Related resources:

HealthEquityGuide.org

- Strategic Practice: Share Power with Communities <https://healthequityguide.org/strategic-practices/share-power-with-communities/>
- Strategic Practice: Build Government Alliances <https://healthequityguide.org/strategic-practices/build-government-alliances/>
- Strategic Practice: Change Internal Practices and Processes <https://healthequityguide.org/strategic-practices/change-internal-practices-and-processes/>

Health Equity Assessment Guidance (continued)	Health Equity Plan Guidance (continued)
<p><b>B. Communicate and engage inclusively</b> Grantee shall provide evidence of:</p> <p>B1. A stakeholder assessment conducted to identify community members and other stakeholders (ex. community based organization) to be engaged in addressing communicable disparities.</p> <p>B2. Engagement of community members and groups impacted by communicable disease disparities in a dialogue about how to support health.</p> <p>B3. Identification, with community, of root causes of communicable disease disparities (examples include systems of oppression like racism and social determinants of health such as housing, and education).</p> <p><b>Related resources:</b> World Health Organization <a href="http://www.who.int/hac/techguidance/training/stakeholder%20analysis%20ppt.pdf">http://www.who.int/hac/techguidance/training/stakeholder%20analysis%20ppt.pdf</a></p> <p>Minnesota Department of Health, Community Engagement Guidebook <a href="http://www.health.state.mn.us/communityeng/">http://www.health.state.mn.us/communityeng/</a></p> <p>HealthEquityGuide.org Strategic Practice: Share Power with Communities <a href="https://healthequityguide.org/strategic-practices/share-power-with-communities/">https://healthequityguide.org/strategic-practices/share-power-with-communities/</a></p>	<ul style="list-style-type: none"> <li>• Strategic Practice: Build Organizational Capacity <a href="https://healthequityguide.org/strategic-practices/build-organizational-capacity/">https://healthequityguide.org/strategic-practices/build-organizational-capacity/</a></li> </ul> <p><b>B. Communicate and engage inclusively</b> The plan shall include the following:</p> <p>B1. Strategies to regularly communicate with community members and stakeholders about the health of their community, especially on strategies and decisions relating to health equity priorities.</p> <p>B2. Strategies to engage communities impacted by health disparities in recruitment efforts for public health jobs.</p> <p>B3. Strategies to engage in dialogue with people, governing bodies, and elected officials about governmental policies responsible for communicable disease health inequities, improvements being made in those policies and priority health issues not yet being adequately addressed.</p> <p><b>Related resources:</b> HealthEquityGuide.org</p> <ul style="list-style-type: none"> <li>• Strategic Practice: Build Community Alliances <a href="https://healthequityguide.org/strategic-practices/build-community-alliances/">https://healthequityguide.org/strategic-practices/build-community-alliances/</a></li> <li>• Strategic Practice: Prioritize Upstream Policy Change <a href="https://healthequityguide.org/strategic-practices/prioritize-upstream-policy-change/">https://healthequityguide.org/strategic-practices/prioritize-upstream-policy-change/</a></li> <li>• Strategic Practice: Change the Conversation <a href="https://healthequityguide.org/strategic-practices/change-the-conversation/">https://healthequityguide.org/strategic-practices/change-the-conversation/</a></li> </ul>

## Resources:

### Health Equity Tools

Resource	Focus	Authoring Organization(s)	URL
Equity and Empowerment Lens	Quality improvement and decision-making focused on racial equity	Multnomah County, Oregon	<a href="https://multco.us/diversity-equity/equity-and-empowerment-lens">https://multco.us/diversity-equity/equity-and-empowerment-lens</a>
Tool for Organizational Self-Assessment Related to Racial Equity	Organizational racial equity assessment	Coalition of Communities of Color All Hands Raised (Eliminating Disparities in Child and Youth Success Collaborative), Oregon	<a href="http://www.coalitioncommunitiescolor.org/research-data-tools/cccorgassessment">http://www.coalitioncommunitiescolor.org/research-data-tools/cccorgassessment</a>
Bay Area Regional Health Inequities Initiative	Health equity self-assessment for local public health departments	Bay Area Regional Health Inequities Initiative (BARHII) is a coalition of the San Francisco Bay Area's eleven public health departments	<a href="http://barhii.org/resources/barhii-toolkit/">http://barhii.org/resources/barhii-toolkit/</a>
HealthEquityGuide.org	Broad resource for local public health departments around health equity	Health Impact Partners	<a href="https://healthequityguide.org/">https://healthequityguide.org/</a>
The Equity Impact Review	Local government tool to evaluate the impact of a policy or program on equity	King County, Washington	<a href="https://www.kingcounty.gov/elected/executive/equity-social-justice/tools-resources.aspx">https://www.kingcounty.gov/elected/executive/equity-social-justice/tools-resources.aspx</a>
Health Equity Data Analysis	Data analysis through a health equity lens for local health departments	Minnesota Department of Health	<a href="http://www.health.state.mn.us/divs/chs/healthequity/guide/index.htm">http://www.health.state.mn.us/divs/chs/healthequity/guide/index.htm</a>
Moving to Institutional Equity: A Tool to Address Racial Equity for Public Health Practitioners	Racial Equity tool for public health practitioners	National Association of Chronic Disease Directors (NACDD)	<a href="http://www.chronicdisease.org/blogpost/1519632/274328/NACDD-s-Health-Equity-Council-Launches-New-Health-Equity-Tool">http://www.chronicdisease.org/blogpost/1519632/274328/NACDD-s-Health-Equity-Council-Launches-New-Health-Equity-Tool</a>

## **Oregon Communicable Disease and Infection Data (underlined items are hyperlinked to resources)**

1. Acute and Communicable Disease:
  - [Orpheus](#)
  - [Oregon Public Health Assessment Tool](#)
  - [Surveillance reports published on the Oregon Health Authority, Communicable Disease webpage.](#)
2. HIV
  - [Statistics, Information and Data Regarding HIV in Oregon](#)
3. Chlamydia, Gonorrhea and, Syphilis
  - [Oregon County STD Data](#)
4. Viral Hepatitis
  - [Viral Hepatitis in Oregon](#)
5. Immunizations
  - [Immunization data and reports](#)

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<sup>i</sup> September 2017 Public Health Modernization Manual accessed 1/30/18:

[http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/public\\_health\\_modernization\\_manual.pdf](http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/public_health_modernization_manual.pdf)

<sup>ii</sup> Modified from the Oregon Public Health Division, Health Equity Workgroup

<sup>iii</sup> Turnock, BJ. Public Health: What It Is and How It Works. Jones and Bartlett. 2009 as cited in the September 2017 Public Health Modernization Manual

<sup>iv</sup> Public Health Division- Oregon Health Authority working definition