

Equity Lens in Public Health

Health Equity: Selected Resources

The Equity Lens in Public Health (ELPH) Research Program recently held a workshop aimed to increase understanding of issues surrounding health equity work, and to provide tools that can be used to facilitate health equity work and increase system capacity in this area. The following provides a brief summary of the ELPH Program of Research, and some resources that were included in the workshop that can be used to help support health equity work.

The ELPH Program of Research

ELPH is a five-year program of research that is dedicated to the development and application of an equity lens in public health to increase health equity and reduce health inequities. This research seeks to address the significant differences in health outcomes and life expectancy that occur between different social, economic, demographic and geographic groups of people. This research is specific to British Columbia's public health system, with particular respect to mental health promotion, harm reduction and substance use program areas. ELPH is organized into four separate but interrelated studies:

Study 1: Assessing Health Equity Priorities and Strategies

Study 2: Intersectoral Collaboration for Health Inequities Reduction

Study 3: Assessing the Theoretical Relevance and Practical Utility of Health Equity Tools

Study 4: Power and Ethics in Public Health

ELPH is funded by the CIHR and PHAC, and led by principal investigators Bernie Pauly, Marjorie MacDonald, and Trevor Hancock of the University of Victoria, and Warren O'Briain of the Ministry of Health.

Selected Resources

Understanding Health Equity

The following references may be useful for understanding what constitutes health equity and increasing general understanding of the issues underlying health equity work in public health.

Blas E. & Kurup, (2010). Chapter 1 Introduction and Methods. Equity, determinants of health and public health programmes. World Health Organization.

Mantoura, P. & Morrison, V. (2016). Policy Approaches to Reducing Health Inequalities. Montréal, Québec: National Collaborating Centre for Healthy Public Policy.

Solar, O. and A. Irwin (2010). Executive Summary. A conceptual framework for action on the social determinants of health. Social Determinants of Health Discussion Paper 2 (Policy and Practice). Geneva, World Health Organization.

Whitehead, M. M. and G. Dahlgren (2006). Levelling up (part 1): a discussion paper on concepts and principles for tackling social inequities in health. Studies on social and economic determinants of population health. Copenhagen, World Health Organization.

Health Equity Images and Metaphors

Images and metaphors are a powerful tool that can be used to help increase understanding around the issues that surround health equity work. The following images are some examples that can be used to increase understanding of health equity, and to facilitate discussion of how to remove barriers and promote health equity. These images are a useful way to highlight that equal treatment doesn't necessarily result in equal access.

These images using the apple tree metaphor are adaptations available from the Community View Collaboration:

https://www.communityview.ca/images/2014_health_equity_SHR_health_equity.png

https://www.communityview.ca/images/2014_health_equity_SHR_gaps_in_health_equity.png

These images using the baseball game metaphor are adaptations available from the Interaction Institute for Social Change, the Centre for Story-Based Strategy, and artist Angus Maguire:

http://interactioninstitute.org/wp-content/uploads/2016/01/IISC_EqualityEquity.png

<http://interactioninstitute.org/wp-content/uploads/2016/03/Equality-Equity-Reality.jpg>

<http://www.the4thbox.com/>

Levelling Up versus Levelling Down

There are different approaches to address health equity such as programs that target a particular vulnerable population compared with programs that offer universal services. The goal of programs should be to 'level up' the health of those experiencing health inequities without 'leveling down' the health of others in the population.

Programs based on *Proportionate Universality* may be the most effective for improving health equity, as they aim to provide both targeted services to a particularly vulnerable sector of the population, as well as universal services to support the whole population. This approach will better enable “Levelling Up” of the population. The following policy brief from the Human Early Learning Partnership is a useful resource to increase understanding of the potential impact of different approaches and to aid in assessing whether programs are working to level up versus level down.

Human Early Learning Partnership. (2015). *Proportionate Universality: Policy Brief*. Human Early Learning Partnership, University of British Columbia.

http://earlylearning.ubc.ca/media/publications/proportionate_universality_web_november_2015.pdf

Equity Oriented Health Care Systems and Society

Much work to reduce health inequities involves managing crises as they arise. However, to effectively move beyond this to improve health equity will require a reorientation to health equity within health systems and broader society, taking into account the social determinants of health. Furthermore, there may be value in creating social movements to address equity. The following references expand on these ideas:

Baum, F. E. (2016). Health systems: how much difference can they make to health inequities?. *Journal of epidemiology and community health*, JECH-2015.

Baum, F. E., Bégin, M., Houweling, T. A., & Taylor, S. (2009). Changes not for the fainthearted: reorienting health care systems toward health equity through action on the social determinants of health. *American Journal of Public Health*, 99(11), 1967-1974.

Brown, T. M. and E. Fee (2014). "Social movements in health." *Annual Review of Public Health* 35: 385-398.

Holton, J. A. (2015). "Exploring social movements thinking for leading large-scale change in health and social services systems." *Journal of Corporate Citizenship* 2015(58): 102-118.

Marmot, M., Allen, J., & Goldblatt, P. (2010). A social movement, based on evidence, to reduce inequalities in health. *Social Science & Medicine*, 71(7), 1254-1258 (Related video <https://www.youtube.com/watch?v=bn4Lig-rr8k>)

A Common Agenda

The National Collaborating Centre for Determinants of Health (NCCDH) collaborates with public health practitioners, researchers, and decision-makers across Canada to work to improve health equity. They have proposed a “Common Agenda” for moving health equity work in Canada forward that identifies priorities to this end. This resource can be used to identify organisational strategies that may be effective, facilitate conversation with partners, and evaluate current strategies aiming to improve health equity.

National Collaborating Centre for Determinants of Health. (2016). Common Agenda for Public Health Action on Health Equity. Antigonish, NS: National Collaborating Centre for Determinants of Health, St. Francis Xavier University. <http://nccdh.ca/resources/entry/common-agenda-for-public-health-action-on-health-equity>

Health Equity Toolkit

The ELPH Program has undertaken reviews of health equity tools that are available for organisations. The first review was completed in 2013 and a resource was developed to provide a summary for each tool that includes the purpose and description for each tool, who would use it, applications of the tool, any known evaluations for the tool, and keywords and a full citation for each tool. Subsequently, a second review was performed from 2013-2015 and an updated resource guide is currently being developed for these additional tools.

Pauly, B., MacDonald, M., O'Briain, W., Hancock, T., Perkin, K., Martin, W., Zeisser, C., Lowen, C., Wallace, B., Beveridge, R., Cusack, E., & Riishede, J. on behalf of the ELPH Research Team (2013). Health Equity Tools. Victoria, BC: University of Victoria. [Available from www.uvic.ca/elph]

Contact Information

Further information on the ELPH program of research is available on our website: www.uvic.ca/elph.

Questions may be directed to Bernie Pauly, principal investigator, bpaul@uvic.ca or Heather Strosher, research coordinator, hlwison@uvic.ca.