ETR'S HEALTH EQUITY FRAMEWORK

From reflection to integration and action for HIV research

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advancing health equity etr.

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Objectives

By the end of the session, participants will be able to:

Understand the foundational aspects of ETR's Health Equity Framework; and

Identify lessons and tools to advancing health equity in HIV research, especially for BIPOC scholars, researchers, and activists

Develop/Identify an action in applying the Health Equity Framework lens directly to your own work

ETR is a non-profit organization committed to improving health outcomes and advancing health equity for youth, families, and communities.

Content Areas of Focus

- HIV, sexual, and reproductive health
- Alcohol, tobacco, and other drugs
- School-based health and wellness
- Equity and inclusion in STEM

Strategies to Achieve Our Mission in These Areas

- Applied research
- Evaluation
- Training, technical assistance, and capacity building
- Program development
- Health promotion products
- Evidence-based program dissemination

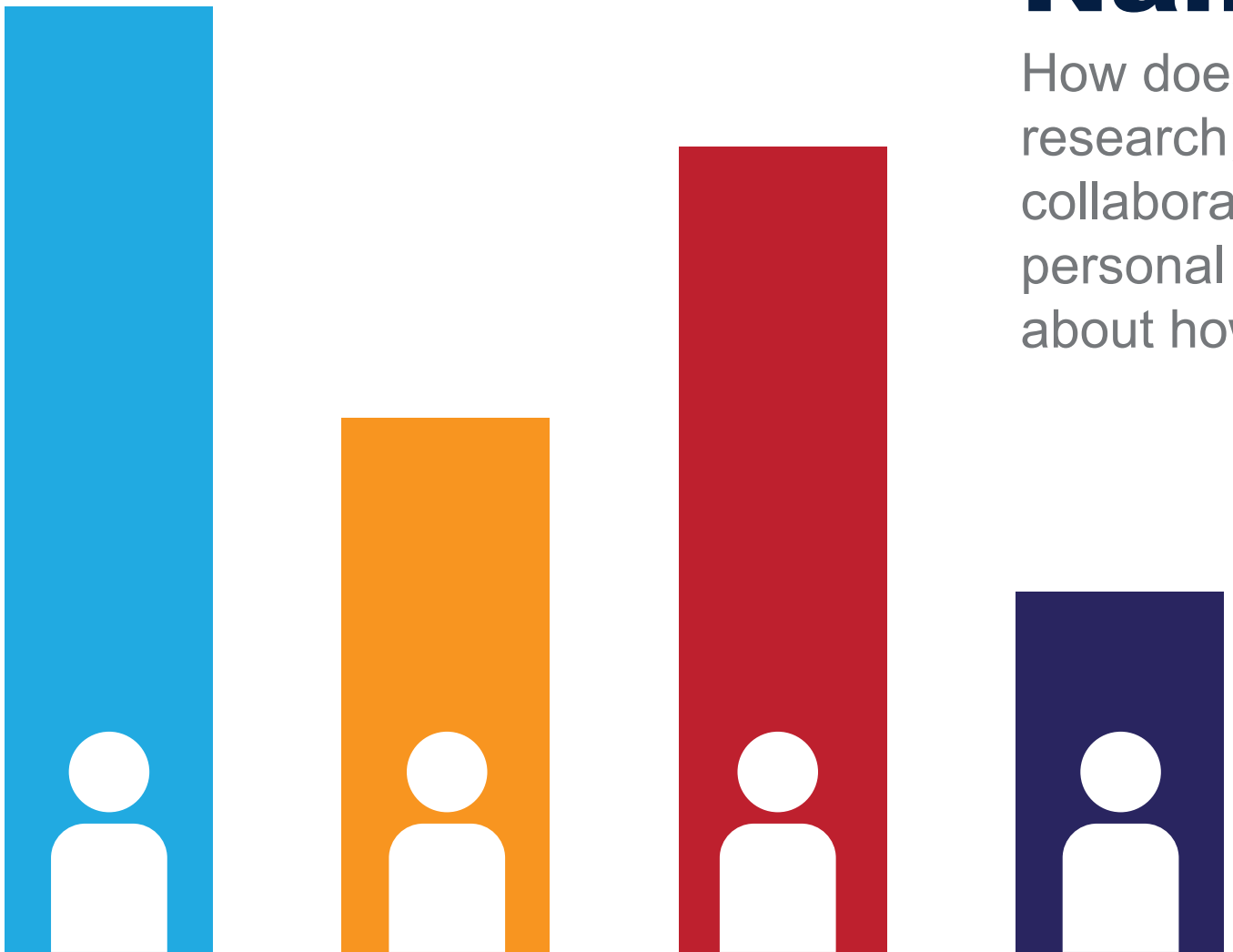
EXPLORE

What is health equity?

PRIME YOUR BRAIN

Type into the chat box:

What is the difference between **equity** and **equality**?



Name an example:

How does equity show up in your work? Your research; your organization; your collaborations, or in professional and/or personal interactions? How do you stay curious about how to engage in equity practices

…Metaphors are important. They help us understand new ideas by referencing things we already know.

At the same time, they shape our experience, opening us up to some ideas while closing us off to others.

The mental shorthand we use to understand "equity" will affect how we go about fighting for it.

(Paul Kettner, blog author of Cultural Organizing)

Research is formalized curiosity. It is poking and prying with a purpose. It is a seeking that he who wishes may know the cosmic secrets of the world and they that dwell therein."
(Zora Neal Hurston, Dust Tracks on a Road, 1942)

DEFINITIONS OF HEALTH EQUITY

- "Health equity" … implies that ideally everyone should have a fair opportunity to attain their full health potential and that no one should be disadvantaged from achieving this potential. (World Health Organization)
- Health equity is achieved when every person has the opportunity to "attain his or her full health potential" and no one is "disadvantaged from achieving this potential because of social position or other socially determined circumstances." (Centers for Disease Control and Prevention)
- Health equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care. (Robert Wood Johnson Foundation)

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Components of a health equity definition

- Fair access to conditions and opportunities to achieve highest standard of health
- Removing barriers and creating access for those at greatest risk of poorer health resulting from social conditions

(Braveman 2014)

Health Inequities
(or Disparities)

Health difference that is preventable and closely linked to economic, social or environmental disadvantage.

(Healthy People 2020)

Health Equity

+ Aspirational
+ Represents a commitment to reduce and eliminate health inequities
+ Health inequities data measures progress towards health equity

Social Determinants of Health

The conditions in which people are born, grow, live, work, and age. These conditions are shaped by the distribution of money, power, and resources at global, national, and local levels.

(WHO, 2008)

Health Equity

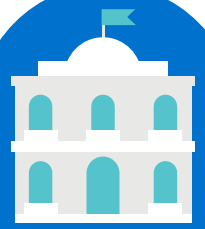
+ Social determinants are drivers of health equity
+ Addressing social determinants is a primary approach to improving health equity

DETERMINANTS OF HEALTH

SOCIAL DETERMINANTS OF HEALTH AND HEALTH EQUITY

DISTAL / UPSTREAM

PROXIMAL / DOWNSTREAM

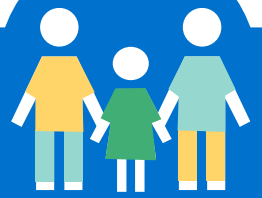


Structural/societal:

Institutional structures that generate social stratification and norms

Community/ environment:

Spaces in which social relationships occur, such as schools, workplaces and neighborhoods



Relational:

Social relationships, such as family, peers, co-workers

Behavioral:

Individual actions and choices

Biological:

Genetic and physiological factors

Why is using shared language critical to advancing health equity?

Share a few thoughts in the chat box.

[Organizations] must understand the **cultural and political resonance** *of racial and health equity concepts with their communities and the extent to which* **clear definitions of terms and concepts will foster equity agenda development.**

(Recommendation #1, Building Public Health Capacity to Advance Health Equity, 2019)

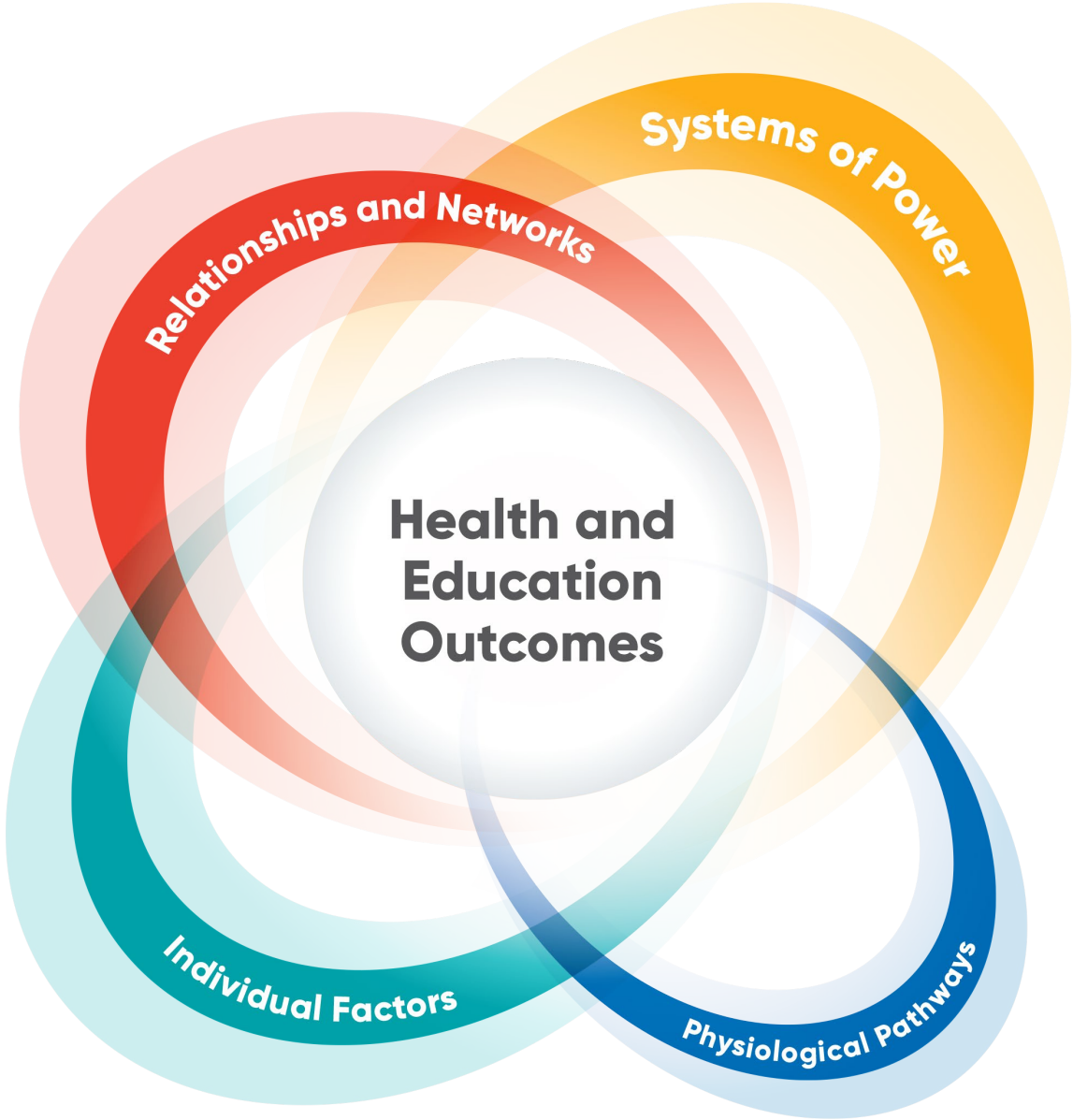
EXAMPLE

The Health Equity Framework

ETR's Health Equity Framework

Health and education outcomes are influenced by complex interactions between people and their environment.

etr.org/healthequityframework



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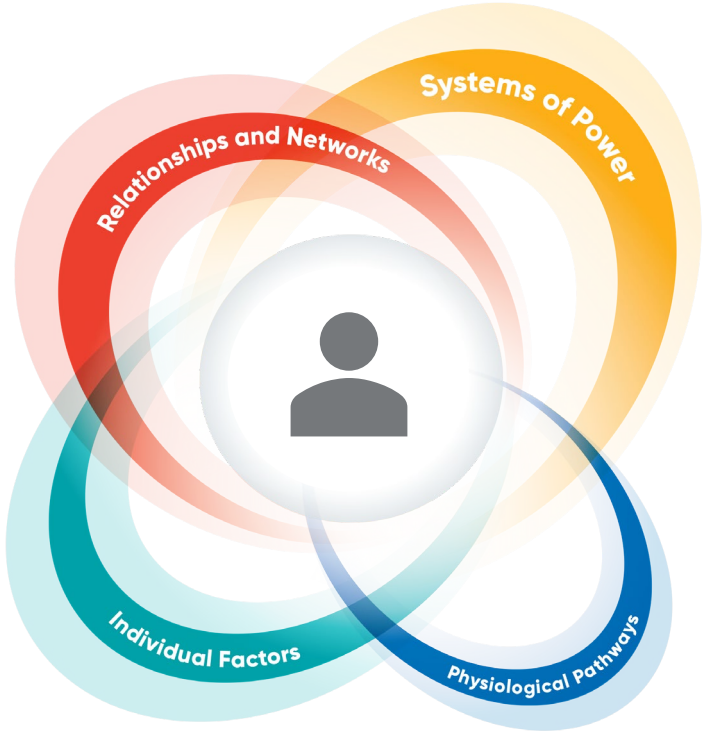
ETR's Health Equity Framework (HEF) is based on three foundational principles.

1. Equity at the core of health outcomes
2. Multiple, interacting spheres of influence
3. Historical, life-course perspective

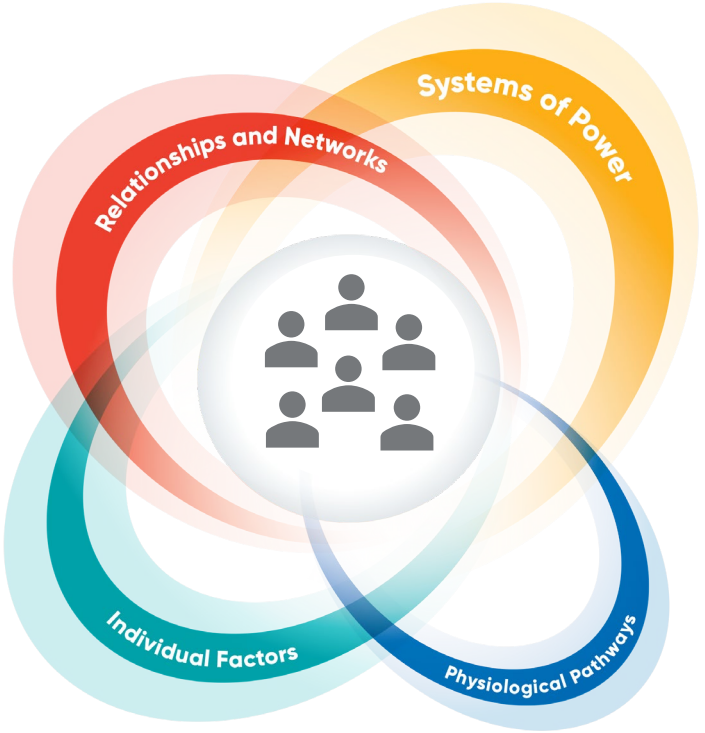
Principle #1: Equity at the core of health outcomes

Personal agency + **Fair access to resources and opportunities** = **Health Equity**

The HEF transitions focus from centering the individual…



… to health outcomes of communities and groups.



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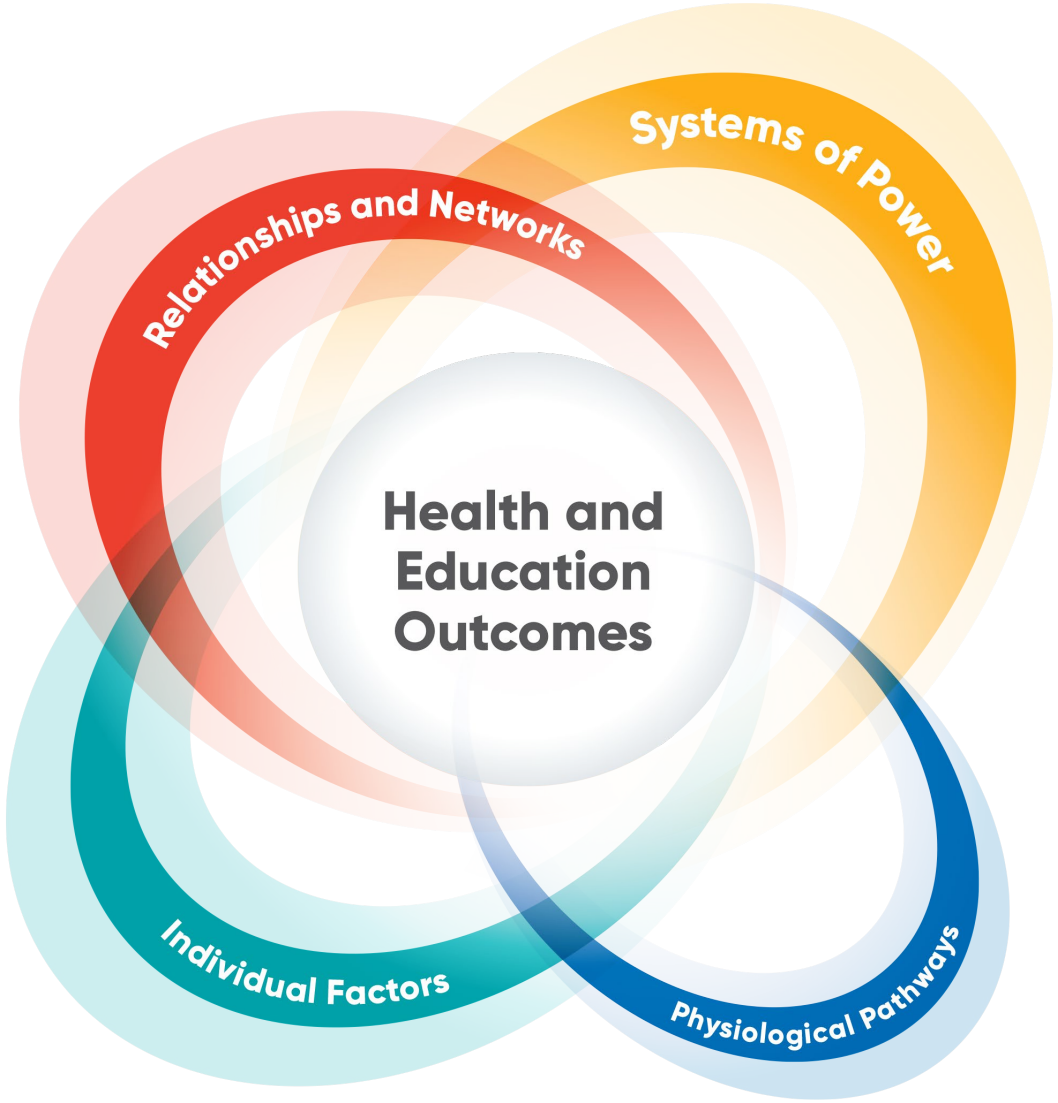
Principle #2: Multiple, interacting spheres of influence

Relationships and Networks

Connections with family, friends, partners, community, school and workplaces.



Systems of Power

Policies, processes, practices that determine access to resources and opportunities.

Individual Factors

A person's response to social, economic and environmental conditions through their attitudes, skills and behaviors.

Physiological Pathways

Biological, physical, cognitive and psychological abilities that can contribute to health but cannot be easily be modified.

etr.

Image by ETR

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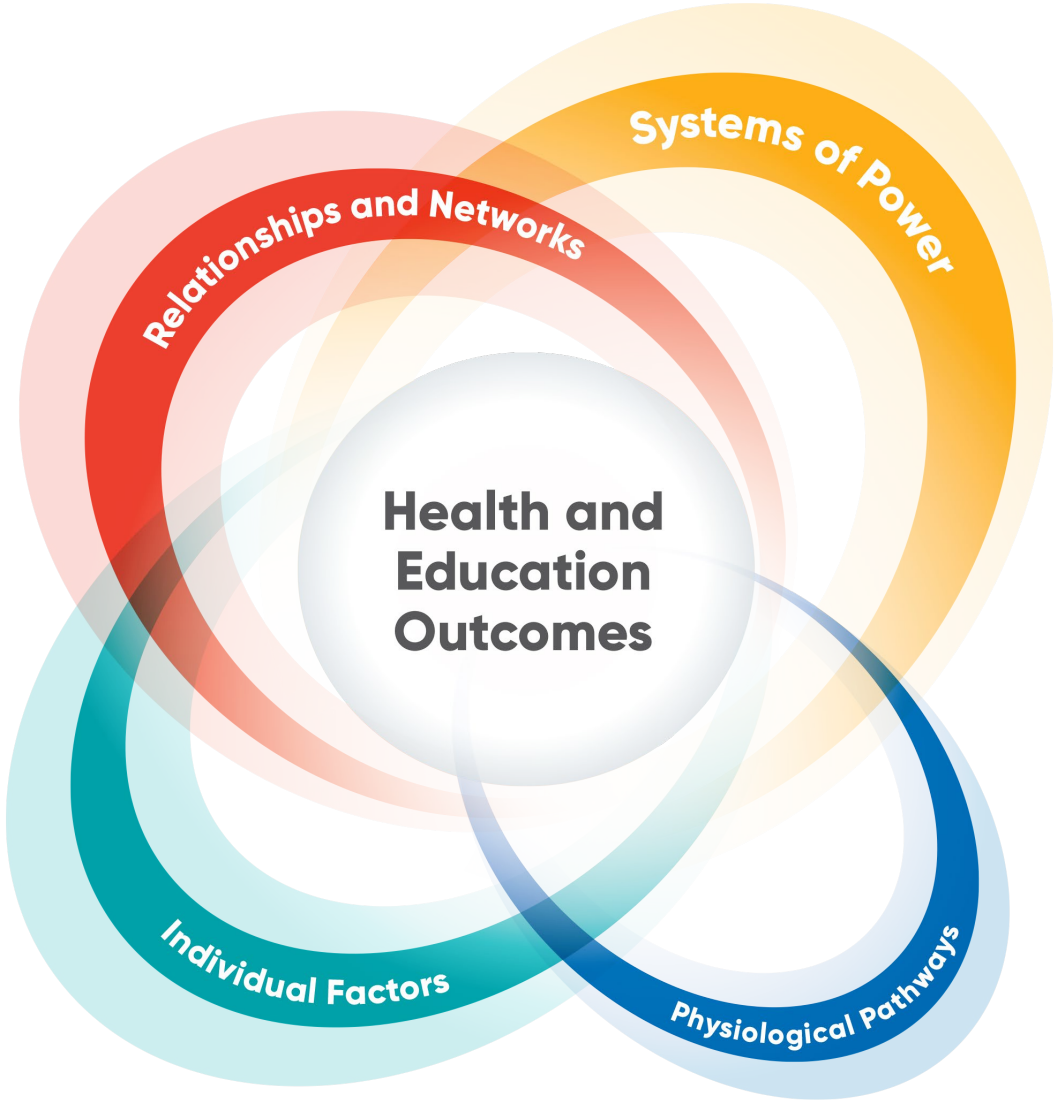

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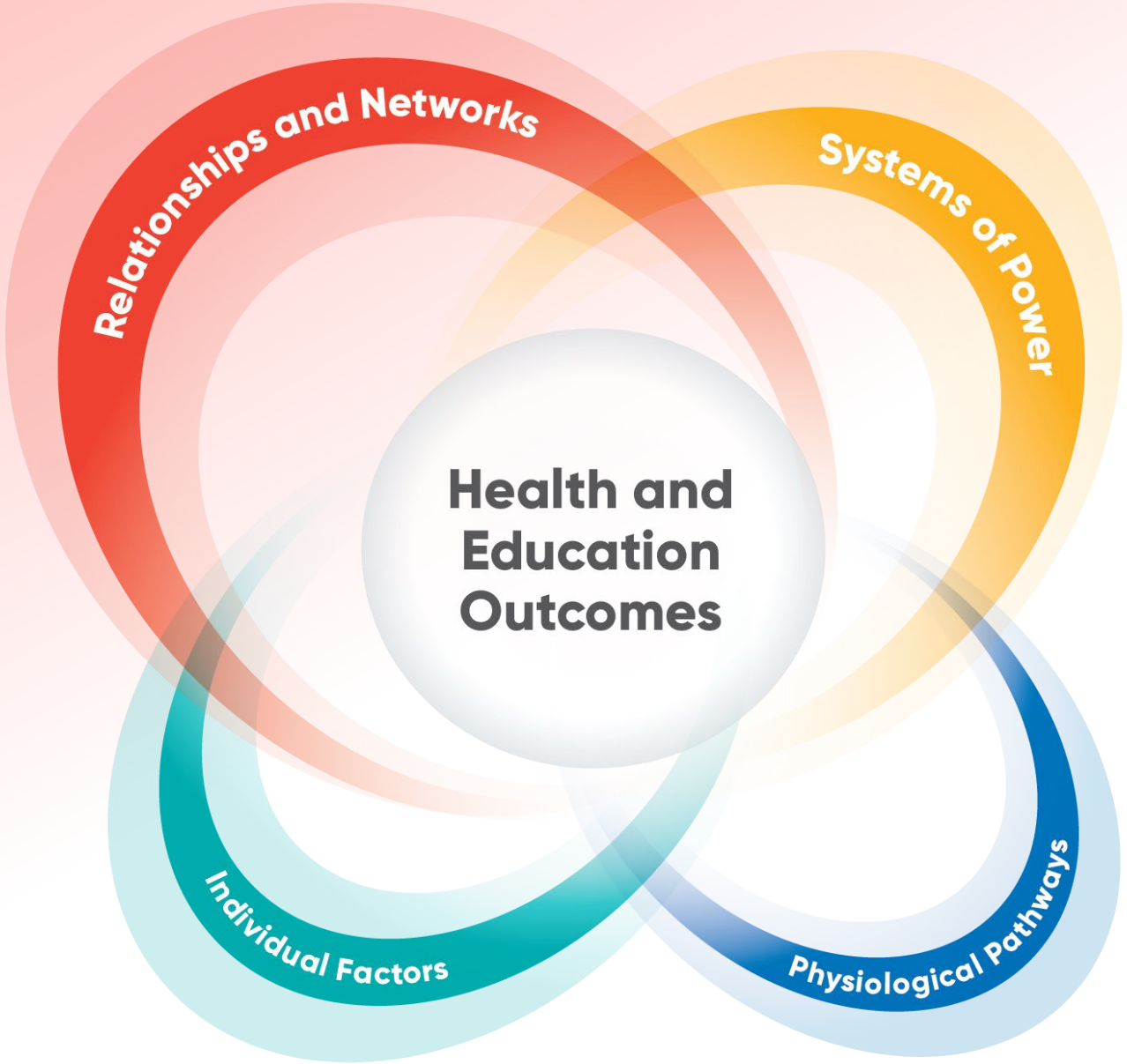

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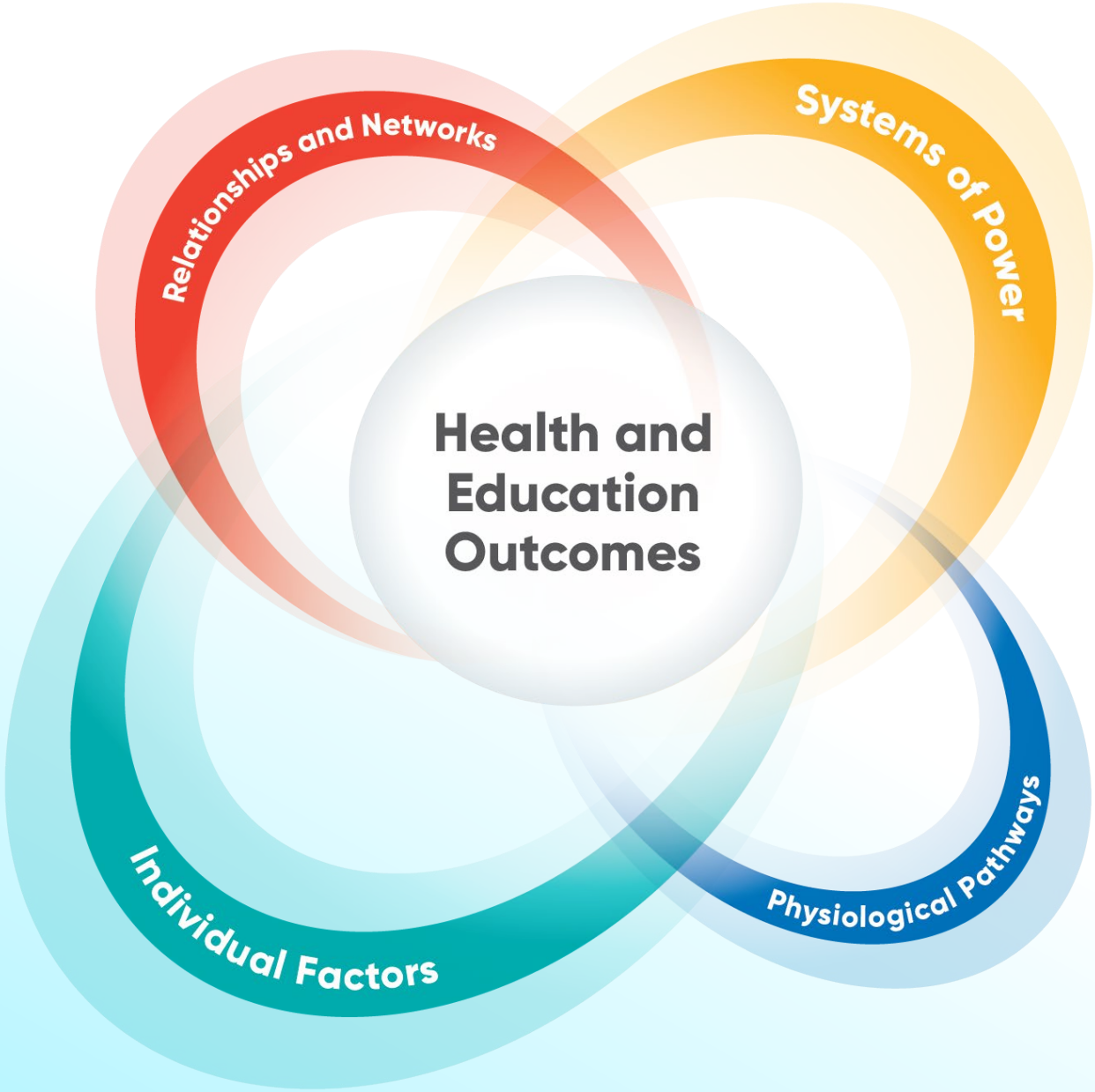

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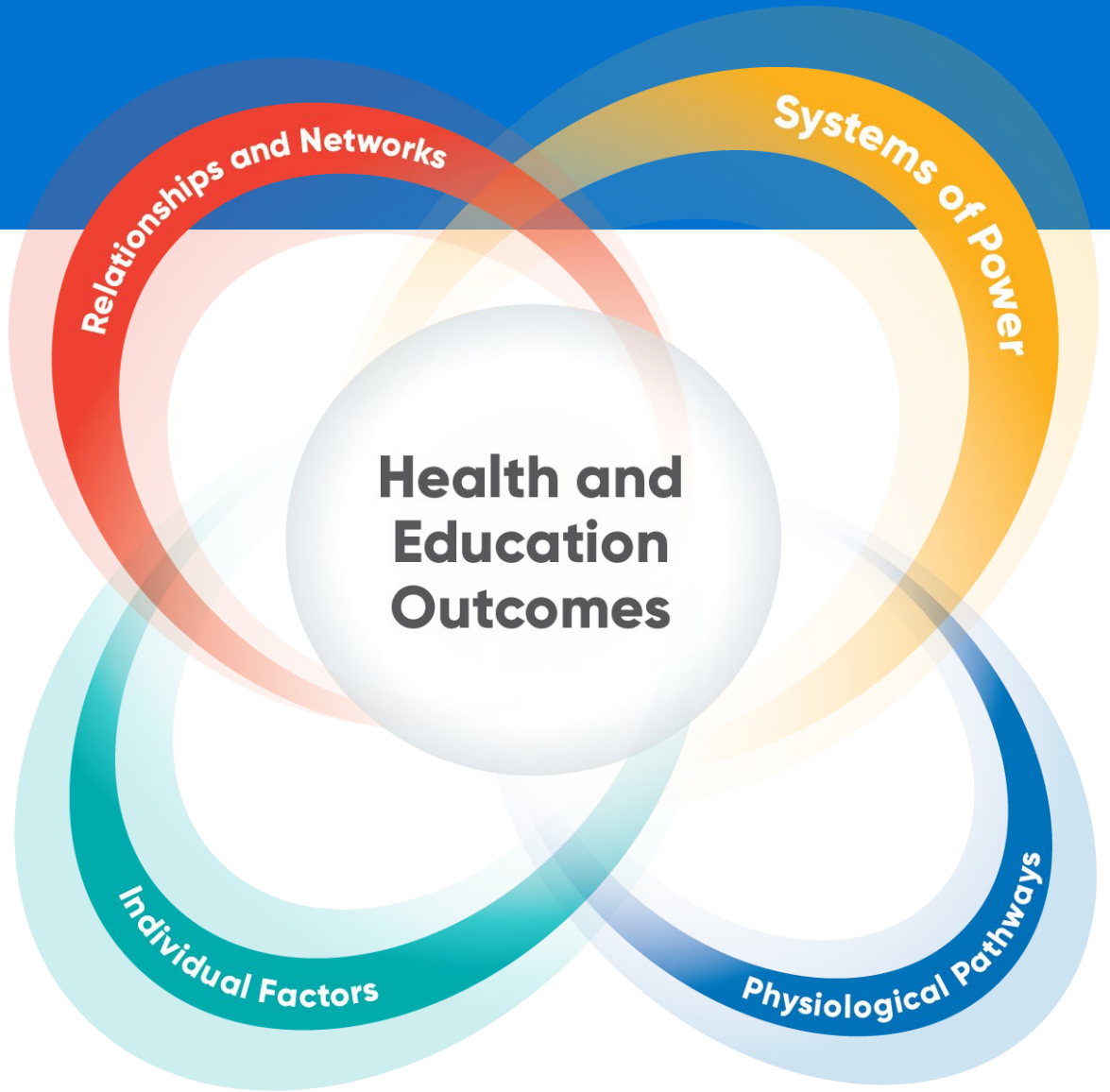

Relationships and Networks
Systems of Power
Health and Education Outcomes
Individual Factors
Physiological Pathways

LIFESPAN

Family of origin
(key influencer)

ADOLESCENCE

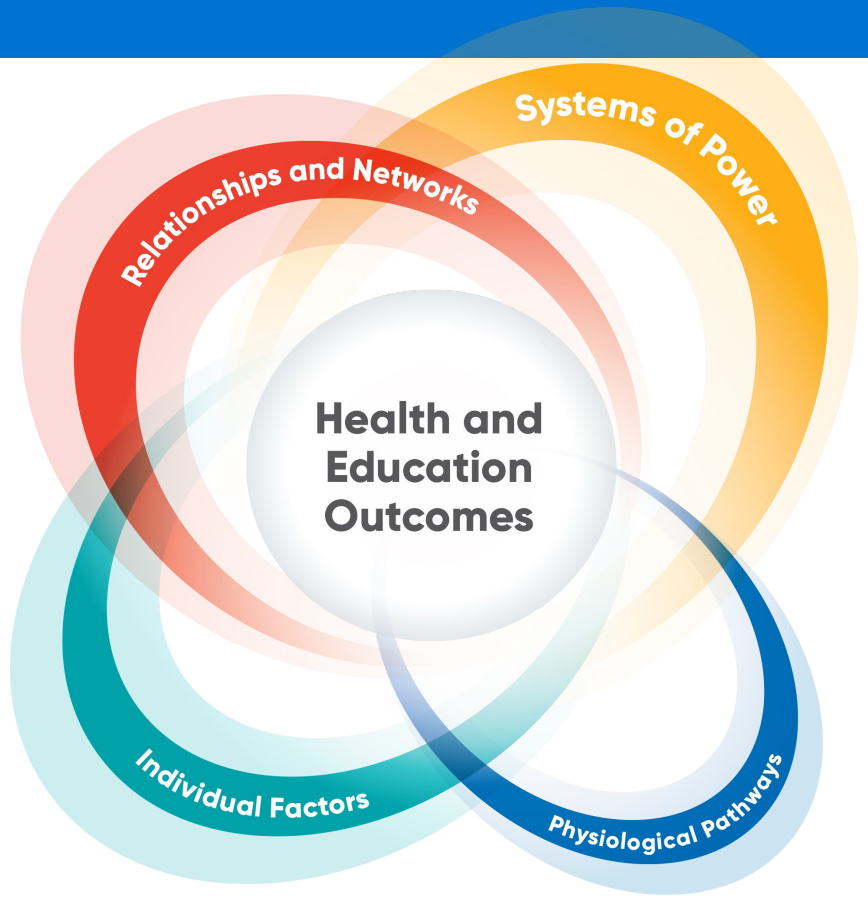
Family of origin

Peers, Media, Education, Employment

LIFESPAN

Cumulative and generational effects of historical access, inequities, and trauma

Impact of current and historical access, inequities and trauma on future generations



- What health outcome inequities do we want to change?
- How do the spheres of influence impact this outcome?
- What strategies are we and others currently using to address the spheres of influence?
- What are the gaps in our strategies that can increase our impact on inequities?

Impacts of the HEF on ETR

- Redefining ETR's vision and purpose
- Unified framework across our products and services
- Method to identify gaps in our work across content areas
- Staff reflection on what equity means personally and professionally
- Measuring our impact through the spheres of influence
- Educational tool for funders and partners

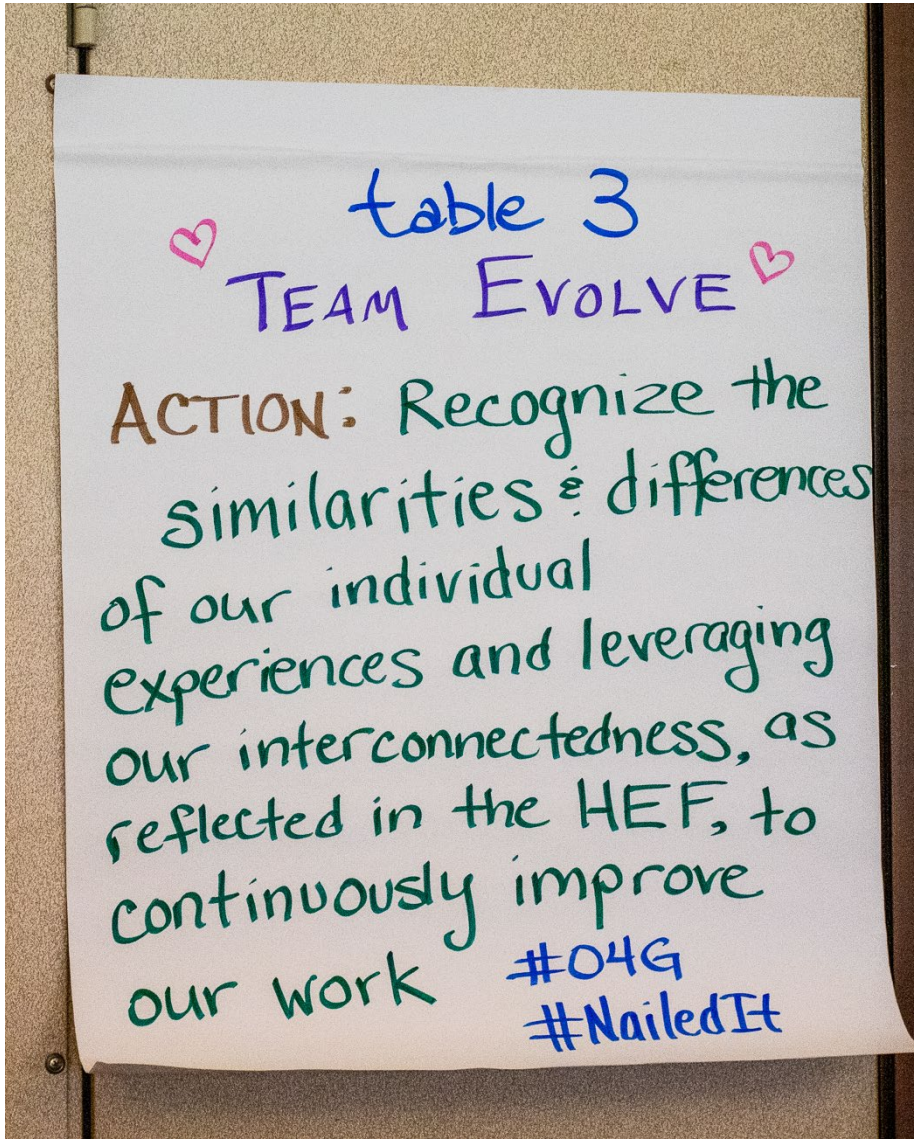


Image by ETR

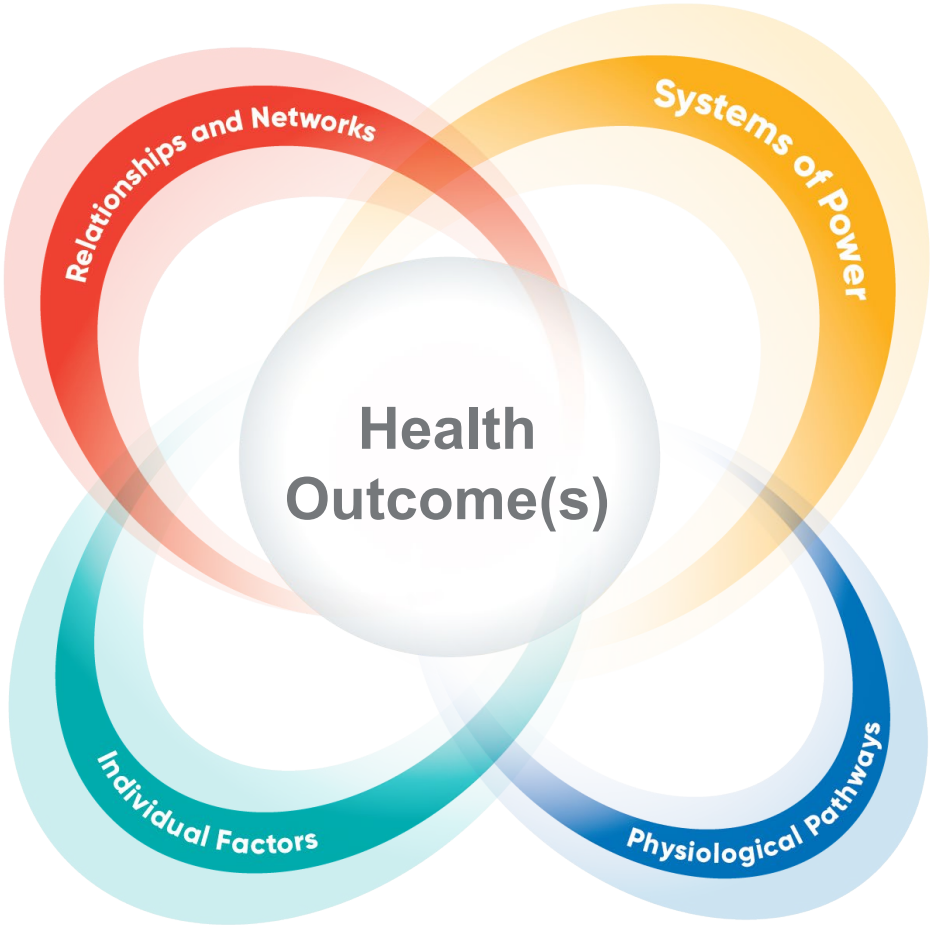
HEF Application: Mapping across Organization

- What is the primary outcome(s) of interest?
- Who is the priority population?
- Does the project explicitly:
  - Change or support change in policies and practices of institutions impacting priority population
  - Build the skills and capacity of professionals, family members, peers, partners, etc. to support the priority population
- Does the project explicitly, cont.
  - Support the development of networks/ connections with or among the priority population
  - Modify the attitudes, skills, and/or behaviors of the priority population
  - Employ strategies that account for physiological factors impacting priority population

How we use the HEF at ETR

- Redefining ETR's vision and purpose
- Unified framework across our products and services and administrative functions
- Method to identify gaps in our work across content areas
- Staff reflection on what equity means personally and professionally
- Measuring our impact through the spheres of influence

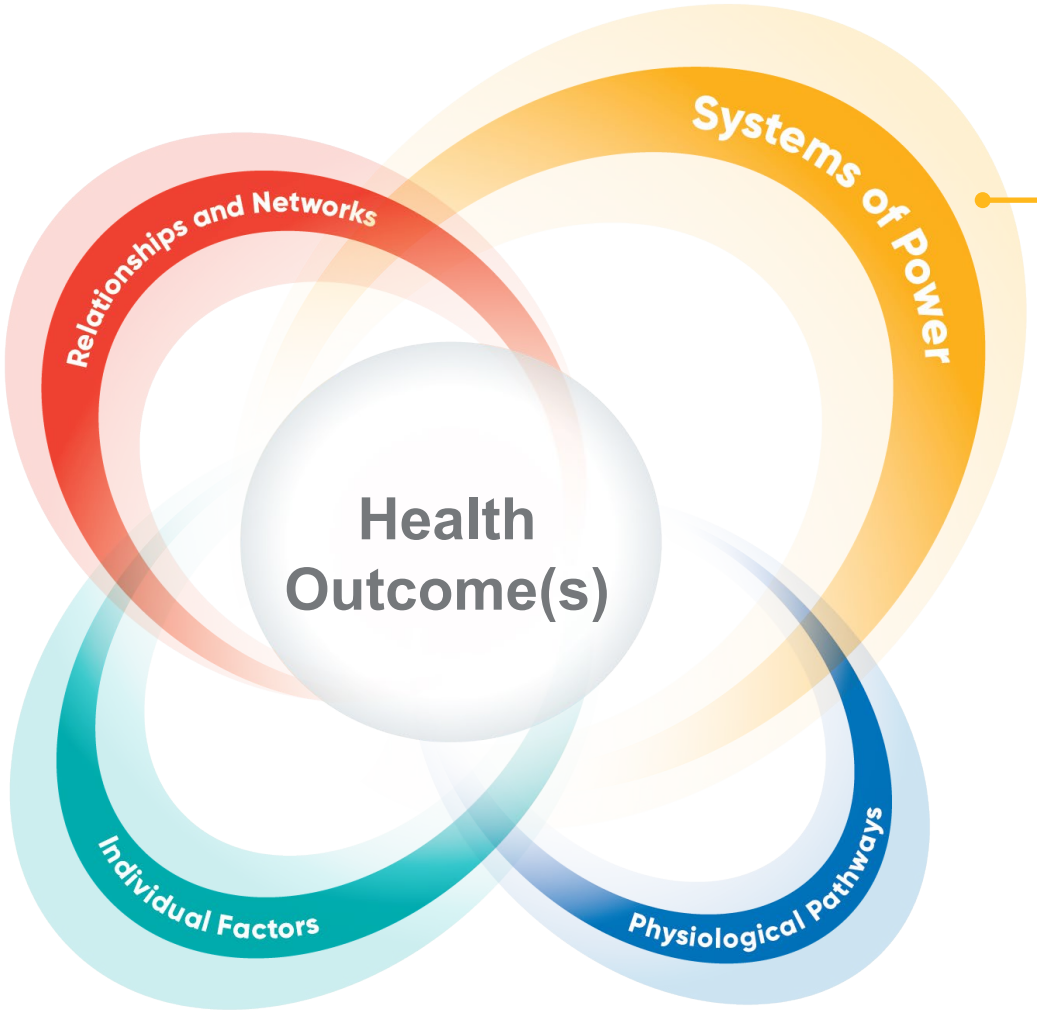
HEF IS A REFLECTION TOOL



Explore:

What risk and/or protective factors influence health outcome(s)?

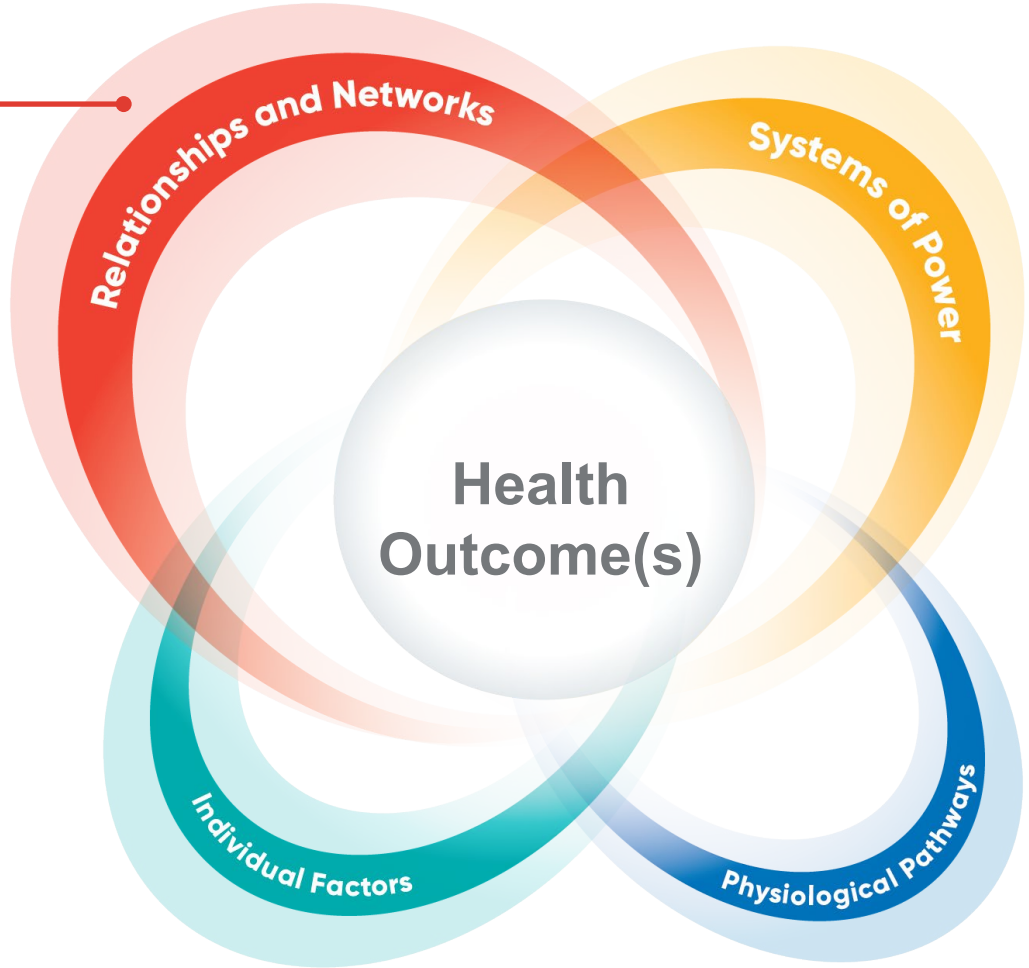
HEF IS A REFLECTION TOOL



- What systems, institutions or policies impact this outcome?
- How do or could these systems, institutions or policies support better outcomes?
- How do these systems, institutions or policies create barriers to better outcomes?

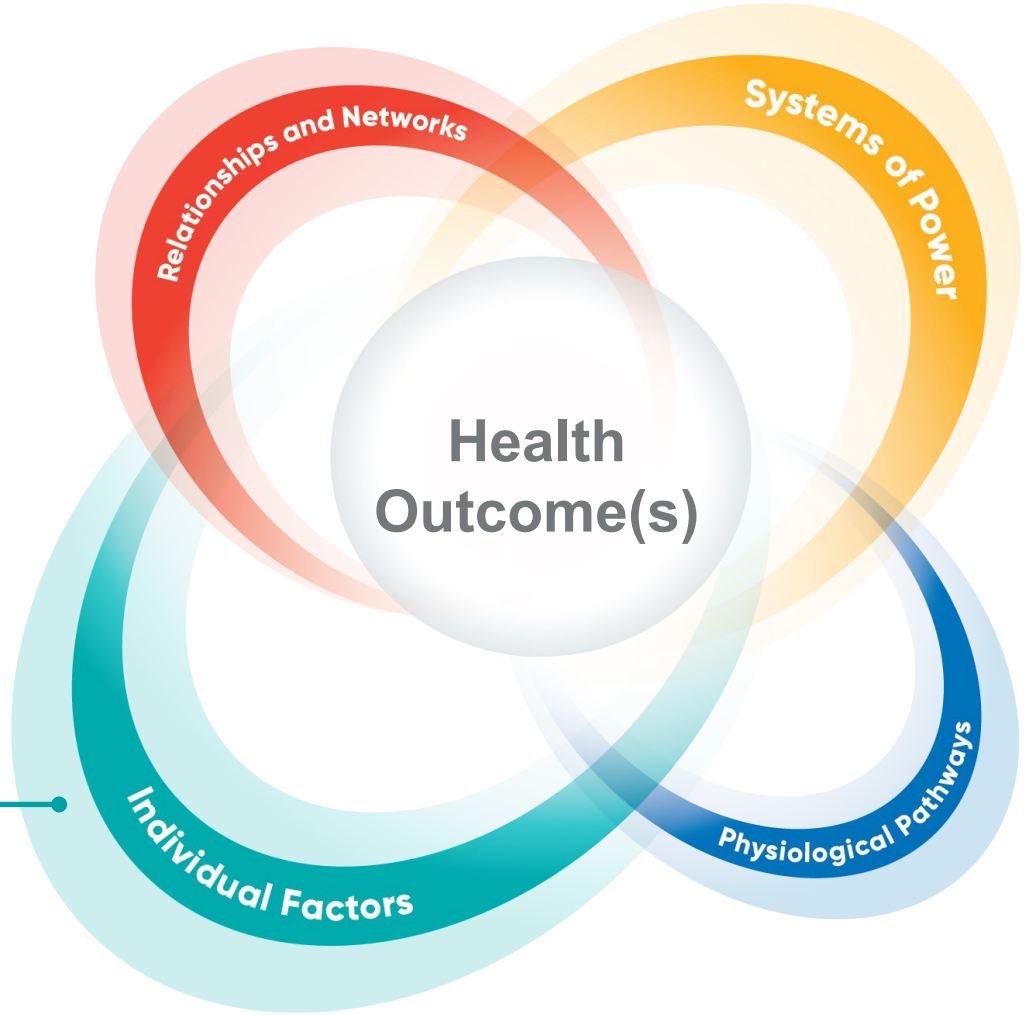
HEF IS A REFLECTION TOOL

- Beyond the individual, who has influence over this outcome?
- How do or could families, friends, partners or other support systems support better outcomes?
- How do relationships with others enable harmful behaviors or create barriers to better outcomes?



HEF IS A REFLECTION TOOL

- What knowledge, attitude or values do individuals need to gain better health outcomes?
- What behaviors lead to better or worse outcomes?



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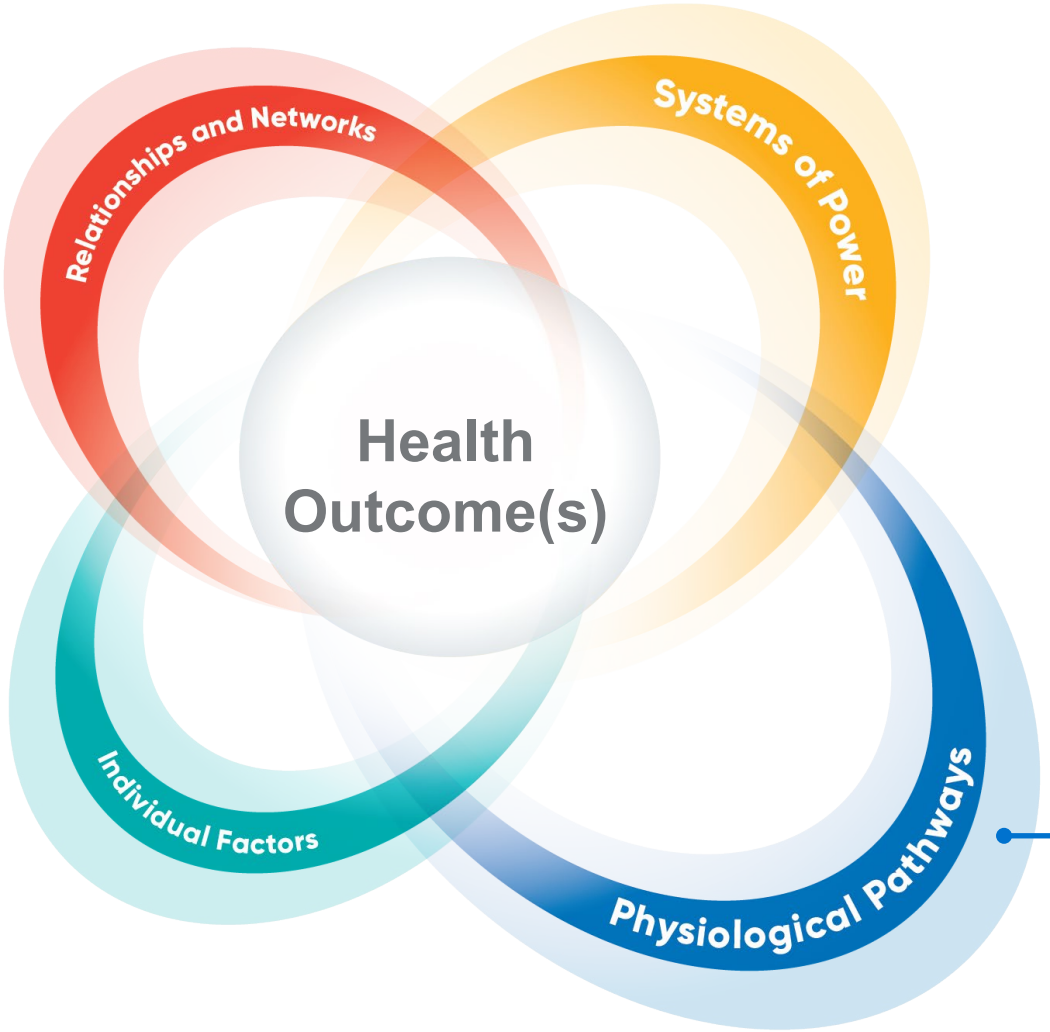
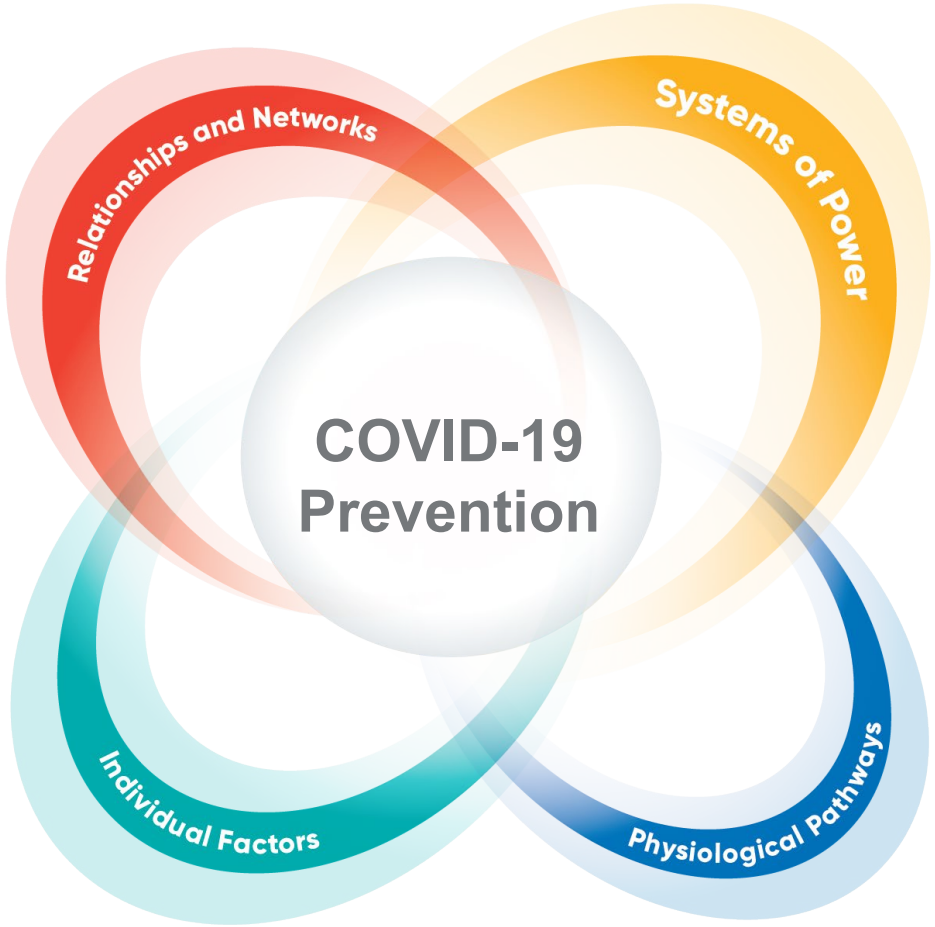


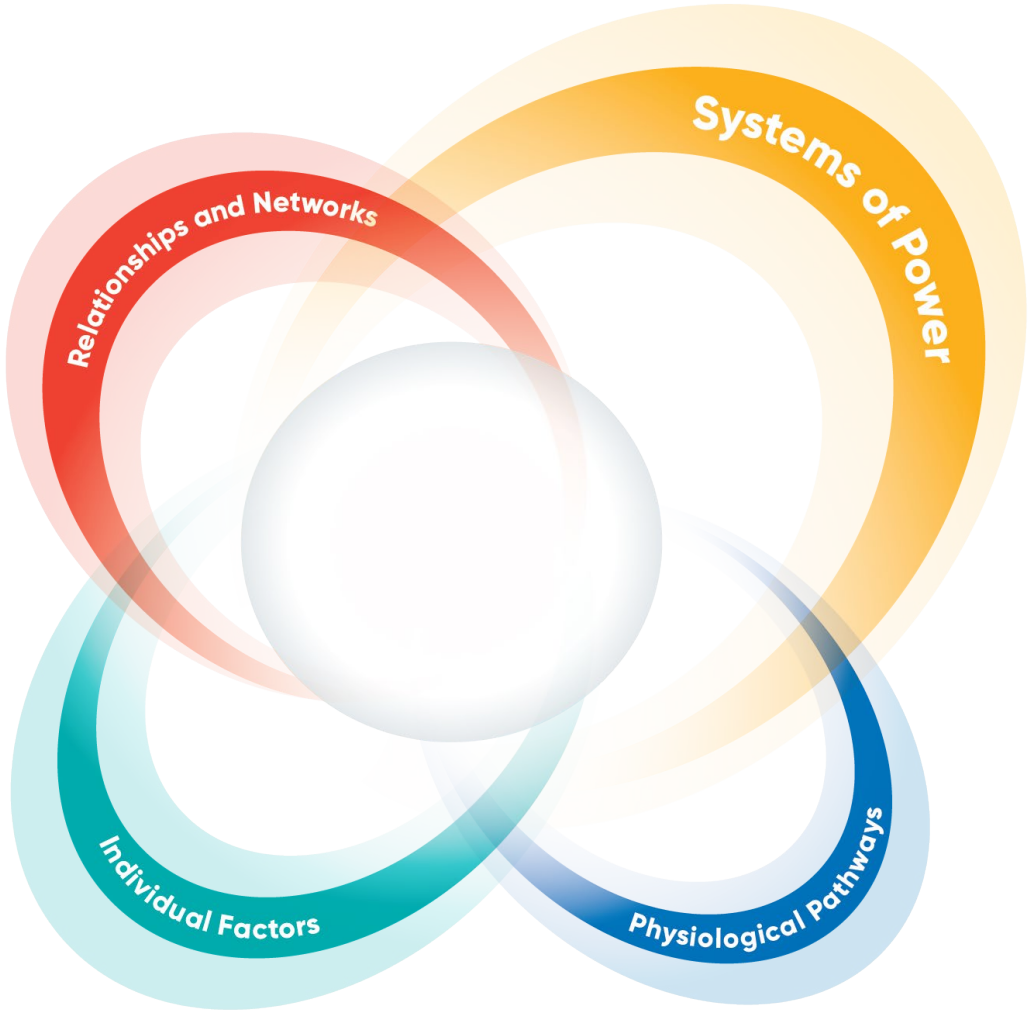
- How does a person's development or physical and cognitive ability impact this outcome?
- What role does trauma play in achieving better or worse outcomes?

Let’s Apply it

HEF APPLICATION: COVID 19 PREVENTION



HEF APPLICATION: Research and Evaluation



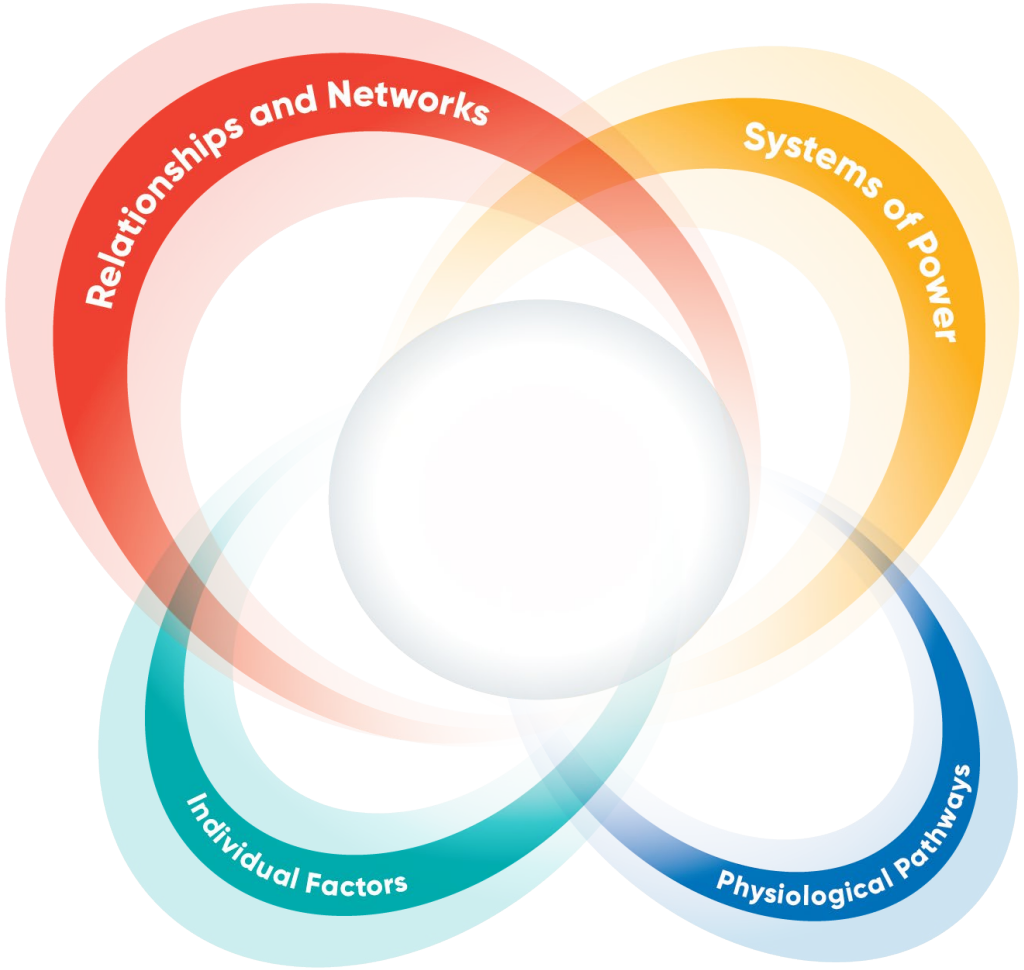
Systems of Power

Research that address structures vs individual

-a study that looks at guaranteed income to Black moms

-a rapid assessment which a health department assesses their policies and practices in order to reduce racial inequities in vaccine distribution.

HEF APPLICATION: Scholarship



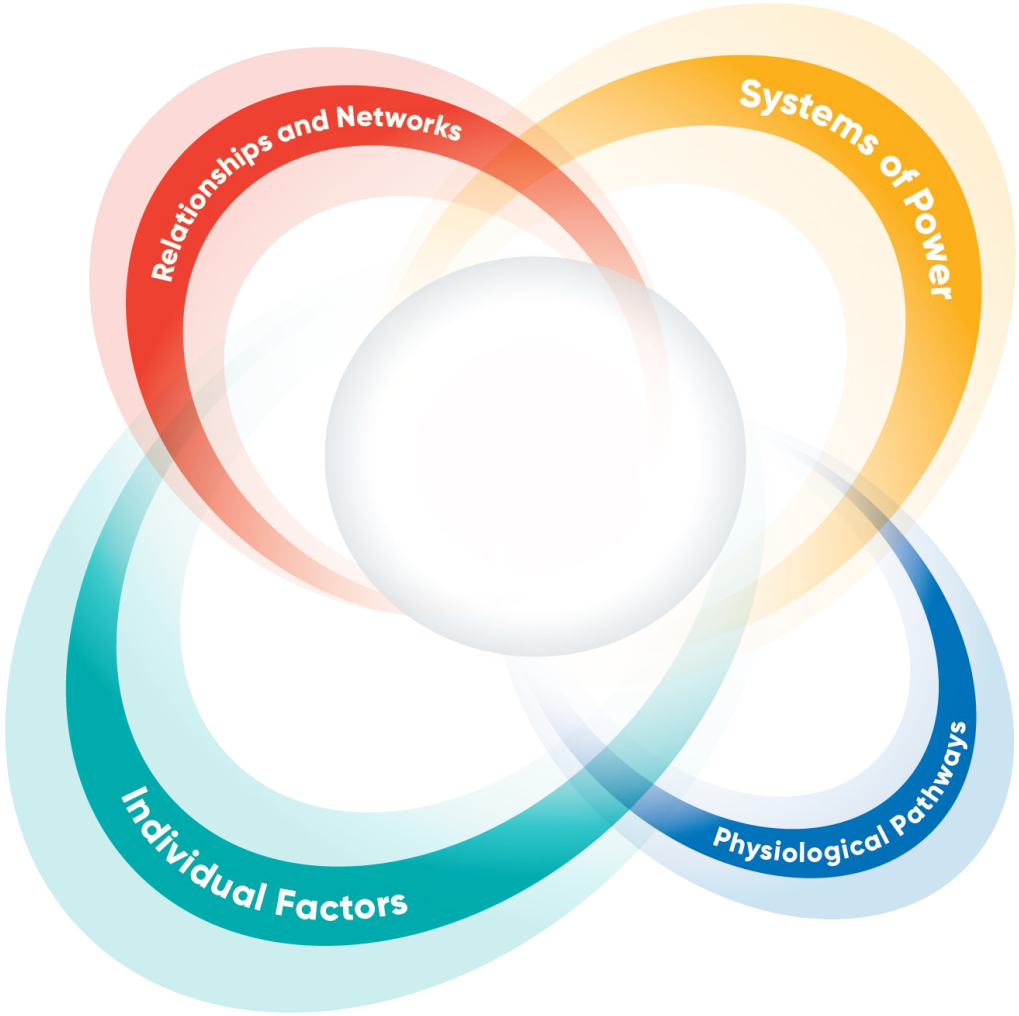
Relationships and Networks

Foster Community Based Partnerships that push on equity practices

-long term availability support and advise

-allowing your partnerships to have that coveted “first author” role

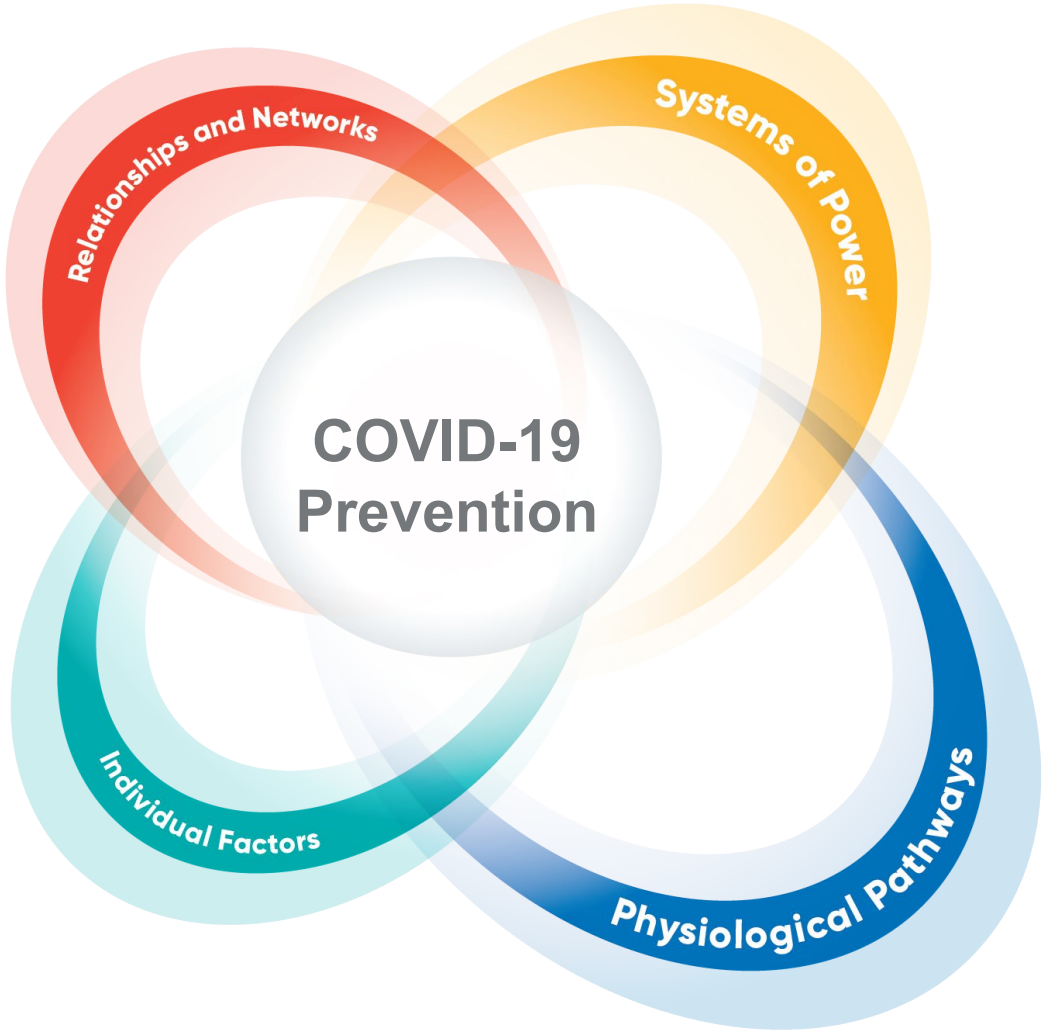
HEF APPLICATION: Engage in a Critical Qualitative Stance



Individual Factors

Research that highlights strengths and resilience and a critical qualitative stance so that the story context stays relevant- and community voice stays integrated: Qualitive formative vs qualitative in the Plan-Do-Study-Act cycle (IS framing)

HEF APPLICATION: COVID 19 PREVENTION



Physiological Pathways

Education materials and trainings are developed to be age appropriate, attending to health literacy, and 508 compliance.

TAKE ACTION

Write on a piece of paper:

One action you will take in the next three months to apply a health equity lens to your work.

Health equity is not just a desired outcome to achieve but a continual process to sustain.

(National Collaborative for Health Equity, 2019)

Resources

ETR's Health Equity Framework. etr.org/healthequityframework

Roots of Health Inequity: A Web Based Course for the Public Health Workforce, NACCHO rootsofhealthinequity.org

Putting the Culture of Health Action Framework to Use, Robert Wood Johnson Foundation
https://www.rwjf.org/content/dam/COH/PDFs/PuttingtheCoHActionFrameworktoUse.pdf

Health Equity Guide and Webinar Series, Health Impact Partners, www.healthequityguide.org

Building Healthy, Equitable Communities, Change Lab Solutions, https://www.changelabsolutions.org/good-governance/the-series

A New Way to Talk about Social Determinants, Robert Wood Johnson Foundation, https://www.rwjf.org/en/library/research/2010/01/a-new-way-to-talk-about-the-social-determinants-of-health.html

The Master's Tools Will Never Dismantle the Master's House: Ten Critical Lessons for Black and Other Health Equity Researchers of Color
https://journals.sagepub.com/doi/full/10.1177/10901981211007402

thank you.

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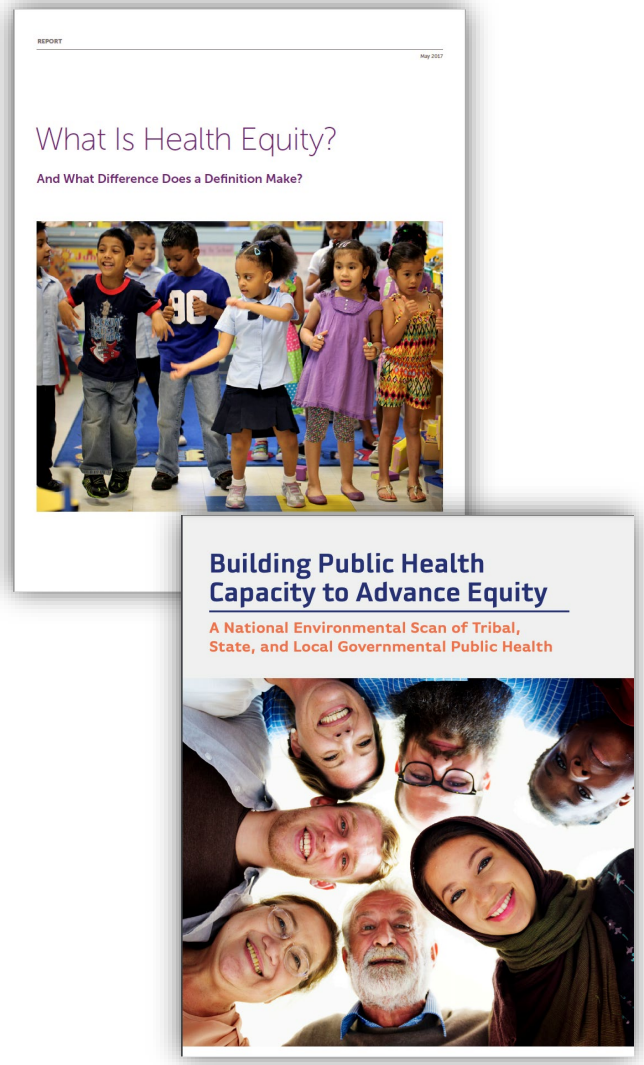

Changemakers: Equity in Action

2021 Health Equity Speaker Series

Office of Health Equity • National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention • Centers for Disease Control and Prevention

Questions?

Please use the Q&A feature in zoom.

Note: After the session ends, please look for a popup evaluation survey. Thank you for sharing feedback.