



Health Communications Consultants
Knowledge, Innovation, & Equity.

Health Equity Frameworks, Strategies and Toolkits

EQUITY IN PUBLIC HEALTH PRACTICE RESOURCES

This resource provides a synopsis of the following tools and resources:

- Fraser Health’s Community Planning Tool: Applying a Health Equity Lens to Program Planning.
- R4P Framework
- The Association of State and Territorial Health Officials (ASTHO)’s: Foundational Practices for Health Equity: A Learning and Action Tool for Public Health Organizations.
- A Report to The California Endowment: Community-Based Participatory Research for Health (CBPR): A Strategy for Building Healthy Communities and Promoting Health through Policy Change
- Centers for Disease Control and Prevention – Division of Community Health. A Practitioner’s Guide for Advancing This guide provides various documents for incorporating health equity into foundational skills of public health. It provides lessons learned and practices from the field. This resource is meant to help local health departments incorporate Health Equity: Community Strategies for Preventing Chronic Disease
- ConNECT Framework
- Petal Framework: Practical framework (PETAL framework) for integrating health equity into US learning health systems
- Georgetown University’s Guide: Health Equity Programs of Action: An Implementation Framework
- WHO’s Innov8 technical handbook
- Massachusetts Health Policy Commission’s Health Equity Framework
- CCGHR Principles for Global Health Research
- U.S. Agency for International Development (USAID). Collaborating, Learning, and Adapting (CLA) Framework and Maturity Tool
- Robert Wood Johnson Foundation’s (RWJF) Culture of Health Action Framework.
- Save the Children Federation and Oxfam America. The Power of Ownership: Transforming US Foreign Assistance (Local Engagement Assessment Framework).
- CDC OMHHE Framework
- Government of New Zealand’s: The Health Equity Assessment Tool (HEAT)
- Canadian coalition for global health research (CCGHR) Partnership assessment toolkit
- The Systems Health Equity Lens (SHEL)
- Public Health Institute (CA4Health). Guiding Principles for Health Equity and Social Justice
- Center for Disease Control and Prevention (CDC). Principles of community engagement

- Robert Wood Johnson Foundation & PolicyLink Report Disaggregating Data on Race and Ethnicity to Advance a Culture of Health
- Public Health England’s Health Equity Assessment Tool (HEAT).
- Colorado Health Foundation: Community Engagement IMPACT Practice Model
- National Institute for Health and Care Excellence (England): Community engagement: improving health and wellbeing and reducing health inequalities
- Group Health Foundation (n.d.) Equity Agreements.
- Child Trends: How to Embed a Racial and Ethnic Equity Perspective in Research: Practical Guidance for the Research Process.
- W.K. Kellogg Foundation. Reflecting on the past to transform the future: lessons learned from grant making in promoting health equity and responding to crisis.
- WHO’s Handbook on health inequality monitoring: with a special focus on low- and middle-income countries.
- Maternal and Child Survival Program and United States Agency for International Development (USAID). Maternal and Child Survival Program Equity Toolkit A Practical Guide to Addressing Equity in Reproductive, Maternal, Newborn, and Child Health Programs
- About the Grand Bargain. Inter-Agency Standing Committee (IASC).
- https://path.azureedge.net/media/documents/Equity_in_Public_Health_Practice_Resources.pdf

FRAMEWORKS

R4P Framework

R4P framework delves into the origins of health inequities among African Americans from the standpoint of structural racism, noting that toxic stress is not randomly distributed.

- Considers the interactions of the Social Determinants of Health with race-related stress in combination with other axes of oppression such as sexism.
- The framework offers concrete strategies that institutions can implement to engage communities in health equity issues.
- R4P consists of 5 components: remove, repair, restructure, remediate and provide.
 - **Remove:** Identify and remove any structures, attitudes, beliefs and practices that may place specific groups/communities at a disadvantage.
 - **Repair:** Recognition of historical exposures including social-environmental factors that may have produced the initial damage that creates conditions that limit a population's access to health care and to obtain or maintain healthy lifestyle practices.
 - **Restructure:** Recognition of institutional policies and practices that may sustain the systemic exclusion of populations owing to sociodemographic characteristics.

- **Remediate:** Instituting remedial factors to counter the negative effects of institutional bias on individuals.
- **Provide:** Highlights the importance of providing services and resources in a way that is culturally and economically feasible.

Hogan V, Rowley DL, White SB, Faustin Y. Dimensionality and R4P: A Health Equity Framework for Research Planning and Evaluation in African American Populations. *Maternal Child Health J.* 2018 Feb;22(2):147- 153. doi: 10.1007/s10995-017-2411-z. PMID: 29392541. [Dimensionality and R4P: A Health Equity Framework for Research Planning and Evaluation in African American Populations - PubMed \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/27509892/)

ConNECT Framework

ConNECT addresses health equity in the areas of behavioral medicine and establishes methodological and theoretical guidelines to inform translation research and practice and policy to achieve health equity.

- Framework emphasizes integrating context (e.g., social determinants of health), fostering a norm of inclusion where medically vulnerable and marginalized population groups as included in research.
- Ensuring that the diffusion of innovation is equally accessible to all groups.
- Harnessing communication technology so that individuals' health and/or health care is not negatively affected by the digital divide.
- Prioritizing training so that health equity expertise is gained through mentoring and education.

Alcaraz, K. I., Sly, J., Ashing, K., Fleisher, L., GilRivas, V., Ford, S., Yi, J. C., Lu, Q., Meade, C. D., Menon, U., & Gwede, C. K. (2017). The ConNECT Framework: a model for advancing behavioral medicine science and practice to foster health equity. *Journal of behavioral medicine*, 40(1), 23–38. <https://doi.org/10.1007/s10865-016-9780-4>

<https://pubmed.ncbi.nlm.nih.gov/27509892/>

CDC OMHHE Framework

Created at CDC, operational principles for health equity that could be actionable through departments of public health. <https://www.cdc.gov/healthequity/index.html>

- Built on Healthy People goals and three functions of public health:
 - Assurance
 - Assessment
 - Policy development
- Principles are organized into 4 domains:
 - Data and measurement
 - Program implementation
 - Policy implementation and HiAP approaches

- Development and maintenance of a public health infrastructure with supportive leadership, staff with appropriate skills and data systems that include health equity variables and the establishment of multisectoral and community partnerships
- Adaptable framework - 1 or more domains to be implemented depending on health department size and capabilities.

HEF (Health Equity Framework)

HEF centers on health outcomes at the population level rather than the individual level.

- Developed by ETR <https://www.etr.org/about-us/health-equity-framework/>
- Health and education outcomes are influenced by complex interactions between people and their environment.
- Consists of 4 interconnected factors that influence and determine health equity and health inequities.
 - **Systems of Power:** refer to policies, processes and practices that determine the distribution and access to resources and opportunities needed to be healthy.
 - **Relationships and Networks:** include the many connections and support structures made up of family (biological, adopted, chosen), friends, romantic partners, and people within cultural communities, neighborhoods, schools and workplaces. These connections may simultaneously serve as protective influences from health-harming behaviors as well as sources that contribute to stigma, discrimination, or pressure that lead to poorer health outcomes. Relationships and networks may promote health equity through support systems that mitigate the social disadvantage produced by systems of power. Social networks may also intensify poorer health outcomes by enabling health-harming behaviors, either by the negative effects of these relationships (e.g., intimate partner violence, identity stigma) or by the explicit or implicit social pressure to engage in risk behavior.
 - **Individual Factors:** a person's response to social, economic, and environmental conditions through their attitudes, skills, and behaviors. A person's attitudes, skills, and behaviors are shaped by their personal experiences, including their relationships with others and access to opportunities, often driven by systems of power. While a person's demographic characteristics (e.g., gender, race, socioeconomic status) and other aspects of their identity are closely related to their experiences and opportunities, the HEF underscores individual factors (i.e., skills and behaviors) that contribute directly to health outcomes.
 - **Physiological Pathways:** refer to a person's biological, physical, cognitive, and psychological abilities. The HEF recognizes that these factors contribute substantially to health outcomes but cannot be easily, or in some cases

ethically, modified by intervention. This sphere of influence also concerns how the timing and intensity of other determinants might change developmental, biological, and cognitive trajectories that lead to poorer health outcomes.

STRATEGIES

HEZ Initiative

Health Equity Zones (HEZ) initiative is State run initiative that encourages and equips neighbors and community partners to collaborate to create healthy places for people to live, learn, work and play.

- Bridges on RI's Centers for Health Equity and Wellness (CHEW) program from 2012-2015.
- Geographically based Health Equity Zones form community collaboratives, conduct community needs assessments and develop action plans.
- Innovative, community-led approaches to prevent chronic diseases, improve birth outcomes, and improve the socioeconomic and environmental conditions of neighborhoods across the Rhode Island.
- Health Equity Zones: A Toolkit for Building Healthy and Resilient Communities- Rhode Island Department of Health.
<https://health.ri.gov/publications/toolkits/health-equity-zones.pdf>

ACH

Accountable Health Communities Model (ACH) is developed by the Centers for Medicare and Medicaid services <https://innovation.cms.gov/innovation-models/ahcm>.

- Addresses the gap between clinical care and community services.
- This model promotes clinical-community collaboration through:
 - Screening of community-dwelling beneficiaries to identify certain unmet health-related social needs;
 - Referral of community-dwelling beneficiaries to increase awareness of community services;
 - Provision of navigation services to assist high-risk community-dwelling beneficiaries with accessing community services; and
 - Encouragement of alignment between clinical and community services to ensure that community services are available and responsive to the needs of community-dwelling beneficiaries.

- GW Public Health adopted this model and has a wealth of resources on their site <https://accountablehealth.gwu.edu/>
- [https://accountablehealth.gwu.edu/sites/accountablehealth.gwu.edu/files/Funders%20Forum%20ACH%20Health%20Equity%20Impact%20July%202020%20\(1\)_0.pdf](https://accountablehealth.gwu.edu/sites/accountablehealth.gwu.edu/files/Funders%20Forum%20ACH%20Health%20Equity%20Impact%20July%202020%20(1)_0.pdf)

TOOLKITS

- NACCHO Toolbox: Health Equity and Social Justice <https://toolbox.naccho.org/pages/index.html#>
 - Advancing Public Narrative for Health Equity and Social Justice May 30, 2019
 - Racial Equity Impact Assessment Toolkit August 12, 2015
 - Developing an Equity Impact Statement: A Tool for Policymaking August 12, 2015
 - Roots of Health Inequity February 29, 2012
 - Health Disparities Calculator December 2, 2011
- Equity in Public Health Practice Resources https://path.azureedge.net/media/documents/Equity_in_Public_Health_Practice_Resources.pdf
- What Can I Do to Advance Health Equity? https://www.health.state.mn.us/communities/practice/resources/publications/docs/1609_healthequitylens-conf.pdf Minnesota Dept of Health
- Local Health Department Organizational Self-Assessment for Addressing Health Inequities-Toolkit and Guide to Implementation <https://www.barhii.org/organizational-self-assessment-tool> Bay Area Regional Health Inequities Initiative
- Health Equity Guide: A Human Impact Partners Project <https://healthequityguide.org/>
- Louisiana Department of Health Equity Framework https://ldh.la.gov/assets/cphe/Equity_Framework.pdf
- Health Equity Resource Toolkit for State Practitioners Addressing Obesity Disparities <https://www.cdc.gov/nccdphp/dnpao/health-equity/state-health-equity-toolkit/pdf/toolkit.pdf>
- Promoting Health Equity: A Resource to Help Communities Address Social Determinants of Health <https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/tools/pdf/SDOH-workbook.pdf>

- A Practitioner’s Guide for Advancing Health Equity: Community Strategies for Preventing Chronic Disease <https://www.cdc.gov/NCCDPHP/dch/pdf/health-equity-guide/Practitioners-Guide-section1.pdf>
<https://www.cdc.gov/nccdphp/dch/pdf/healthequityguide.pdf>
- Moving toward Institutional Equity: A Tool to Address Racial Equity for Public Health Practitioners [Health Equity_5_17_F.indd \(chronicdisease.org\)](#)

REFERENCES

[Addressing Health Equity in Public Health Practice: Frameworks, Promising Strategies, and Measurement Considerations | Annual Review of Public Health \(annualreviews.org\)](#)

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