



# ACD, CDC

## Advisory Committee to the Director, Centers for Disease Control and Prevention

March 29, 2023

The Honorable Xavier Becerra  
Secretary  
Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, D.C. 20201

Dear Mister Secretary:

The Advisory Committee to the Director, Centers for Disease Control and Prevention (ACD, CDC) met publicly on February 7, 2023. During this meeting, the Co-chairs of the Committee's Health Equity Workgroup (HEW) presented its findings in a report titled, *Health Equity Workgroup Report: Task Area 3*.

The Health Equity Workgroup (HEW) provides input to the ACD, CDC on agency-wide activities related to the scope and implementation of CDC's CORE strategy (an acronym for C-cultivate comprehensive health equity science, O-optimize interventions, R-reinforce and expand robust partnerships, and E-enhance capacity and workforce diversity and inclusion). The HEW is composed of both ACD members and those selected through an open application process. The members are subject matter experts in public health science and practice and policy development, analysis, and implementation, as well as health equity. As such, the HEW assists the ACD, CDC in its development of advice and recommendations to CDC regarding the effective execution of its health equity strategy, ultimately influencing the agency's internal operations as well as its work with state, local, tribal, and territorial public health agencies and other constituents and partners. The ACD's recommendations are described below for your consideration.

### Background

In February 2021, CDC Director Dr. Rochelle P. Walensky, directed the creation of CDC's first ever agency-wide health equity science and intervention strategy. Known as CORE, this bold and innovative approach is framed around four (4) pillars – science, interventions (including programs, policies, systems change, and environmental justice), partnerships, and internal organizational change efforts. The inaugural health equity strategy is catalyzing commitments from all CDC centers, institute, and offices resulting in over 150 health equity planned action steps. When fully implemented, these action steps together with the other elements of the CDC's CORE Commitment to Health Equity will transform how the agency practices public health and will accelerate the progress towards the achievement of health equity.

Advisory Committee to the Director, Centers for Disease Control and Prevention

The work of the HEW may result in input to the ACD, CDC with the intention of enhancing the framing and implementation of CDC's CORE Health Equity Strategy. The HEW's research efforts will assist the ACD, CDC in identifying innovative and promising health equity practices that align with the principal pillars of CORE; as well as opportunities to embed anti-racist policies and practices into the design and delivery of public health programs both within CDC and in how CDC influences public health research and practice externally.

To address the task for this report, the HEW requested and received briefings from CDC officials and external experts, and reviewed documents and reports. Through this thorough review and in-depth discussions. The HEW proposes two broad, but related action steps, each with specific suggested initial steps. The first is related to measurement and the second to intervention.

### **Proposed Action Step 1**

CDC should immediately initiate a coordinated, agency-wide approach to identify and implement measures of underlying drivers of equity and health equity in ways that make them accessible and useful to communities and public health programs.

As part of this action step:

1. CDC should lead a process to synthesize the current state-of-the-art of measurement of upstream drivers of health equity.
2. CDC should initiate a process with key partners and stakeholders to assess the feasibility of, and opportunities for, developing and using field-tested and consistent methods and measures across programs and jurisdictions.
3. CDC should assure the development of indicators that includes asset and solution-based measures of individual and community equity and health equity.
4. CDC should focus special attention on identifying and developing measures that can be timely, locally available, and as granular as possible.
5. CDC programs should promote, and enable through program funding, the incorporation of measures of health equity into the monitoring and evaluation of all public health programs.

### **Proposed Action Step 2**

CDC should immediately initiate a coordinated, agency-wide approach to develop and integrate strategies to influence the effects of drivers of health equity across the entire range of its public health programming.

As part of this action step:

1. CDC should align and integrate the internal organization and leadership of its Health Equity and Social Determinant of Health activities to assure coherence and synergy of approaches.

2. CDC should promote and enable across all programs funding the routine assessment and mapping of the effects of the drivers of health equity on the health and well-being of affected populations.
3. CDC should promote and enable across all program funding, identifying, and incorporating strategies to improve project outcomes by modifying the most important and influenceable dynamics identified in the assessments above (in 2).
4. CDC should assure that this suite of promoted and funded strategies routinely includes asset-based approaches directed at individual, as well as system, policy, and environmental drivers of health equity, including civic engagement strategies.
5. CDC should assure that measurement of these efforts and their effects are routinely incorporated into project and program evaluation.

Sincerely,

*David Fleming*

Dr. David Fleming, Chair

cc:

Dr. Rochelle Walensky  
Director, CDC

Daniel Dawes, JD  
Monica Valdes Lupi, JD, MPH  
Co-chairpersons  
Health Equity Workgroup/Advisory Committee to the Director

Enclosure:  
Health Equity Workgroup Report

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