IDENTIFYING AND UNDERSTANDING HEALTH INEQUITIES

WITHOUT A CLEAR UNDERSTANDING OF EXISTING HEALTH INEQUITIES, WELL-INTENTIONED STRATEGIES MAY HAVE NO EFFECT ON OR COULD EVEN WIDEN HEALTH INEQUITIES. IT IS CRITICAL TO HAVE A CLEAR UNDERSTANDING OF WHAT INEQUITIES EXIST, AND THE ROOT CAUSES CONTRIBUTING TO THEM. CLEARLY IDENTIFY AND UNDERSTAND HEALTH INEQUITIES TO ESTABLISH BASELINES AND MONITOR TRENDS OVER TIME, INFORM PARTNERS ABOUT WHERE TO FOCUS RESOURCES AND INTERVENTIONS, AND ENSURE STRATEGIES ACCOUNT FOR THE NEEDS OF POPULATIONS EXPERIENCING HEALTH INEQUITIES. CONSIDER THESE IDEAS TO ENHANCE YOUR ORGANIZATION'S EFFORTS TO IDENTIFY AND UNDERSTAND HEALTH INEQUITIES.

Do Not Rely on Assumptions About What Health Inequities Exist in Your Community

The health inequities in your community may differ from national and state data or other surrounding communities. Utilize the best available data to understand what is happening in your community. As feasible, follow a thorough process to identify existing health inequities, and assess community assets, needs, and challenges.

Gain a Comprehensive Understanding of the Identified Health Inequities

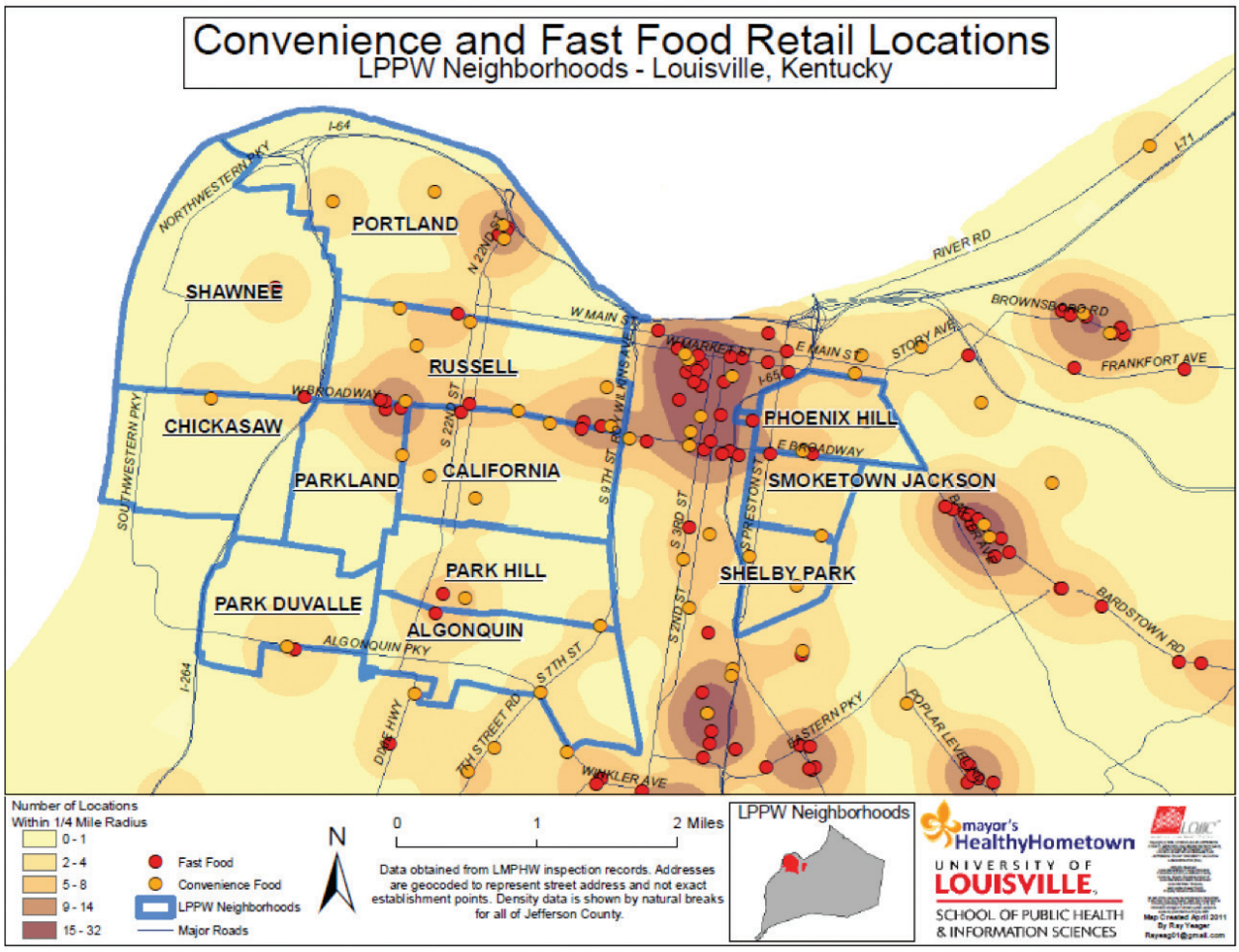
Examine multiple aspects of health in your community to get a clearer picture of health inequities. For example, identify health risk behaviors and disease outcomes according to characteristics such as income, disability status, gender identity, geography, race/ethnicity, and sexual orientation. Additionally, gain insight into the social (e.g., discrimination), economic (e.g., poverty), and physical (e.g., availability of healthy food retail) environments to develop a deeper understanding of health inequities. A community's history and context (e.g., long-standing policies, cultural norms, values) can also be helpful in understanding inequities and identifying effective strategies.

Use Appropriate Tools to Identify Health Inequities

National databases, health departments, and institutions, such as universities and hospitals, are prime sources for finding local data on health outcomes. While these data sets are a good starting place, you may not want to rely solely on this information for understanding health inequities. Partners such as local public works, transportation, and police departments may have access to other data sources (e.g., water quality, street conditions, crime statistics) which may reveal inequities related to social, economic, and physical environments. Where possible, use data sources that allow you to stratify indicators by factors such as age, disability status, race, and sexual orientation. See Appendix C for a list of online resources for identifying and understanding health inequities.

Engage Community Members and Partners in Data Collection and Interpretation

Provide training to community members to enable them to participate in data collection activities (e.g., community asset mapping, PhotoVoice, digital storytelling, walking audits). Once data are collected, community members and partners can also be included in interpreting findings, refining priorities, and developing solutions. The perspectives of community members can bring static data to life by revealing the lived experiences behind the data.



Map of Louisville, KY used as a tool to identify inequities.

Using Multiple Factors to Pinpoint Health Inequities—Louisville, KY

Louisville Metro Public Health and Wellness

The Louisville Metro Public Health and Wellness (LMPHW) Department is committed to reducing obesity-related health inequities. To identify areas with higher rates of obesity, the department analyzed data related to the social determinants of health including income, violence, access to transportation, and access to healthy food (including proximity to fast food restaurants). It also used GIS mapping to identify and locate relevant indicators by ZIP code.

These strategies revealed that obesity rates and environments that did not support healthy eating and physical activity in Louisville were disproportionately higher in 12 low-income neighborhoods—most of which were also predominantly African American. These neighborhoods are characterized as food deserts, where affordable, healthy food is difficult to obtain. These neighborhoods also have higher rates of violence and poverty and low levels of education. Having a clear emphasis on areas experiencing health inequities helped the department to design its initiatives and focus their efforts accordingly.

QUESTIONS FOR REFLECTION: Health Inequities

1. Where are we now?

- [ ] What are our organization's current practices for identifying and understanding health inequities?
- [ ] Can we clearly articulate health inequities related to the health issues we are trying to prevent and/or address? If so, list those health inequities.

2. What types of information can we use to identify health inequities in our community?

- [ ] What process can we set up to get a full understanding of health inequities in our community?
- [ ] What type of information do we need to ensure we have a full understanding of health inequities in our community?
- [ ] Have we looked beyond basic health risk behaviors and standard outcome data to examine social, economic, and physical indicators that may contribute to or maintain health inequities?
- [ ] Have we examined community context and historical factors that may help our understanding of existing health inequities?

3. What tools and resources can we use to identify and understand health inequities?

- [ ] What combination of data sources do we need to better understand experiences of populations affected by health inequities?
- [ ] What sources or partners may already have the data we need for assessing community environments or health behaviors?
- [ ] Where can we go to understand the historical context of health inequities in the community?

4. How can we engage community members in gathering and analyzing data?

- [ ] How do we currently engage community members in our data collection and analysis process?
- [ ] What process can we put in place to routinely engage populations affected by health inequities in collecting and analyzing data?

5. What are our next steps?

- [ ] What can we do differently to improve or enhance our ability to identify and understand health inequities?
- [ ] What is our plan of action to implement those changes?