

Creating space:

Enabling organizational capacity for health equity in environmental public health



CPHA

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Conflict of Interest Disclosure

No conflict of interests to declare.



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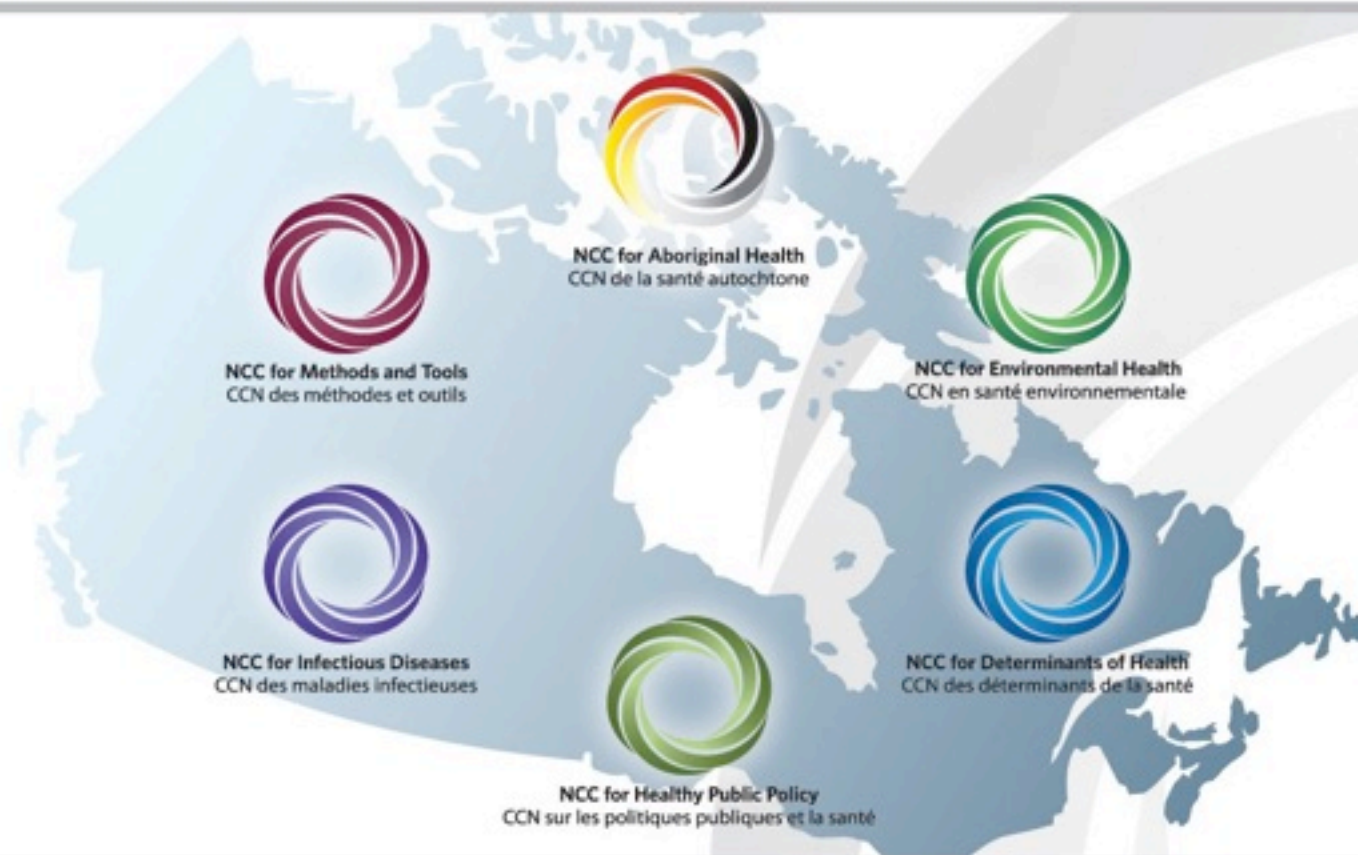
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STRENGTHENING PUBLIC HEALTH ACROSS CANADA | APPUYER LA SANTÉ PUBLIQUE AU CANADA



National Collaborating Centre for Environmental Health

Our focus

Environmental health
practice, programs,
& policy in Canada

Our audience

- Environmental health practitioners and policymakers

Our work

- Synthesize, translate, and facilitate exchange of knowledge
- Identify gaps in research and practice knowledge
- Build capacity through networks



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National Collaborating Centre for Determinants of Health

Our focus: Social conditions that influence health & narrowing the gap between the least and most healthy

Our audience: Canadian public health organizations & practitioners.

Our work: Explain and share what's known to help public health positively influence health for *EVERYone* through their work.



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Agenda

- Intersection of EPH & health equity
- Key concepts
 - Structural & intermediary determinants
 - What do we mean by “environment”?
 - Charitable vs. critical approach
- Organizational capacity, barriers & facilitators to health equity work
- Practical implications of integrating health equity into EPH work
- Tools for EPH practitioners



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Workshop objectives

1. Recognize facilitators and challenges related to integrating the social determinants of health and health equity into EPH practice, at the individual practitioner and organizational levels.
2. Identify and discuss how to apply tools that support the application of an equity lens in EPH practice.
3. Explore practical actions to incorporate a health equity lens within the operational realities of an organization.



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Who is in the room?



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“ The window is determined by the frames we use to look through. We need a new frame.”



- Ryan Meili @ St FX - March 2, 2016

“Life changes the lens you look through.”



- Sean O'Toole, CIPHI - NS



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Structural determinants of health

- Income
- Education
- Occupation
- Social class
- Gender
- Race/ethnicity

Intermediary determinants of health

- Material circumstances
housing, neighborhood quality, consumption potential, physical work environment
- Psychosocial circumstances
stressors, living circumstances and relationships, social support & coping styles
- Behavioural and/or biological factors
nutrition, physical activity, tobacco & alcohol consumption, genetic factors

World Health Organization (WHO) conceptual framework.
Solar and Irwin, 2010.



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Theory: Minimize difference

Charitable mentality

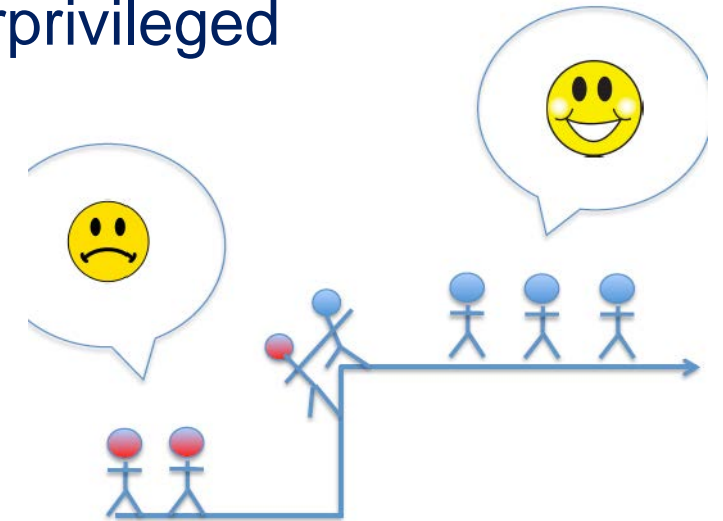
- “Let’s lend a helping hand”
- “I encourage you”

A free pass to the rest of us?

- “You become like me”

“Deficit fix” intervention

- “Fixed” on “fixing” the poor/
destitute/underprivileged



A deficit model of inequity

Credit: Jeff Masuda, Queen’s University, 2015



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Theory: **Seek justice**

Critical mentality

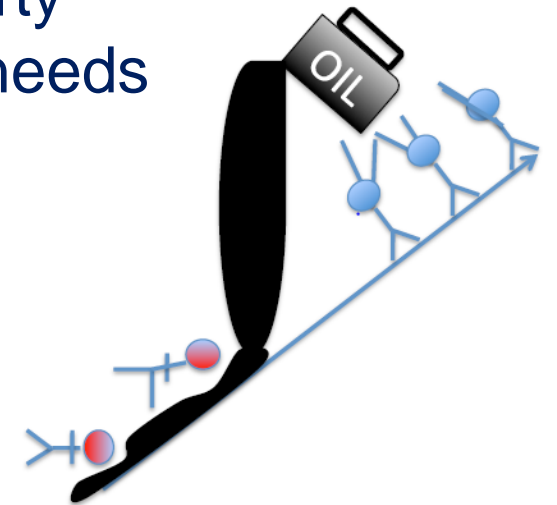
– “Let’s realize we are all complicit in injustice”

No one escapes scrutiny

– “We all need to change”

“Seeking justice” intervention

– Where there is poverty there is privilege that needs unfixing”



A relational model of inequity

Credit: Jeff Masuda, Queen’s University, 2015



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Environmental public health professionals

- Environmental health officers (EHOs) or public health inspectors (PHIs)
- Certified with Canadian Institute of Public Health Inspectors (CIPHI) (outside Quebec)
- Training: environmental health, hygiene, microbiology, food science, research methods
- Additional skills: epidemiology, toxicology, health promotion, healthy communities



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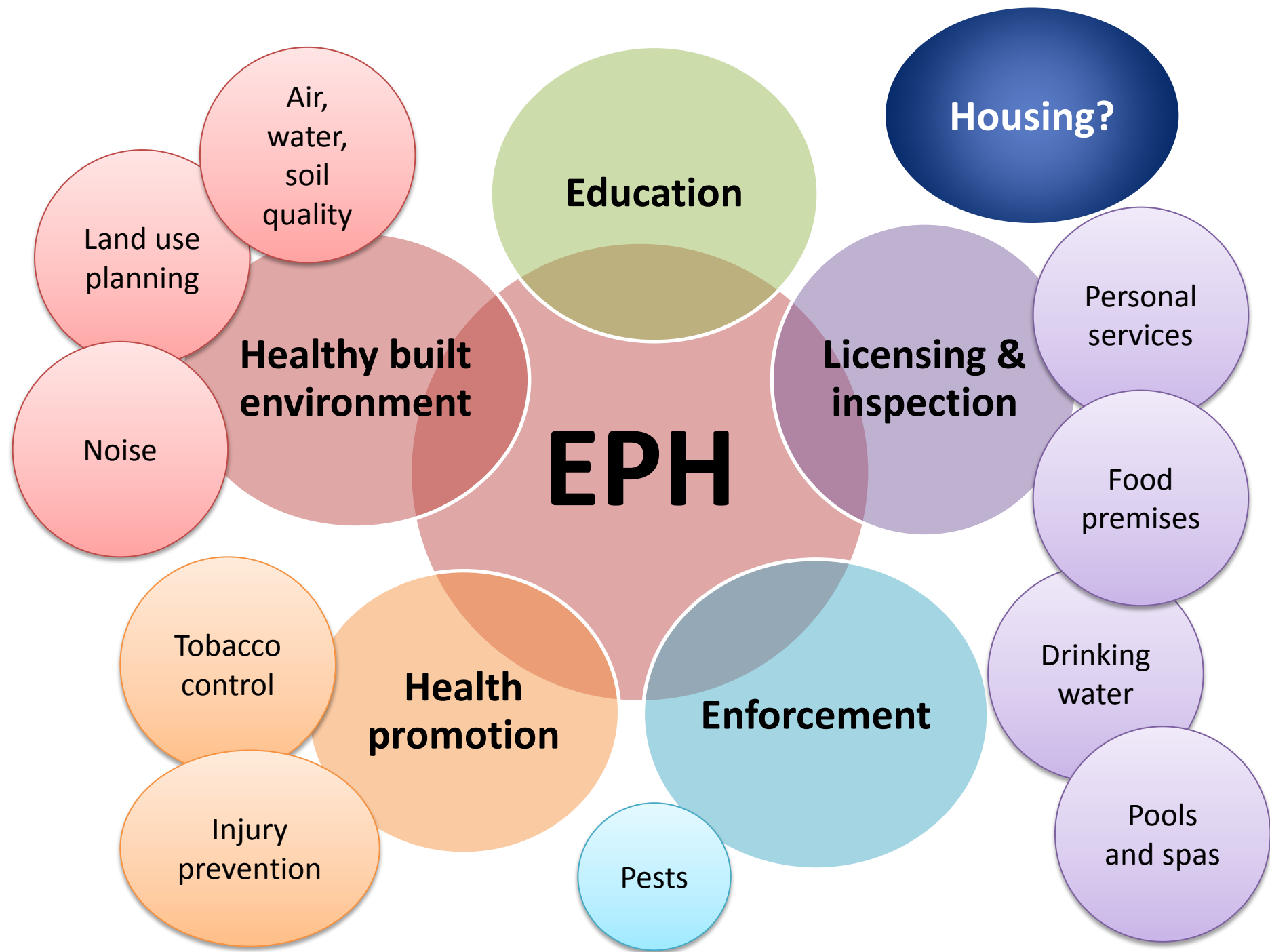


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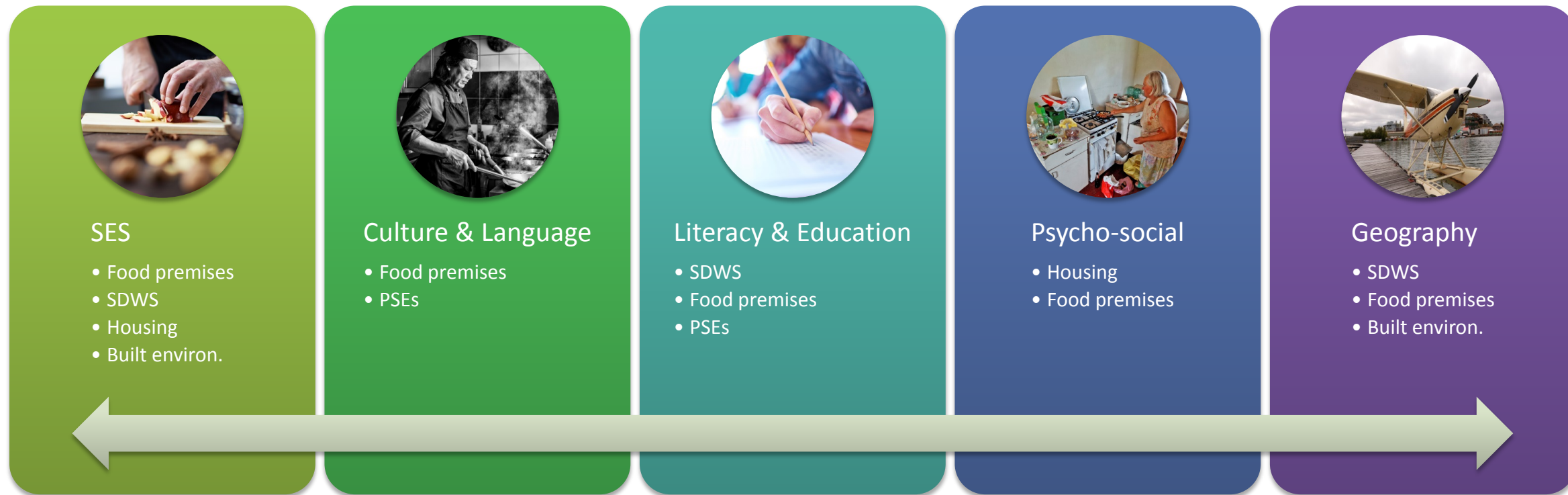


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Equity and EPH practice



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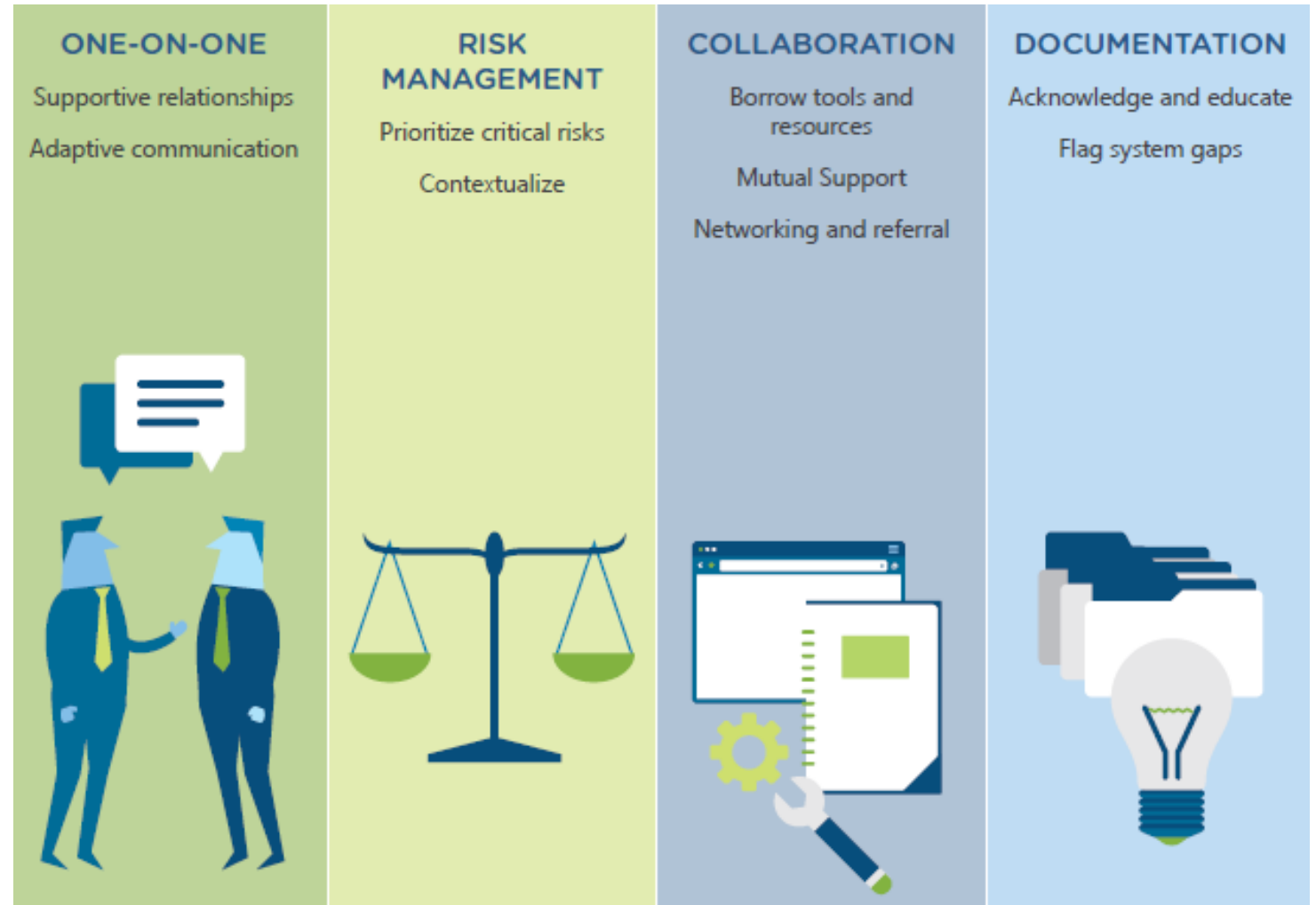
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Emerging practices



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Moving toward equity-oriented EH practice

	PERSON-CENTRED APPROACH TO EPH	SYSTEMS APPROACH TO EPH
Practice model	A. Traditional Focus on regulation and health protection, using education as a tool.	C. Emergent Focus on health promotion and creating supportive environments.
Response to health inequities	B. Individual Respond to socioeconomic barriers when they arise. Incorporate equity into practice by providing tools for practitioners to help them work with individuals who face socio-economic barriers.	D. Population Remove barriers to health in society. Integrate equity into the EPH mandate with policy and collaborative mechanisms across all areas of practice.



Capacity to advance health equity in EHP

Individuals



- Time
- Knowledge
- Skills
- Discretionary authority
- Tools
- Role clarity



Organizations

- Mandate
- Executive champions
- Manager buy-in
- Org. culture & strategic direction
- Intra/Inter agency collaboration & communication
- Reporting structure & job descriptions
- Appropriate legislation



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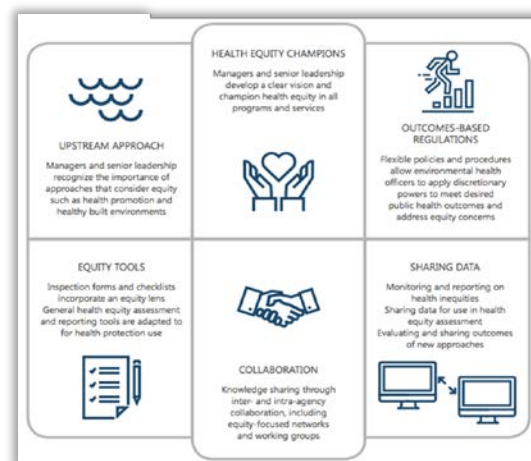
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Tools to advance health equity in EPH



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Framework for EPH action



10 considerations for action

- Enhancing knowledge
- Apply concepts to practice
- Reflective practice
- Identify internal and external collaborators
- Approaches at multiple organizational levels



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Framework User Guide



3 main audiences:

1. Frontline PHI/EHO
2. Managers & directors
3. Educational & professional development organizations



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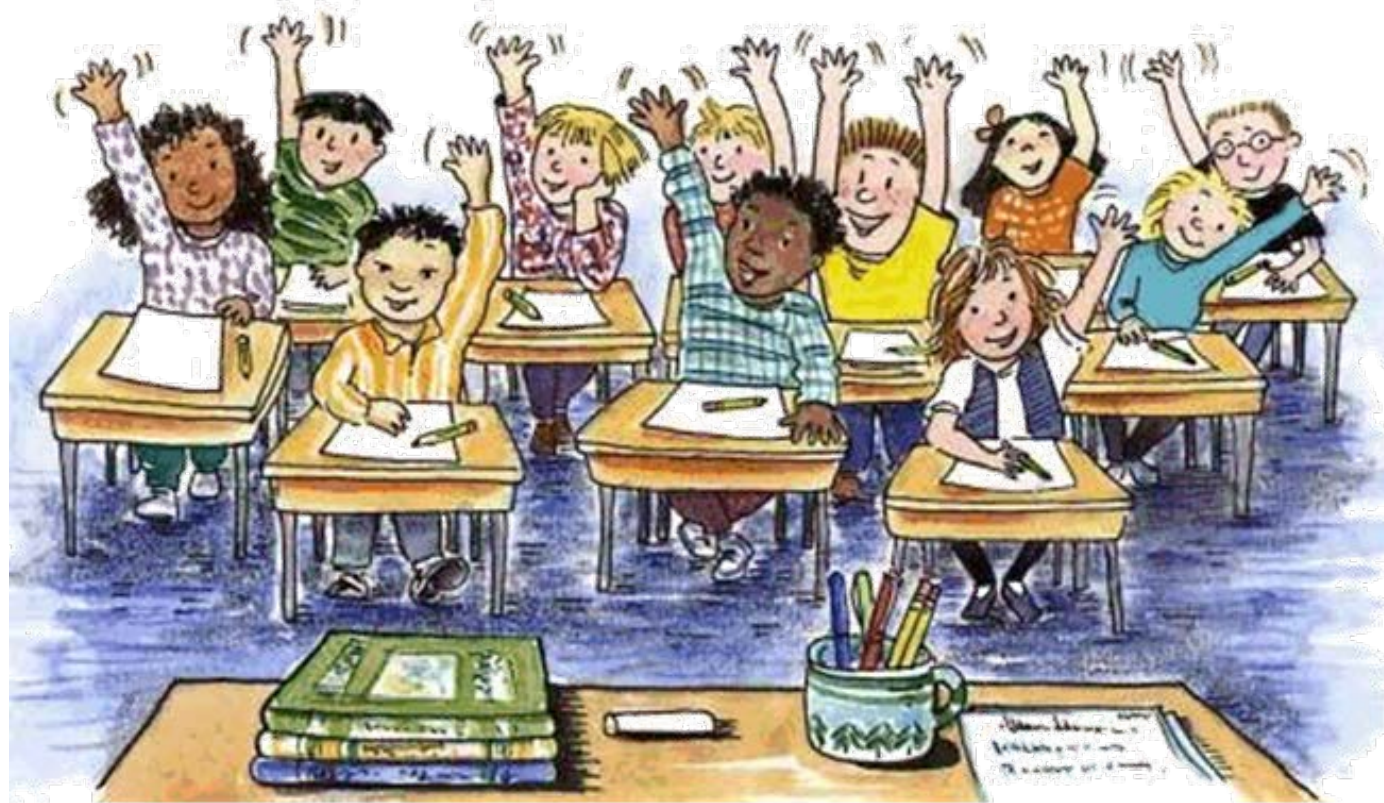


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Environmental public health & health equity

Scenarios & promising practices



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World café instructions

- Discuss the question on your table
- Make notes & pictures on the table
- Think of ideas, be creative
- Be open to new possibilities –
imagine there are no practical challenges
- Change tables at the bell –
you will discuss 3 of 5 questions



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Table hosts

- Record ideas throughout the conversation. Summarize in the plenary.
- Remind people to note or share key ideas, insights, connections, and new questions to contribute to the final report.
- At the beginning of each round of conversation, briefly share key ideas from the prior conversation so others can link and build using ideas from their previous conversations.



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World Café principles

- **FOCUS** on what matters
- **CONTRIBUTE** your thinking
- **SPEAK** your mind
- **LISTEN** to understand
- **LINK AND CONNECT** ideas
- **LISTEN** for insights and patterns
- **PLAY, DOODLE, DRAW**
- **NO LIMITS!**



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Factors in organizational capacity

Prioritization list – same one as in pre-session



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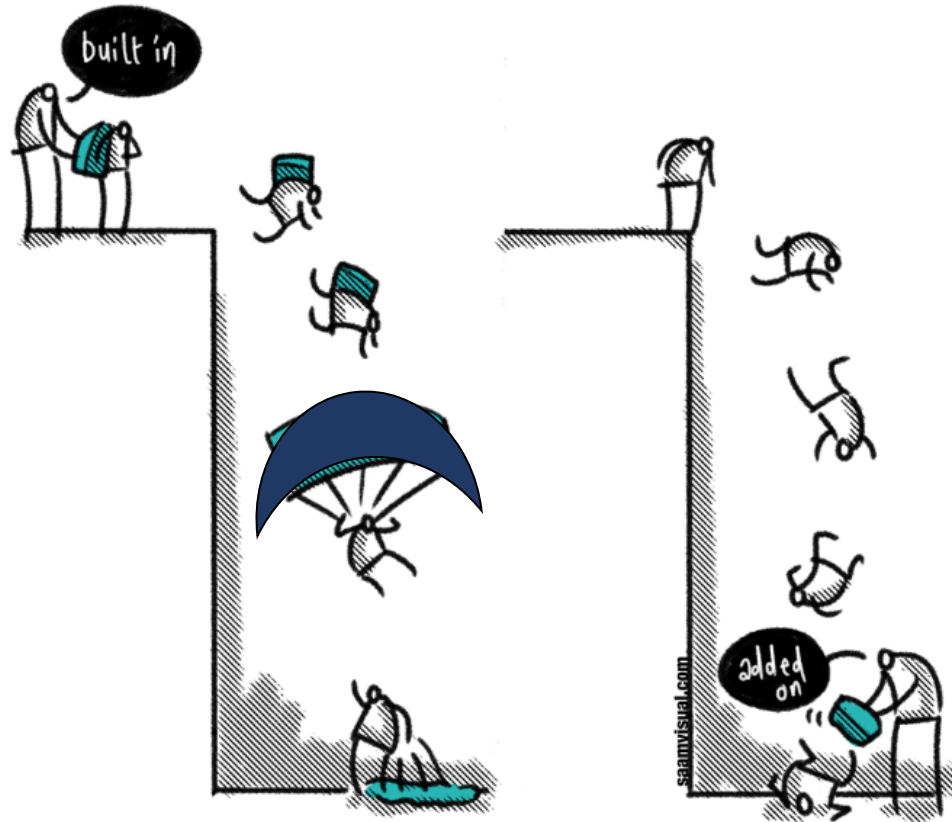
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Final thought.....

**Think “build-it-in”....
not “add-it-on”**



Thank you!

And thank you for
completing the
evaluation survey 😊



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