10 Promising Practices
to reduce social inequities in health:
What does the evidence tell us?

Promising Practice #6: Competencies/Organizational Standards

Competencies and organizational standards guide our daily practice. The Public Health Agency of Canada identifies 36 core competencies for public health encompassing essential knowledge, attitudes, and skills. Most importantly, these competencies were developed for practice within the context of the values of public health and include, for example, equity, social justice, community participation, and determinants of health. The core competencies for public health offer a solid foundation for local public health staff recruitment and skill development.

As building blocks for effective public health practice, organizational standards provide benchmarks for public health units. They help promote organizational excellence and establish the foundation for effective and efficient program and service delivery. Organizational standards that are rooted in health equity enable public health organizations to build a workforce and allocate resources to prioritize work to reduce social inequities in health.

The “10 Promising Practices” to Reduce Social Inequities in Health at the Local Public Health Level

1. Targeting With Universalism
2. Purposeful Reporting
3. Social Marketing
4. Health Equity Target Setting
5. Equity-Focused Health Impact Assessment
6. Competencies/Organizational Standards
7. Contribution to Evidence Base
8. Early Childhood Development
9. Community Engagement
10. Intersectoral Action

As part of a Canadian Health Services Research Foundation Fellowship (Executive Training in Research Application – EXTRA), the Sudbury & District Health Unit conducted a review and analysis of the literature for practices to reduce social inequities in health. These fact sheets present the 10 practices, relevant at the local public health level, that were found to be “promising” in their potential to “level-up” and reduce health inequities.

The complete EXTRA Fellowship reports are available at www.sdhu.com.
Practice #6 example: Ontario Public Health Standards, 2008

The efforts of Ontario’s public health units are guided by the province’s Ontario Public Health Standards, 2008 (OPHS). These standards provide a framework for public health activities and outline specific goals and requirements for local boards of health. The OPHS include overarching principles such as “Public health interventions shall acknowledge and aim to reduce existing health inequities. Furthermore, boards of health shall not only examine the accessibility of their programs and services to address barriers (e.g. physical, social, geographic, cultural, and economic), but also assess, plan, deliver, manage, and evaluate programs to reduce inequities in health while at the same time maximizing the health gain for the whole.” (pg. 13) They also specifically direct public health units in areas of programming and services for priority populations, population health assessment, surveillance, research, and knowledge exchange.

Public health standards that acknowledge and direct public health units to address the social determinants of health guide decisions made by boards of health as they consider resource allocation and staff capacity to reduce health inequities.

What helps me promote competencies and organizational standards?

- existing core competencies for public health practitioners
- a multidisciplinary public health workforce with diverse skills and backgrounds
- organizational structures that support the development of strategic priorities and ongoing staff development

What makes the development of competencies and organizational standards challenging?

- Further development of staff competencies may require changes in public health recruitment, training, professional development, job orientation, and job descriptions.
- Assessment of health inequities implicitly requires a value judgement (which health differences are unjust?) and alignment of public health practitioner actions with social justice values and beliefs.

Useful Links

Core Competencies for Public Health in Canada, Public Health Agency of Canada. 2008
Ontario Public Health Standards, 2008
Overview of the Health Equity Mapping Project: A report on process, results, and recommendations for practice, Sudbury & District Health Unit. 2009
Sudbury & District Health Unit Strategic Plan: 2010-2012

To learn more about health equity and ways we can all help reduce social inequities in health:

Contact:
Information Resource Centre
Resources, Research, Evaluation and Development Division
Sudbury & District Health Unit
705.522.9200, ext. 350
Visit: www.sdhu.com
References
10 Promising Practices

Promising Practice #1: Targeting With Universalism

Promising Practice #2: Purposeful Reporting

Promising Practice #3: Social Marketing

Promising Practice #4: Health Equity Target Setting
3. Saskatoon Regional Intersectoral Committee. Follow-up to policy or initiative options in the Health Disparity in Saskatoon Report: Recommendations for action in our community – working document. Saskatoon Regional Intersectoral Committee; 2009.

Promising Practice #5: Equity-Focused Health Impact Assessment
Promising Practice #6: Competencies/Organizational Standards


Promising Practice #7: Contribution to the Evidence Base

• no references

Promising Practice #8: Early Childhood Development


Promising Practice #9: Community Engagement


Promising Practice #10: Intersectoral Action

• no references

For an accessible version of this document, please visit: https://www.sdhu.com/health-topics-programs/health-equity/10-promising-practices-health-equity

To learn more about health equity and ways we can all help reduce social inequities in health:

Contact:

Information Resource Centre
Resources, Research, Evaluation and Development Division
Sudbury & District Health Unit
1300 Paris Street
Sudbury, ON P3E 3A3
705.522.9200, ext. 350
resourcecentre@sdhu.com

Visit: www.sdhu.com