



# 10 Promising Practices

to reduce social inequities in health:

*What does the evidence tell us?*

## Promising Practice #7: Contribution to the Evidence Base

When public health staff are asked about their capacity to address social inequities in health, a frequent issue that emerges is a lack of “best practices” to guide their interventions. The EXTRA Research Fellowship was carried out, in part, to help address these staff needs. However, it confirmed the existence of a gap in the evidence base with respect to effective local public health practice to reduce social inequities in health.

The evidence that does exist is often produced by practitioners working in a service delivery context in which publishing is not a priority. The evidence produced is often preliminary, small scale and specific to a particular context. Therefore, practice-based evidence might not be accepted for publication in traditional academic outlets. Grey literature (reports and evaluations) form part of the knowledge base for local public health interventions, but even these do not represent a complete picture of existing practice knowledge. Grey literature is often difficult to access.

It is important that practitioners consistently undertake evaluations of interventions aimed at reducing health inequities. Such evaluations should explicitly capture the impact of activities on different populations. In addition, the burgeoning knowledge base on addressing social inequities through local public health action can be strengthened by intentional dissemination of knowledge. Knowledge exchange can occur through conventional mechanisms such as journal publications and reports, or through communities of practice.

### 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](http://www.sdhu.com).



## Practice #7 example: The National Collaborating Centre for Determinants of Health

The [\*National Collaborating Centre for Determinants of Health\*](#) (NCCDH) focuses on the social and economic factors that influence the health of Canadians. The Centre translates and shares information and evidence about the social determinants of health with front-line public health practitioners, policy makers and researchers—the individuals who need this information to make evidence-informed decisions for practice, planning, policy and research.

The objectives of the NCCDH are to: 1) synthesize, translate, and exchange knowledge for practitioners and policy-makers; 2) identify key gaps in research and practice knowledge; 3) build capacity through networks of practitioners, policy-makers, and researchers in determinants of health; and 4) increase partnerships and develop intersectoral collaborations to address specific determinants of health or combinations of those determinants.

### What helps me *contribute to the evidence base*?

- skills and competencies in program evaluation and logic model development
- partnerships with academic institutions and research agencies

### What makes *contributing to the evidence base* challenging?

- limited public health staff time and resources to commit to publication of research and evaluation findings
- perceived lesser value of qualitative research findings
- discomfort with the inclusion of social and economic identifiers within research and survey tools

### Useful Links

Databases of health equity initiatives:

[\*Inequalities in Health System Performance and Social Determinants in Europe – Tools for Assessment and Information Sharing\*](#). World Health Organization

[\*European Portal for Action on Health Inequalities\*](#)

[\*The Prevention Institute\*](#)

[\*Health Equity & Social Justice Toolkit\*](#). National Association of County & City Health Officials. 2012

[\*Centers for Disease Control and Prevention: Community Health and Health Equity Program\*](#)

**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

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Visit: [www.sdhu.com](http://www.sdhu.com)

Watch our video: *Let's Start a Conversation About Health . . . and Not Talk About Health Care at All* at <http://www.sdhu.com/videos/HealthEquity/index.html>



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# References

## 10 Promising Practices

### Promising Practice #1: Targeting With Universalism

1. Whitehead M, Dahlgren G. Concepts and principles for tackling social inequities in health: Levelling up part 1. World Health Organization; 2006.
2. Dahlgren G, Whitehead M. European strategies for tackling social inequalities in health: Levelling up part 2. University of Liverpool: WHO Collaborating Centre for Policy Research on Social Determinants of Health; 2006.

### Promising Practice #2: Purposeful Reporting

1. Kelly M, Morgan A, Bonnefoy J, Butt J, Bergman V. The social determinants of health: Developing an evidence base for political action. Measurement and Evidence Knowledge Network, WHO Commission on Social Determinants of Health; October 2007.
2. WHO Commission on Social Determinants of Health. Closing the gap in a generation: Health equity through action on the social determinants of health: Final report of the Commission on Social Determinants of Health. Geneva: World Health Organization; 2008.
3. Pampalon, R., Hamel, D., Gamache, P., Raymond, G. A deprivation index for health planning in Canada. *Chronic Diseases* 2009;29(4):178-191.

### Promising Practice #3: Social Marketing

1. Farr M, Wardlaw J, Jones C. Tackling health inequalities using geodemographics: A social marketing approach. *International Journal of Market Research* 2008;50(4):449.
2. Grier S, Bryant CA. Social marketing in public health. *Annual Review of Public Health* 2005;26:319-39.

### Promising Practice #4: Health Equity Target Setting

1. Bull J, Hamer L. Closing the gap: Setting local targets to reduce health inequalities. Health Development Agency; 2007.
2. Public Health Agency of Canada, World Health Organization. Health equity through intersectoral action: An analysis of 18 country case studies. Canada: World Health Organization; 2008.
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

1. Taylor L, Quigley RJ. Health impact assessment: A review of reviews. Health Development Agency; October 2002.
2. Taylor L, Gowman N, Quigley R. Addressing inequalities through health impact assessment. Health Development Agency; 2003.
3. Kemm J. Health impact assessment and health in all policies. In: M. Stahl, M. Wismar, E. Ollila, E. Lahtinen, K. Leppo, editors. *Health in all policies: Prospects and potentials*. Finland: Ministry of Social Affairs and Health, Finland; 2006.

### Promising Practice #6: Competencies/Organizational Standards

1. Public Health Agency of Canada. Core competencies for public health in Canada: Release 1.0. Ottawa, ON: Public Health Agency of Canada; 2008.
2. Ministry of Health and Long-Term Care. (2008). Ontario Public Health Standards 2008. Toronto: Queen's Printer for Ontario.

### Promising Practice #7: Contribution to the Evidence Base

- no references

### Promising Practice #8: Early Childhood Development

1. CSDH. Closing the gap in a generation: Health equity through action on the social determinants of health: Final report of the Commission on Social Determinants of Health. Geneva: World Health Organization; 2008.
2. Irwin L, Siddiqi A, Hertzman C. Early child development: A powerful equalizer. World Health Organization's Commission on Social Determinants of Health; June 2007.
3. Pascal CE. With our future in mind: Implementing early learning in Ontario; 2009.
4. McCain MN, Mustard F. Reversing the brain drain: Early years study: Final report. Toronto: Ontario Children's Secretariat; 1999.

### Promising Practice #9: Community Engagement

1. WHO Commission on Social Determinants of Health. Closing the gap in a generation: Health equity through action on the social determinants of health: Final report of the Commission on Social Determinants of Health. Geneva: World Health Organization; 2008.

### Promising Practice #10: Intersectoral Action

- no references

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