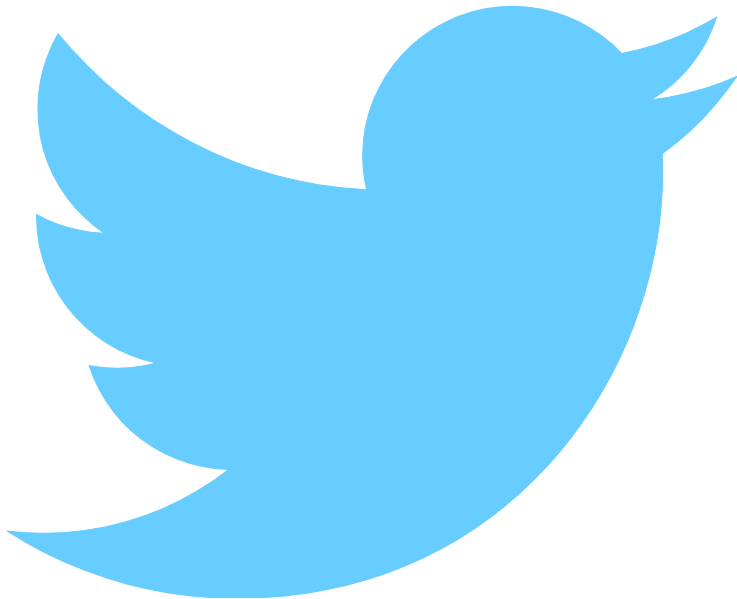
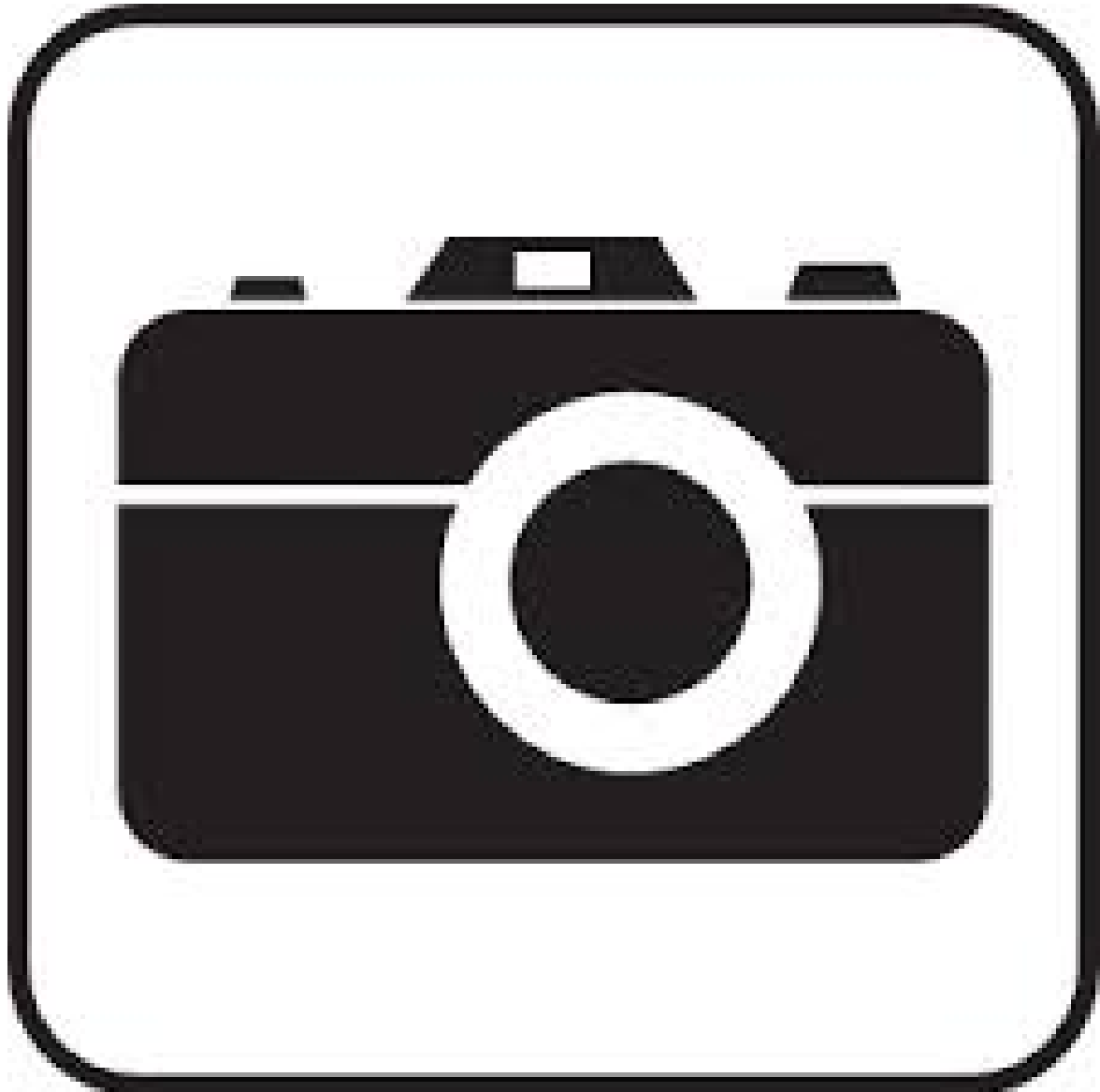


We'll be tweeting throughout the conference using the hashtag

Nous allons être sur Twitter pendant l'événement, et nous allons utiliser les mots-clic

#health4allMaritimes





NATIONAL COLLABORATING CENTRE FOR DETERMINANTS OF HEALTH

Our focus

- Social determinants of health & health equity

Our audience

- Practitioners, decision makers, and researchers working in public health
- Organizations in Canada's public health sector

Our work

- Translate and share evidence to influence interrelated determinants and advance health equity



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HEALTH FOR ALL: TAKING IT FURTHER

9:30 a.m. Walking the talk of health equity

10:30 a.m. Break

10:45 a.m. Local Maritime action: Taking it further

11:30 Lunch



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#1 What do we mean by “advancing health equity” in public health practice?



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NCCDH, 2013

Let's Talk... Health Equity

<http://nccdh.ca/resources/entry/health-equity>

HEALTH EQUITY

Health equity exists when all people can reach their full health potential and are not disadvantaged from attaining it because of their race, ethnicity, religion, gender, age, social class, socioeconomic status, sexual orientation or other socially determined circumstance

Adapted from Dahlgren and
Whitehead, 2006

NCCDH. 2013. Let's talk... Health equity. Antigonish, NS: Author, St. Francis Xavier University. Available at:

<http://nccdh.ca/resources/entry/health-equity>



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DISADVANTAGE



- Groups rendered vulnerable by underlining social structures and political, economic and legal institutions
- Rooted in unequal social relations, such as gender inequity, racism, and social and economic exclusion



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NCCDH, 2013

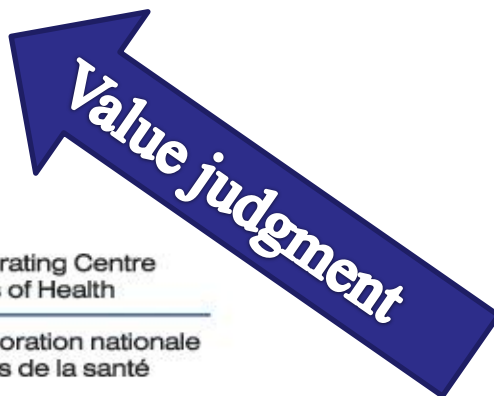
Let's Talk... Health Equity

<http://nccdh.ca/resources/entry/health-equity>

DIFFERENCES IN HEALTH STATUS

- *Health inequalities* – measurable differences in health status
(e.g., older adults tend to be less healthy than younger people due to the natural aging process)
- *Health inequities* – health differences between population groups that are systematic, avoidable and unfair

(e.g., in Montreal there is an 11-year difference in lifespan between the wealthiest and poorest neighborhoods)



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NCCDH, 2013

Let's Talk... Health Equity

<http://nccdh.ca/resources/entry/health-equity>

IMPROVING HEALTH EQUITY MEANS...

- Aligning our interventions with social justice values
- Working upstream to alter institutions, policies and practices that cause inequities
- Supporting policies and programs that “level up” the affects of the social gradient



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DISCUSSION QUESTIONS

- What examples of health inequities exist in your community?
- What are the root-causes of these inequities?
- What are the opportunities in public health practice and research to effect change?



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#2 What is the role of public health practitioners and organizations in improving health equity?



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NCCDH, 2013

Let's Talk... Public Health Roles for Improving Health Equity
<http://nccdh.ca/resources/entry/lets-talk-public-health-roles>



*Populations experiencing marginalization by virtue of social and economic disadvantage



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NCCDH, 2013

Let's Talk... Public Health Roles for Improving Health Equity
<http://nccdh.ca/resources/entry/lets-talk-public-health-roles>



ASSESS AND REPORT

Assess and report on a) the existence and impact of health inequities, and b) effective strategies to reduce these inequities.

NCCDH, 2012

Improving health in Saskatoon: From data to action

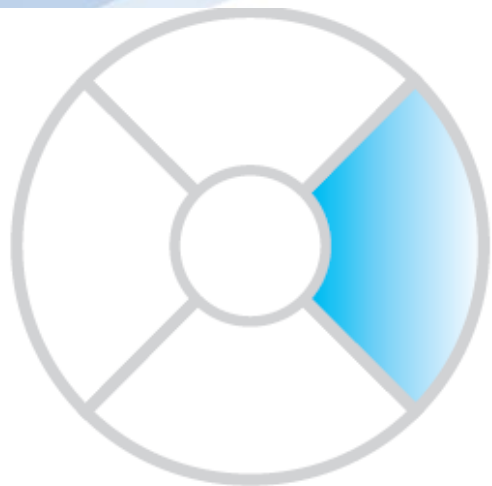
<http://nccdh.ca/resources/entry/casestudy-SK>



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MODIFY AND ORIENT INTERVENTIONS

Modify and orient interventions and services to reduce inequities, with an understanding of the unique needs of populations that experience marginalization.

NCCDH, 2014

Learning from practice: Targeting within universalism at Capital Health

<http://nccdh.ca/resources/entry/learning-from-practice-targeting-within-universalism>



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PARTNER WITH OTHER SECTORS

Partner with other government and community organizations to identify ways to improve health outcomes for populations that experience marginalization.

NCCDH, 2012

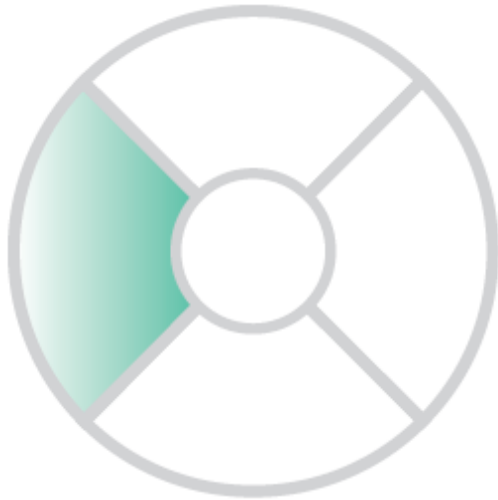
Empower the community: New Brunswick's approach to overcoming poverty. Available at:

<http://nccdh.ca/resources/entry/casestudy-NB>



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PARTICIPATE IN POLICY DEVELOPMENT

Lead, support and participate with other organizations in policy analysis and development, and in advocacy for improvement in health determinants and inequities.

NCCDH, 2014

Alberta Health Services: Establishing a province-wide social determinants of health and health equity approach. Available at:

<http://nccdh.ca/resources/entry/alberta-health-services>



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DISCUSSION QUESTIONS

- How do your daily activities fit within these four roles?
- What could you and your organization do to address the determinants of health and health equity?



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LARGE GROUP FEEDBACK

**Were there any “ah-ha!”
moments for you?**



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#3 Does our language matter?



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NCCDH, 2014

Let's Talk... Populations and the power of language

<http://nccdh.ca/resources/entry/lets-talk-populations>

TERMINOLOGY TO DESCRIBE GROUPS OF PEOPLE THAT ARE LESS HEALTHY

- Priority
- Marginalized
- Vulnerable
- Hard/difficult to reach
- Targeted
- Disadvantaged
- Under-served
- Who would benefit most from intervention
- Disenfranchised
- Disempowered
- Underprivileged
- At-risk
- High-risk
- Equity seeking



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PRINCIPLES BEHIND OUR LANGUAGE

- Diversity exists within populations groups
 - Single characteristics, varying advantages, intersecting disadvantages
 - Our language often doesn't capture diversity
- Advantage and disadvantage coexist
 - Reflecting on our own social position
 - Understanding of structural advantage, system reinforcement
- Language influences power dynamics
 - Us vs. them, stigmatization
 - Language we wouldn't use to describe ourselves



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WHERE IS OUR FOCUS?

- “The homeless” ← Individuals
- “Housing” ← Structures
- “Racism” ← Society

- Choosing appropriate language can
 - Engage and empower groups
 - Help us recognize and alter discriminatory beliefs
 - Address unequal power imbalances
 - Support tailoring programs to local context
 - Maintain attention “upstream” and systems-oriented

NCCDH, 2014

Let's Talk... Populations and the power of language

<http://nccdh.ca/resources/entry/lets-talk-populations>



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DISCUSSION QUESTIONS

- What words do you generally use to describe populations?
- What power dynamics are implied by the language of poor people and people who live in poverty?
- Can a change in language change power dynamics?



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#4 How do we work upstream to alter institutions, policies and practices that cause inequities?



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NCCDH, 2014
Let's Talk... Moving upstream

<http://nccdh.ca/resources/entry/lets-talk-moving-upstream>



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UPSTREAM INTERVENTIONS

Seek to reform the fundamental social and economic structures that distribute wealth, power, opportunities, and decision-making.

MIDSTREAM INTERVENTIONS

Seek to reduce exposure to hazards by improving material working and living conditions, or to reduce risk by promoting healthy behaviours.

DOWNSTREAM INTERVENTIONS

Seek to increase equitable access, at an individual or family level, to health and social services.

- **Organizational capacity for public health equity action** – the capability of a public health organization to identify health inequities, mobilize resources, and take effective action to reduce inequities (Cohen et al. 2013)



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MOVING UPSTREAM

- Thinking in terms of settings and conditions, rather than behaviours
- Cautious of, and addressing, lifestyle drift
- Working with intersectoral partners
- Developing skills: partnership building, political advocacy, public speaking, consensus building, organizational management, community organizing and team building



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DISCUSSION QUESTIONS

- What are the organizational obstacles to working upstream? How can you shift those obstacles?
- What initiatives are happening in your community that are not necessarily focused on health but would benefit from a public health partner?



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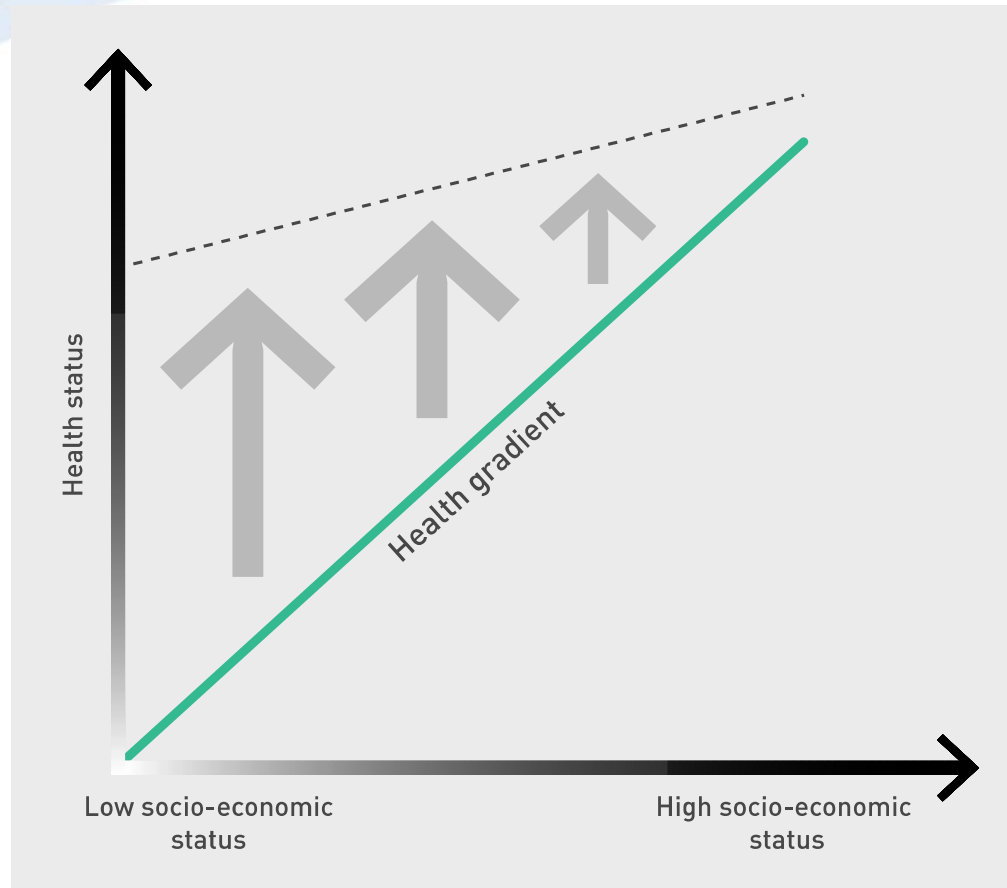


LARGE GROUP FEEDBACK

Were there any “ah-ha!” moments for you?



“LEVELING UP” FOR HEALTH EQUITY



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NCCDH, 2013

Let's Talk... Universal & Targeted Approaches to health equity

<http://nccdh.ca/resources/entry/lets-talk-universal-and-targeted-approaches>

CELEBRITY INTERVIEW

- Local Maritime action: Taking it further



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