



Taking Action on Health Equity: Policy Levers in Environmental Public Health Practice

*Environmental Health Services
BC Centre for Disease Control*

Equity is a lens that is being increasingly applied across a range of health systems and policies in Canada and elsewhere. The broad suite of regulations and policies that govern environmental health make for a complex working environment. There are a range of existing policies that help to clarify a mandate for integrating an equity approach to environmental health practice. This resource for managers, directors, and policy makers provides an overview of key policy levers for equity in British Columbia.

Health equity exists when everyone has a fair opportunity to reach their full health potential without disadvantages caused by their social, economic, or environmental circumstances.

Health determinants such as geographic isolation, socioeconomic status, education and literacy, mental health, language, and culture, can create barriers to compliance and lead to health inequities in all areas of environmental health practice.

Policy levers are the tools that government and its agencies have at their disposal to direct, manage, and shape changes in public services. This includes laws and regulations, government goals, strategic plans, by-laws, and frameworks.



Legislation and Regulations (Governing instruments)

Governing instruments are those policy levers that only the government can make (legislation and regulations) and that are enforceable.

The Public Health Act in British Columbia provides a legislative foundation for considering equity in practice. Section 3(1) sets out the discretionary authority of the Minister to make public health plans with respect to a specific issue or geographic area. Section 61 mandates what the minister must do with respect to health promotion and health protection, including addressing variations in population health status.

Practitioners perceive some governing instruments as a barrier to integrating equity into environmental public health practice, particularly when they consider

those instruments to be prescriptive and inflexible (e.g., where they set a standard as well as the method by which it must be met).

However, many of the regulations in BC made pursuant to the Public Health Act (e.g., in the areas of food premises, communicable diseases, health hazards, recreational water, and personal services) are outcomes- or performance-based and more flexible (e.g., they set a standard but allow the individual(s) or organization(s) being regulated to choose how they will meet the standard).

Outcomes-based governing instruments give environmental health officers (EHOs) greater opportunity to use their discretionary powers to address equity concerns.





Frameworks, Strategic Plans, and Service Plans (Policy drivers)

Policy drivers are policy levers such as health authority service plans and strategies, provincial public health frameworks, and standards and protocols developed by public health agencies.

Policy drivers are more flexible than governing instruments and can be leveraged individually or in combination to integrate an equity lens into environmental health practice.

- B.C.'s Guiding Framework for Public Health includes equity as a cross-cutting issue (see Box at right).
- The Ministry of Health Service Plan 2015/16 – 2017/18 incorporates equity into the Ministry's strategic objectives and strategies with reference to considering social determinants of health, creating healthy lifestyles, and creating healthy environments (Goals 1 and 2).
- Several regional health authorities, including Provincial Health Services Authority, Interior Health, Island Health, and Vancouver Coastal Health, have aligned their service plans with the Ministry's goals.
- Other health authorities, including the First Nations Health Authority, Fraser Health, and Northern Health, explicitly include equity in their strategic goals.

Policy drivers help establish a clear mandate for incorporating an equity lens into organizational culture (e.g., within health authorities for protection divisions) and into specific service areas.

BC's Guiding Framework for Public Health

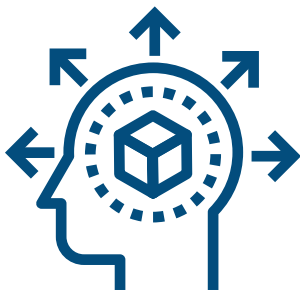
"Public health has the following roles with respect to reducing health inequities:

- Monitoring and reporting on health inequities.
- Ensuring that public health interventions are designed to support equitable health outcomes across population groups.
- Working actively with others in the health system to ensure that all health services are designed and delivered in a way that reduces health inequity.
- Working with other sectors to formulate policies and programs that will reduce health inequities.
- Collaborating with others beyond the health system to address the inequities among the broader environmental, social, economic and other determinants of health."

BC Ministry of Health. Promote, Protect, Prevent: Our Health Begins Here: BC's Guiding Framework for Public Health. Victoria, BC: Province of British Columbia; 2013 (p 10)

TAKING ACTION

Managers, program directors, and senior leadership can use existing policy to promote equity-integrated environmental health practice. Policy levers can guide practice change in a number of areas, including food premises, personal services, drinking water and sewage treatment, and housing. Policy can support you to:



1. **Articulate a clear vision for health equity in your programs and services.**

- An organizational vision for health equity supports upstream and downstream action at all levels within the organization.
- *Ensure all staff know that health equity is a priority, provide opportunities for them to share knowledge and experiences, and support their efforts to collaborate or take action in their day-to-day practice.*



2. **Explore and develop opportunities to collaborate for health equity.**

- Upstream issues fall within the mandate of multiple agencies and departments.
- *Provide informal opportunities for interaction between public health professionals and develop structures to support networking, referrals, and collaboration across sectors.*





3. Identify ways that specific regulations provide EHOs with flexibility in meeting their legislative mandates.

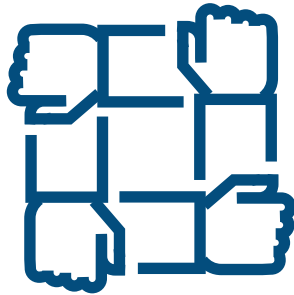
- Because regulations cannot be written with all the circumstances of clients in mind, EHOs need to consider equity and use their discretionary powers in their application of regulations.
- *In the absence of regulations in areas of practice such as housing, help EHOs find solutions that meet the goals of policy levers that include an equity focus.*



4. Become a health equity champion as a senior leader.

- Policy levers can act as an impetus for change in your region.
- *Identify key policy levers and demonstrate how an equity lens can improve compliance with health regulations, facilitate sustained behaviour change, and lead to reduced health disparities at the population level.*
- *Identify gaps and resolve inconsistencies in existing policies to reduce barriers to addressing equity issues.*





5. Integrate equity into the overall environmental health mandate.

- Broader movements within public health are shifting focus to health promotion and creating supportive environments and to reduce barriers to health.
- *Think at a systems level. Rather than being an “add-on” or specific initiative, equity cuts across all practice areas and requires system-level change, e.g., how can you strategically realign resources for lasting change?*
- *Build environmental health capacity at the organizational and individual level (e.g., training on equity and social determinants of health; use and/or adapt health equity assessment and planning tools, such as the Fraser Health HEAT tool or Ontario’s Health Equity Impact Assessment) when conducting program planning exercises.*

DOWNLOAD THIS RESOURCE FROM:

www.bccdc.ca/health-professionals/professional-resources/health-equity-environmental-health/equity-and-eph-handbook



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