

Public Health Department Health Equity Assessment

Section A: Introduction

Public Health Department Staff,

The purpose of this survey is to assess the Public Health Department's knowledge and practices in promoting health equity. The survey results will be used to identify opportunities for improvement.

Please allow 15 - 20 minutes to complete this survey, and thank you, in advance, for your participation. You will NOT be able to save your responses and return later.

Your responses are anonymous and results will be aggregated for analysis and discussion.

Survey source: Bay Area Regional Health Inequities Initiative (BARHII). Section: Staff Self-Assessment for Addressing Health Inequities; 2010.

GLOSSARY OF TERMS

Health Equity

When every person has the opportunity to realize their health potential — the highest level of health possible for that person — without limits imposed by structural inequities. Health equity means achieving the conditions in which all people have the opportunity to attain their highest possible level of health. (MDH)

Health Disparities

Differences in health outcomes that are linked with systematic economic, social, or environmental disadvantages based on their racial or ethnic group, religion, socioeconomic status, gender, age, or mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion.

Health disparities are the metric we use to measure progress toward achieving health equity. A reduction in health disparities (in absolute and relative terms) is evidence that we are moving toward greater health equity. (MDH/Healthy People 2020)

Social Determinants of Health

Social determinants of health are complex, integrated, and overlapping social structures and economic systems responsible for most health inequities/disparities. Examples include:

- Education
- Housing

- **Income**
- **Employment**
- **Transportation**
- **Criminal justice**
- **Neighborhood conditions**
- **Social connectedness**
- **Racism and other forms of discrimination**
- **Healthcare access**
- **Food security**

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1. Which best describes your position in the Public Health Department

- Staff
- Supervisor
- Manager/Exec Team

2. What program area do you work in?

- Administration and Public Health Practice
- Better Together Hennepin
- Communications / Strategic Initiatives & Community Engagement
- Executive Team
- Health Promotion
- Maternal and Child Health-Early Childhood
- Environmental Health
- Epidemiology / Assessment / ImmuLink
- C & TC / WIC
- Emergency Mental Health
- Emergency Preparedness
- Mental Health Center
- Public Health Clinic
- Business Operations
- Healthcare for the Homeless/ Integrated Care

3. I think Public Health as a department demonstrates a commitment to addressing the social determinants of health

- No
- Moving in that direction
- Yes
- I don't know

4. Please check what you think are the 3 most important social determinants of health that impact the populations that Public Health serves:

- Healthcare access
- Education
- Housing
- Income
- Employment
- Transportation
- Criminal justice
- Neighborhood conditions
- Social connectedness
- Racism and other forms of discrimination

Other (please specify)

5. In your opinion, how do you think Public Health is addressing health inequities?

- There is no focus on health inequities at all
- There is not enough focus on health inequities
- There is about the right amount of focus on health inequities
- There is too much focus on health inequities
- I don't know

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Section B. Health Department Planning and Policies

6. Does Public Health's strategic plan include an explicit commitment to addressing health inequities?

- Yes
- No
- I don't know whether the strategic plan addresses health inequities
- I don't know whether there is a strategic plan for all of Public Health

7. If your program area has its own action plan/strategic plan, does it specifically describe efforts to address health inequities?

- Yes, it does
- No, it does not
- No strategic plan/action plan
- I don't know

8. What groups outside of Public Health, if any, are usually involved in your program's planning process? (check all that apply)

- Community members/residents
- Community-based organizations
- Faith-based organizations
- Academic institutions
- Other public agencies
- Other private institutions
- Other nonprofit organizations
- Businesses
- None
- I don't know
- Other (please specify)

9. In your experience, what role(s) do community partners play in program planning and delivery? (Check all that apply.)

- Contribute input in the beginning of the planning process
- Review feedback planning documents
- Maintain active involvement throughout the planning process
- Collect feedback from larger groups of community members and communicate the feedback to Public Health
- Participate in decision-making for the planning process
- No role
- I don't know
- Other (please describe)

10. How much do Public Health programs reflect a general understanding of the social determinants that impact health?

- None
- Some
- A lot
- I don't know

11. My work has a role in reducing health inequities

- Strongly Disagree
- Disagree
- Agree
- Strongly Agree
- Don't Know

12. What role do you have in making decisions that affect your program area's efforts to address health inequities?

- I have no decision making role
- There are opportunities for me to give input, but I don't have a role in seeing that my input is incorporated into the decision
- I have an active role in major decisions affecting my program area's efforts to address health inequities
- I have primary decision-making power for my program area
- Addressing health inequities is not a focus of my program area
- Other (please specify)

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Section C. Collaboration with Hennepin County Departments

13. I know how the work of other parts of Hennepin County contributes to addressing health inequities in the communities we serve.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

14. I collaborate with staff in other Hennepin County programs (within Public Health and other departments) to address the social determinants that impact health.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

15. I collaborate with staff in other Hennepin County programs (within Public Health and other departments) to address the social determinants that impact health.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

16. There is support from Hennepin County leadership for collaborations between programs addressing health inequities.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

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Section D. Collaboration with External Partners & Policy-Makers

17. Does your program collaborate with public agencies, institutions, or community-based organizations to influence the following issues?

Examples:

Public agencies/institutions: government, hospitals/clinics, worksites, housing

Community-based organizations: local nonprofits, faith-based organizations/groups, neighborhood groups

	Public Agencies/Institutions	Community-based Organizations	No	I don't know
Housing including the availability of quality affordable housing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criminal justice including community safety, violence prevention, adult and juvenile justice:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood conditions including recreation opportunities, parks, open spaces, arts and culture, and environmental justice:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Land-use planning:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality education:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment including community economic development (e.g., job creation, business development, etc.):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Racial justice:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food security:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education including early childhood development, youth development, and leadership:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Section E. Working with Communities to Address the Social Determinants of Health

18. I am familiar with the major health inequities affecting residents in the communities with whom I work.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

19. I am familiar with the strengths and resources of the communities with whom I work.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

20. When Public Health's priorities don't match the priorities of a community group we're working with, I know how to resolve such a conflict in a collaborative way.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

21. Does your team work with the following community groups to address the social determinants of health?

	Yes	No	Moving in that direction	I do not work with this type of group
Community or neighborhood groups	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cultural/faith-based groups	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth development/leadership groups	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community members not affiliated with an organization or group	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If other (please specify)

22. I or my team have trusting relationships with community partners.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know / Not Applicable

23. My program area has strategies in place to support the work of community groups advocating for public policies that address health inequities.

- No
- Moving in that Direction
- Yes
- Don't Know / Not Applicable

24. My program area has provided resources to community residents and groups to support their self-identified concerns and needs in respect to addressing the social determinants of health.

- No
- Moving in that Direction
- Yes
- Don't Know / Not Applicable

25. My program area creates and distributes oral and written information that is appropriate for the cultural, linguistic, and literacy needs in the community.

- No
- Moving in that Direction
- Yes
- Don't Know / Not Applicable

26. My program area supports the capacity building of community leaders to address the social determinants of health.

- Yes
- No
- Moving in that Direction
- Don't know / Not Applicable

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Section F. Supporting Staff to Address the Social Determinants of Health

27. Since you have been working at Public Health, have you ever received training about the different ways public health can address the social determinants of health?

- Yes
- No
- I don't remember

28. Within my program area, we have engaged in group discussions about how our work could address one or more of the social determinants of health.

- Not Applicable to my Job Function
- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

29. I believe it is important to understand the beliefs, values, and experiences of the people served by Public Health.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

30. Being aware of my own beliefs, values, and privilege helps me understand others' perspectives.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

31. In general, Public Health programs are structured to address the social determinants that impact health.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

32. Staff I interact with in Public Health are comfortable talking about race and racism.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

33. Public Health actively recruits culturally diverse staff.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

34. Public Health maintains a culturally diverse staff.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

35. Senior management and supervisors in Public Health are comfortable talking about race and racism.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

36. I feel my work environment is supportive of many different cultural perspectives.

- Strongly Disagree
- Disagree
- Neutral
- Agree
- Strongly Agree
- Don't Know

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Section G: Reflection for Future Planning

37. What are the 3 most important things that Public Health can do differently to improve health equity?

1

2

3

38. What are the 3 most important things that you are currently doing within your own projects to address health equity and/or the social determinants? (Examples: Outreach, providing opportunities for community partners to provide planning input, participate on leadership team, other).

1

2

3

39. What 3 things could you do differently within your own projects to better address health equity and/or the social determinants?

1

2

3

40. Please share any final comments that you may have: (optional)

If you are interested in working on this issue or learning more about it, send an email to Jeremy.Gharineh@Hennepin.us.