Health Equity Concept Note

UC ANR's ability to achieve health equity for all community members and communities throughout California will require us to take a system-wide approach to improve community norms, practices, policies, systems, and environments. By extending our research, education, and policies focused on social determinants of health we will help improve lives, reduce healthcare costs, and improve the wellbeing of all Californians.

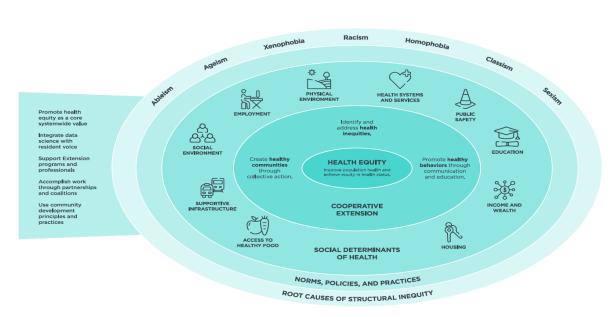
Improving Health Equity in California

Health equity is achieved when everyone can attain their full potential for health and well-being, and when all people have the ability to live their healthiest lives.

To achieve health equity in California, we must work to eliminate unfair, avoidable and remediable differences in health status among groups of people. This requires dismantling systems, policies, and practices that have supported historical injustices and the concurrent consequences on the health of communities and individuals.

Through this work we are mindful to address and remove obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

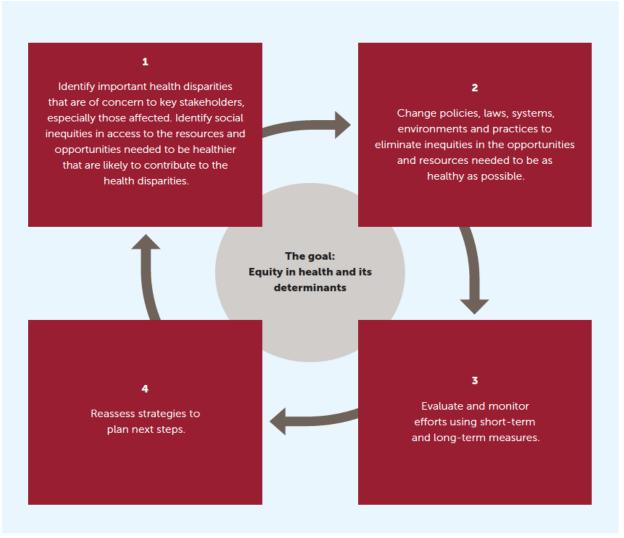
We are motivated into action by the opportunity to address a variety of social determinants of health as depicted in the Health Equity Framework image on this page.1



¹ Cooperative Extension's Framework for Health Equity and Well Being (Source: Burton, D., Canto, A., Coon, T., Eschbach, C., Gunn, J., Gutter, M., & York, D. (2021). Cooperative extension's national framework for health equity and wellbeing. Extension Committee on Organization and Policy (ECOP): Washington, DC, USA.)

Our Approach

UC ANR will address health equity through identification of health disparities; working to change policies, systems and environments to eliminate inequities; evaluating and monitoring our efforts; and reassessing our strategies to determine our next steps (see image below).²



UC ANR has over 100 years of innovative programs and practices that break down barriers and build collaborative relationships and partnerships across the public, private, and community landscapes at local, regional, and statewide levels. UC ANR is uniquely situated to connect the latest science to public and private organizations and community-based groups invested in health promotion, education, disease prevention, and health policy. We are in a position to coordinate a statewide collaborative that integrates policies, systems and environmental efforts with educational interventions to address social determinants of health that focus on pervasive cultural insensitivity, systemic gaps in basic need fulfillment, and inequitable access to healthcare resources for our most vulnerable populations in the state.

² Equity in Health. (Source: Braveman P, Arkin E, Orleans T, Proctor D, and Plough A. What Is Health Equity? And What Difference Does a Definition Make? Princeton, NJ: Robert Wood Johnson Foundation, 2017)

UC ANR academics are trusted experts embedded in the communities where they work and live. We have longstanding partnerships with local governments and close working relationships with city and county planning boards and councils, health and social support institutions, planning commissioners, and boards of supervisors. These relationships provide direct pathways for research to support fiscal and social decisions to improve policies, systems, and environments at the local, state, and national levels to directly support access to positive social determinants of health and improve wellbeing.

UC ANR serves as a bridge between communities for sharing ideas and innovation, and using our statewide, university and local networks to conduct research and deliver science-based education, information, and strategic planning concepts throughout the state.

UC ANR is well positioned to engage our communities in identifying necessary and relevant health equity issues and community driven solutions. This approach ensures that questions and solutions reflect the community and community involvement in the research efforts. UC ANR researchers are able to collaborate on conducting needs-based research; providing critical data; and developing effective, science-based strategies that are relevant to the unique characteristics of our communities. These efforts will help increase health equity through improved policies, systems, environments, and individual's behaviors.

Get Involved

Multiple opportunities exist for UC ANR academics, staff, and volunteers to partner with external organizations and other health equity focused programs to mitigate the impacts of health disparities through applied research and education. Priorities include:

- **Build connections** in your community and participate in existing coalitions that work toward health equity. Nurture relationships with community-based organizations, non-profits, local governments, educational institutions, public and private health entities, federal and state agencies, councils, and community representatives of population groups most vulnerable to inequitable health outcomes.
- Lead research to inform policy, systems, and environmental changes to improve the health status of all Californians.
- **Provide education and training** to enhance community planning, best practices, and increase individual wellness to improve health quality and equity throughout California.
- Contribute to systemwide health equity initiatives to increase our collective capacity, coordination, research, and science-based practices for an accelerated and coordinated approach to advancing health equity in California's communities.
- **Build personal and professional competence** for this work in an ongoing effort to mitigate implicit bias and build intercultural competence.