

Rice County Public Health: Keeping Equity On the Agenda

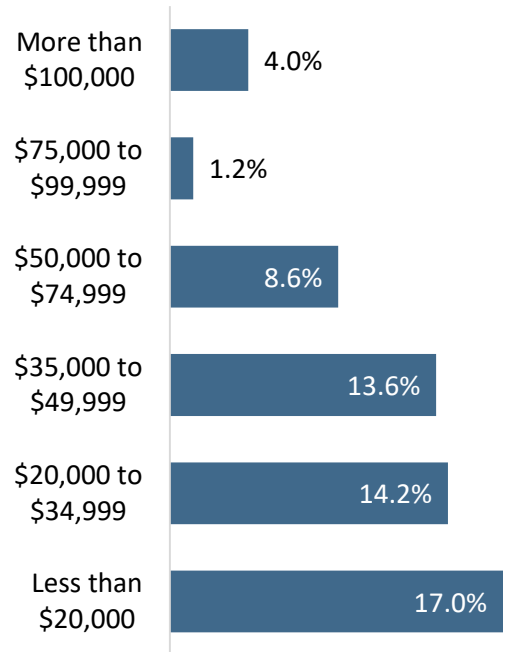
Like many counties in Greater Minnesota, Rice County looks pretty different than it did 40 years ago. New faces, new neighbors, and new communities mean changing priorities for public health staff. When Rice County Public Health conducted its community health assessment in 2014, participants asked the county to prioritize work on the social determinants of health—that is, the conditions surrounding us that impact our health and quality of life, like education, income, and food security.

Rice County Public Health staff made a commitment to look both externally and internally for ways they could impact those social factors, and started by taking steps to ensure their agency was equipped to incorporate health equity in its day-to-day work.

- Conducting an organizational equity assessment allowed public health staff to understand their strengths and limitations in their ability to address health equity. The team created a plan to consider equity in their day-to-day work, embedded health equity into quarterly meetings, and adapted their hiring process to consider equity and require bilingual staff for some positions.
- Public health staff routinely look at data with an eye toward equity. If there is a health disparity, who is affected more than others? What conditions impact those differences? For example, **Rice County residents with the lowest income are more than four times as likely to have diabetes as county residents with the highest income. Why?** “Members of the team are thinking differently,” says one staffer. “[We are] looking at things with a health equity lens and realizing there are no easy answers.”

“To achieve health equity, we must work to improve conditions that benefit entire communities.”

Percent of Rice County residents with diabetes, by income (2016)



NEXT STEPS

- Review data with an eye toward health equity.** Who is over- or under-represented when it comes to certain health outcomes? What conditions impact those outcomes?
- Keep equity on the agenda.** Talk about health equity at staff meetings, through the health equity plan, and by asking “why?” of the data and of outcomes.
- Repeat the organizational equity assessment** every two years.

