Health Equity Learning Lab Series:
From Conceptual Theory to
Concrete Practice

LEARNING LAB
SERIES TOOLKIT

Vijaya K. Hogan, MPH, DrPH
Clinical Associate Professor, Dept. of Maternal and Child Health, Gillings School of Global Public Health, University of North Carolina at Chapel Hill

Diane L. Rowley, MD, MPH
Professor of the Practice, Dept. of Maternal and Child Health, Gillings School of Global Public Health, University of North Carolina at Chapel Hill

Rachel R. Berthiaume, MPH
Social Research Specialist, Dept. of Maternal and Child Health, Gillings School of Global Public Health, University of North Carolina at Chapel Hill

Yvette Thompson
Social Research Assistant, Dept. of Maternal and Child Health, Gillings School of Global Public Health, University of North Carolina at Chapel Hill

July 2013
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detailed Table of Contents</td>
<td>2</td>
</tr>
<tr>
<td>Acknowledgements</td>
<td>6</td>
</tr>
<tr>
<td>Learning Lab Collaborators</td>
<td>7</td>
</tr>
<tr>
<td><strong>INTRODUCTION:</strong></td>
<td></td>
</tr>
<tr>
<td>Introduction to the Learning Lab Series</td>
<td>8</td>
</tr>
<tr>
<td>Learning Lab Prerequisites</td>
<td>10</td>
</tr>
<tr>
<td>Overall Goal</td>
<td>11</td>
</tr>
<tr>
<td>Learning Objectives</td>
<td>12</td>
</tr>
<tr>
<td>Learning Lab Format</td>
<td>13</td>
</tr>
<tr>
<td>Learning Lab Delivery Instructions</td>
<td>14</td>
</tr>
<tr>
<td>Resources Needed</td>
<td>15</td>
</tr>
<tr>
<td>Learning Lab Discussion Ground Rules Guidance</td>
<td>18</td>
</tr>
<tr>
<td>Evaluation Tool: Personal Portfolios</td>
<td>19</td>
</tr>
<tr>
<td>Team-Building Activity: Zoom Game</td>
<td>21</td>
</tr>
<tr>
<td><strong>LESSONS:</strong></td>
<td></td>
</tr>
<tr>
<td>Lesson One: Health Equity 101</td>
<td>23</td>
</tr>
<tr>
<td>Lesson Two: Assess How Organizations Contribute to Inequity and Create Opportunities to Promote Equity</td>
<td>74</td>
</tr>
<tr>
<td>Lesson Three: Using Data to Identify Populations In Need</td>
<td>165</td>
</tr>
<tr>
<td>Lesson Four: Draft Potential Action List to Address Equity</td>
<td>182</td>
</tr>
<tr>
<td>Lesson Five: Answer “What Else?”</td>
<td>223</td>
</tr>
<tr>
<td>Lesson Six: Engage Authentically With Stakeholders</td>
<td>279</td>
</tr>
<tr>
<td>Lesson Seven: Develop New Partnerships</td>
<td>300</td>
</tr>
<tr>
<td>Lesson Eight: Develop Equity Action Plan</td>
<td>304</td>
</tr>
<tr>
<td>Lesson Nine: Integrate and Codify Equity Into Institutions</td>
<td>318</td>
</tr>
<tr>
<td>Lesson Ten: Lessons are Cyclical and Iterative</td>
<td>340</td>
</tr>
<tr>
<td>Appendix</td>
<td>341</td>
</tr>
</tbody>
</table>
INTRODUCTION:

Introduction to the Learning Lab Series ....................................................................................... 8

Learning Lab Prerequisites ........................................................................................................... 10

Overall Goal .................................................................................................................................. 11

Learning Objectives .................................................................................................................... 12

Learning Lab Format .................................................................................................................... 13

Learning Lab Delivery Instructions ............................................................................................... 14

Resources Needed ......................................................................................................................... 15

Learning Lab Discussion Ground Rules Guidance ......................................................................... 18

Evaluation Tool: Personal Portfolios ............................................................................................ 19

Team-Building Activity: Zoom Game ............................................................................................ 21

LESSONS:

Lesson One: Health Equity 101 ..................................................................................................... 23

1.) Recap of Previous PRIME Activities ......................................................................................... 23
2.) Review Social Determinants of Health and RWJF’s Domains ................................................ 23
   a.) Notes from Facilitator Guide LL1 ......................................................................................... 23
   b.) Notes from Transcript of LL1 Day 2 Nov. 28, 2012 ........................................................... 23
   c.) PPT Slides LL1 Day 2, Nov. 28, 2012 ................................................................................ 27
3.) Seek Help Domain .................................................................................................................... 35
   a.) Building Our Diagram ........................................................................................................ 36
   b.) Showing and Explaining the Diagram ................................................................................ 36
   c.) Notes from Transcript of LL1 Day 2, Nov. 28, 2012 ........................................................ 36
   d.) PPT Slides from LL1 Day 1, Nov. 27, 2012 ....................................................................... 41
4.) Explanation of the tie-in between SDOH and HE ................................................................... 49
5.) Historical Dimension ............................................................................................................... 49
   a.) Trauma ................................................................................................................................. 49
      i.) Tom Peters’ Historical Trauma Video Clip ..................................................................... 49
      ii.) Notes from Transcript of LL1 Day 1, Nov. 27, 2012 ..................................................... 49
      iii.) Arlene Kashata’s Historical Trauma Video Clip ............................................................ 52
      iv.) Notes from Transcript of LL1 Day 3, Nov. 29, 2012 ..................................................... 52
      v.) PPT Slides from LL1 Day 1, Nov. 27, 2012 .................................................................. 52
   b.) Historical Disadvantage ....................................................................................................... 55
   c.) Intersectionality “Dimension”/Interaction .......................................................................... 55
      i.) Notes from Transcript of LL1 Day 1, Nov. 27, 2012 ..................................................... 55
      ii. PPT Slides from LL1 Day 1, Nov. 27, 2012 .................................................................. 57
      d.) Distinction between “Equality” and “Equity” ................................................................. 59
Lesson Three: Using Data to Identify Populations In Need

1.) Review of Health Disparities and Social Determinants of Health
   - Outcomes
   - Risk Factors
   - Disparities
   a.) Notes from Facilitator Guide LL2 Day 1, Feb. 11, 2013
   b.) Notes from Transcript of LL2 Day 1, Feb. 11, 2013
   c.) Handout – Data Summary Case Study Level 1
   d.) Data Summary – Key Points Sheet
   e.) Institutional Assessment: The Brooks Equity Typology
      i.) Notes from Transcript of LL2 Day 2, Feb. 12, 2013
      ii.) PPT Slides from LL2 Day 1, Feb. 11, 2013
   6.) Lesson One Summary Worksheet

Lesson Two: Assess How Organizations Contribute to Inequity and Create Opportunities to Promote Equity

1.) Review Overall Mission and Objectives/History of Institution of Focus
   a.) Notes from Transcript of LL1 Day 3, Nov. 29, 2012
   b.) PPT Slides from LL1 Day 3, Nov. 29, 2012
2.) Review Maternal and Child Health History
   a.) Notes from Facilitator Guide LL1
   b.) Notes from Transcript of LL1 Day 3, Nov. 29, 2012
   c.) PPT Slides from LL1 Day 3, Nov. 29, 2012
3.) Institutions, Organizations, Agencies, and Their Roles
   a.) Notes from Transcript of LL1 Day 2, Nov. 28, 2012
   b.) PPT Slides from LL1 Day 2, Nov. 28, 2012
4.) Introduce Example of Activity to be Included in Agency’s Focus
   a.) WIC Example: Breastfeeding and Infant Mortality
      i.) Notes from Transcript of LL1 Day 3, Nov. 29, 2012
      ii.) PPT Slides from LL1 Day 3, Nov. 29, 2012
   b.) Implementation Challenge Identification: The RE-AIM Framework
5.) “Ogre Under the Bridge” Presentation/Activity
   a.) Participants’ Experiences with Ogres
      i.) Notes from Transcript of LL1 Day 3, Nov. 29, 2012
      ii.) PPT Slides from LL1 Day 3, Nov. 29, 2012
      iii.) Notes from Transcript of LL1 Day 2, Nov. 28, 2012
      iv.) Questionnaire on Ogres from LL1
      v.) Notes from Facilitator Guide from LL1
         i.) Notes from Transcript of LL1 Day 3, Nov. 29, 2012
         ii.) PPT Slides from LL1 Day 3, Nov. 29, 2012
      vi.) Notes from Transcript of LL1 Day 3, Nov. 29, 2012
      vii.) PPT Slides from LL1 Day 3, Nov. 29, 2012
   b.) Ogres/Barriers Present in Agency
      i.) PPT Slides from LL1 Day 3, Nov. 29, 2012
6.) Lesson Two Summary Worksheet

Lesson Three: Using Data to Identify Populations In Need

1.) Review of Health Disparities and Social Determinants of Health
2.) Case Study – Introduce Data Level
3.) Lesson Three Summary Worksheet
Lesson Four: Draft Potential Action List to Address Equity ........................................ 182
1.) Case Study – Individual, Local/Neighborhood, State, and Federal Levels........... 182
   -includes Appreciative Inquiry Technique
   a.) Notes from Facilitator Guide LL2, regarding Individual Level............... 182
   b.) Notes from Facilitator Guide LL2, regarding Local/Neighborhood,
      State, and Federal Levels................................................. 182
   c.) Notes from Facilitator Guide LL2 ........................................ 183
   d.) Handout – Case Study for Individual Level..................................... 185
   e.) Handout – Case Study for Local/Neighborhood and State Levels........... 190
   f.) Handout – Case Study for Federal Level........................................ 195
2.) Introduce Connection Grid Activity.................................................................. 198
   a.) Notes from Facilitator Guide LL2 ............................................ 198
   b.) Notes from Transcript LL2 Day 2, Feb. 12, 2013.............................. 199
   c.) Handout – Connection Grid: Case Study Content Analysis .................. 210
3.) Introduce Concept Mapping Activity.............................................................. 212
   a.) Notes from Facilitator Guide LL2 ............................................ 212
   b.) Notes from Facilitator Guide LL2 ............................................ 214
   c.) Handout – Women’s Vision.................................................................. 217
   d.) Handout – Concept Mapping Ranking List................................. 219
4.) Lesson Four Summary Worksheet.................................................................. 221

Lesson Five: Answer “What Else?” .................................................................... 223
1.) Use BET and R4P ................................................................................. 223
   -Include Discussion on BET
   a.) Notes on BET from Pauline Brooks.................................................. 223
   b.) PPT Slides from LL1 on BET ......................................................... 243
   c.) Notes from Facilitator Guide LL1 ................................................. 244
   d.) Notes from Facilitator Guide LL2 ................................................. 244
   e.) Handout – Modified BET Worksheet from LL2................................. 244
   f.) Pauline Brooks’ Visioning Activity from LL3 ................................... 247
   g.) Elements Regarding BET from Participants’ Presentations on Health
      Action Equity Plans........................................................................ 248
      i.) Community Organizations/Local WIC Office Group ................. 248
      ii.) Data Group.............................................................................. 249
      iii.) Nutrition Group: American Indian Outreach Collaborative ....... 249
   -Include Discussion on R4P
   a.) PPT Slides from LL2.................................................................... 250
   b.) Handout – R4P Chart for Case Study from LL2........................... 256
   c.) Notes from Facilitator Guide LL2 ................................................. 258
   d.) PPT Slides on BET and R4P Application LL3................................. 258
2.) Universal Design vs. Universality: Applications in Equity ................................ 269
   a.) PPT Slide from LL1.................................................................... 269
   b.) Notes from Transcript LL1 Day 3, Nov. 29, 2012......................... 270
3.) Equality vs. Equity: Applications in Equity ................................................... 271
   a.) PPT Slides from LL2 Day 1, Feb. 11, 2013................................... 271
   b.) Notes from Transcript LL2 Day 2, Feb. 12, 2013............................ 275
4.) Lesson Five Summary Worksheet.................................................................. 276

Lesson Six: Engage Authentically With Stakeholders ........................................ 279
1.) Introduce the Principles of Community Engagement................................. 279
Lesson Seven: Develop New Partnerships ................................................................. 300
1.) Pooling Resources With Others ....................................................................... 300
2.) “Always Do Something” Lesson ........................................................................ 300
   a.) PPT Slides from LL3 ....................................................................................... 300
3.) Lesson Seven Summary Worksheet ................................................................... 303

Lesson Eight: Develop Equity Action Plan ............................................................. 304
1.) Draft detailed Equity Action Plan ....................................................................... 304
   a.) Notes from Facilitator Guide LL3 .................................................................. 304
   b.) Notes from Transcript LL2 Day 3, Feb. 13, 2013 ........................................... 304
   c.) Notes from Reminder Email to Participants about LL3 ................................. 308
   d.) Notes from Facilitator Guide LL3 ................................................................. 308
   e.) Handout – Guidance for Equity Action Plan Presentations LL3 .................. 309
2.) Gather feedback from Equity Experts and Community Members ..................... 311
   a.) Notes from Facilitator Guide LL3 .................................................................. 311
   b.) Personal Biographies of Equity Expert Panel Members ................................ 311
   c.) Technical Assistance Question Guidance Sheet for Panel Members............. 315

Lesson Nine: Integrate and Codify Equity Into Institutions .................................... 318
1.) Cite/Review Job Descriptions, and Policy and Procedures Manual ................... 318
   a.) PPT Slides from LL1 ...................................................................................... 318
   b.) PPT Slides from LL2 ...................................................................................... 321
   c.) PPT Slides from LL3 ...................................................................................... 324
2.) Specifically Include Institutional Changes in Equity Action Plans ..................... 326
3.) Presentation of Equity Action Plans with Implementation Science Elements .... 326
   a.) Article on Implementation Research/Science’s Elements ............................ 326

Lesson Ten: Lessons are Cyclical and Iterative .................................................... 340

Appendix .................................................................................................................. 341
ACKNOWLEDGEMENTS

We would like to acknowledge and thank the following for their contributions to the Health Equity Learning Lab Series:

Michigan Department of Community Health's (MDCH) Leadership
MDCH’s Women, Infant, and Children Program (WIC)
Michigan Public Health Institute (MPHI)
University of Michigan
Health Equity Action Plan Technical Review Panel Members
Health Equity Learning Lab Series Participants
LEARNING LAB SERIES COLLABORATORS

Center for Health Equity for Mothers and Children
Vijaya Hogan
Diane Rowley
Rachel Berthiaume
Yvette Thompson

Content Development, Lead
Facilitators, Technical and
Subject Area Advisors,
Analysts

PRIME Project
Alethia Carr, Director, MDCH – Bureau of Family,
Maternal, and Child Health (BFMCH)
Brenda Jegede, Project Manager MDCH –
BFMCH/Division of Family and Community
Health (DFCH)
Derek Griffith, Vanderbilt University
Julie Allen, University of Michigan
Allison Krusky, University of Michigan
Sheryl Weir, MDCH/Division of Health, Wellness,
and Disease Control (DHWDC)/Health
Disparities
Holly Nickel, MDCH/DHWDC/Health Disparities
Tom Reischl, University of Michigan
Carol Ogan, MDCH - BFMCH
Brenda Fink, MDCH - BFMCH/DFCH

Various members of PRIME
served as: evaluators,
consultants, assistant
facilitators, and technical
advisors of the Health Equity
Learning Lab Series.

Inter-Tribal Council of Michigan
Elizabeth Cushman
Linda Woods
Arlene Kashata

Content Development,
Consultants, Assistant
Facilitators, Technical
Advisors

University of Michigan, School of Public Health
Judy Compton, Project Manager, MI Public Health
Training Center

Facilitator of video recording
of Learning Labs
INTRODUCTION TO THE TOOLKIT

In order to achieve its aim of reducing infant mortality disparities through equity in Michigan, the PRIME Project proposed several activities. One activity was the development of a health equity learning lab. The PRIME Project enlisted the services of the Center for Health Equity for Mothers and Children (CHEMAC) for the creation of this lab. CHEMAC aims to develop effective implementation strategies to transform existing public health and health-related agencies so that every institutional action promotes and never inhibits the attainment of health equity for every individual it serves. This Toolkit documents the structure, format, and materials for a pilot version of this Health Equity Learning Lab Series.

To develop the Learning Lab, we, the authors, searched the internet and the published literature in search of models for equity attainment for public health agencies. In particular, we sought models that met the following criteria for an equity implementation model:

- The model addresses equity issues relevant to the earliest stages of the life course (e.g. maternal and child health focused);
- The model addresses the full range of contributors to equity, including historical contributors, institutional racism, and social determinants of health equity;
- The model incorporates community engagement and collaborative partnerships in the process of developing strategies;
- The model pays attention to principles of implementation science to ensure that the developed plan unfolds as intended with fidelity to the underlying science and intent;
- The model is easily adaptable for use in public health agencies.

Not only did we not find a model that contained these characteristics, we did not find any model that came close. CHEMAC has worked in collaboration with the Michigan Department of Community Health and PRIME project staff to develop a model that incorporates these elements and is designed along the structure of a Health Equity Implementation Learning Lab Series.

The purposes of this Health Equity Learning Lab Series are:

- to build the capacity of the Bureau of Family, Maternal and Child Health to reduce racial disparities in infant mortality;
- to create a model and training that would help staff incorporate a social determinants of health framework in their daily work;
- to create a model and training that would help staff more regularly and effectively use data to inform program, policies and practices;
• to develop a systematic process for how to think about determinants of racial disparities in infant mortality in a way that leads to new funding opportunities, programs and policies.
LEARNING LAB PREREQUISITES:

Social Justice Workshop
Undoing Racism Workshop
Unnatural Causes video
Race: the Power of Illusion video
OVERALL GOAL

Goal:

To foster institutional change that always promotes, and NEVER inhibits, health equity

To incorporate equity thinking, perspectives and action into your day-to-day work

Minimum: To increase knowledge of applied approaches to promoting equity

Maximum: To achieve proficiency in incorporating equity thinking, perspectives and action into your day-to-day work.

Equity Skill Levels:

• Awareness
  – Have a thorough understanding of why equity is an important institutional goal and have knowledge of some approaches to promoting equity

• Functional
  – Able to “do”. You can identify opportunities to incorporate equity considerations in your day-to-day work, and you take advantage of emergent opportunities to promote equity

• Proficient
  – You create opportunities to address and promote equity
LEARNING OBJECTIVES

By the end the Learning Labs Series, the participants will be able to:

1. Recognize contextual and environmental issues that impact on equity in specific health outcomes, i.e. breastfeeding rates,

2. Understand the interconnections and relationships between individual outcomes, socioeconomic context, and upstream/gatekeeper actions,

3. Envision and articulate what equity would look like at multiple levels across the social ecological framework,

4. Assess, modify and/or articulate and promote new policies, procedures, and work plan activities to collectively address equity within workplace settings,

5. Develop personal action plans for addressing equity in specific health outcomes, i.e. breastfeeding rates.

6. To process, synthesize, and systemize equity work into all action within the WIC Division,

7. To gather creative solutions to challenges and barriers to equity work,

8. To seek to sustain this work within the WIC institution.
INTRODUCTION

LEARNING LAB FORMAT

There are ten steps required to develop a Health Equity Implementation Plan. These 10 steps have been incorporated into a series of three Learning Labs. The entire series takes approximately 30 hours over 9 days, spread out in 3 consecutive days, 3 hour per day periods. This Toolkit documents the process and contains materials needed to design and conduct the Health Equity Learning Labs. We highly recommend that a health equity specialist to provide technical support for the participants through the Learning Lab process.

The 10 steps we have identified as requirements for a good health equity plan were translated into 10 lessons. Each lesson includes activities and summary exercises to ensure that the development of an equity implementation plan unfolds in an effective and efficient way. These Labs were developed for a maternal and child health agency (WIC); thus, there will be a need to develop and insert relevant program specific material according to the agency that is participating in the Labs. The content of this material should be guided by the participating agency’s and stakeholders’ mission, goals and objectives.

While the Health Equity Learning Lab Series is designed to be a group workshop facilitated by expert consultants, it may potentially be adaptable for group/self-moderated study. The Toolkit contains a list of materials needed to facilitate the Health Equity Learning Lab Series. Because it is a practice-based, applied model, it is less effective as an individual activity. Individuals may gain a valuable perspective by moving through the lessons but participation of the entire organization, in collaboration with community stakeholders and partners, is critical to fully develop and implement an effective equity plan. We suggest the use of an experienced equity implementation consultant and an experienced facilitator for the Health Equity Learning Lab Series to ensure that material is conveyed correctly and in ways that are responsive to the learners.

Each lesson denotes a major overarching activity/step toward developing an equity implementation plan. Since lessons build upon one another, these steps cannot be “cherrypicked”—that is all steps are important and necessary to achieve the development and transformation to an equity approach. The lessons move the participants through an equity learning process that includes exercises and techniques that they will need in order to translate health equity into the real-world environment of their unit/agency.

It is strongly recommended that the participants include several members of the community who participate in the services delivered by the agency and who are part of populations designated as “health disparity populations”. If this is not possible, then it is recommend that the agency contract with members of the community to develop case studies and data that represent common experiences, knowledge, attitudes, etc. (both positive and negative) relative to the services of the participating unit/agency and the related risks and outcomes.
LEARNING LAB DELIVERY INSTRUCTIONS

The Health Equity Learning Lab Series is intended to be delivered as a multisession workshop led by an equity consultant and a facilitator. There is potential for adaptation to single session/self-facilitation, but great care should be taken and an equity consultant should be involved with this adaptation. There are three separate sessions or labs, each covering a few lessons of the ten that are included in the series.

It is ideal to have a small number of participants, 5-6 people or max of 20 who are divided into smaller groups. This aids the facilitators in monitoring the participants' understanding and to better respond to the group’s unique needs and requests. Composition of the groups should be carefully considered. Since the labs are intended to change practice in an organization or unit toward equity, it is imperative all members of that unit are involved. Additionally, the ideal group would consist of an entire unit, broken into groups of 20 or less; community members; local, state and federal agency representatives; and if possible, other stakeholders who are partners in the attainment of your agency’s goals. For the most comprehensive and potential sustainable equity work, all members of the socio-ecological framework relevant to the work of the agency should be involved, including community members.

Participants should complete all prerequisites for the labs, as this is intended as a culminating exercise in a unit's/agency’s progress towards incorporating health equity promotion into their institution. It is critical that the participants have a basic understanding of health inequities that will be built upon with the Health Equity Implementation Learning Lab content. The participating group should complete all lessons and the corresponding exercises as subsequent exercises build upon previous ones. Participants should be encouraged to maintain a journal that contains their notes, thoughts and questions stemming from concepts learned during the lab.