Health equity science (HES) "investigates patterns and underlying contributors to health inequities and builds an evidence base that will guide action across the domains of public health program, surveillance, policy, communication, and scientific inquiry to move toward eliminating, rather than simply documenting, inequities."

The following principles outline how public health practitioners can transform HES to public health action.

**CDC PRINCIPLES OF HEALTH EQUITY SCIENCE FOR ACTION**

1. **Emphasize Drivers of Inequities**
   - Explicitly state whether your goal is to examine drivers or markers of disparities. Markers are characteristics of sub-populations while drivers perpetuate inequities.

2. **Conduct for Action**
   - Evaluate impact and use lessons learned to prioritize scientific questions that seek to eliminate, rather than merely observe, health disparities.

3. **Clarify the Uses of Race + Ethnicity**
   - Be explicit about the purpose, methods, and interpretation of results when including data regarding race and ethnicity.

4. **Promote Visibility**
   - Ensure visibility of populations at risk of inadequate representation due to social marginalization. This work encompasses all facets of the research process.

5. **Address the Contexts**
   - Address the structural and social factors that impact health rather than solely focusing on individual behaviors.

6. **Use Appropriate Measures**
   - Use appropriate measures of disparity and explain your metric. Consider whether your research merits relative or absolute measures.

**EXPLORING HEALTH EQUITY SCIENCE IN ACTION**

In 2023, ASTHO, in coordination with CDC, explored the HES principles, in addition to current efforts and opportunities with health departments and community partners across the country. Here are some key considerations for advancing implementation of HES principles.

**WHAT HEALTH DEPARTMENTS CAN DO:**

- **Center health equity in data modernization efforts:**
  - Improve data system interoperability and the timeliness of data to better understand and address inequities.
  - Work with federal partners to improve or expand policies that support complete and standardized collection and reporting of health equity-related data.

- **Invest in communication and dissemination science:**
  - Support clear communications about health equity data for public health and non-public health audiences.
  - Share data products back with community partners in formats that support community use and decision-making.

- **Explore approaches to evaluate health equity programs and policies:**
  - Promote community-based participatory evaluation practices, emphasizing early and ongoing community participation in evaluation protocols.
  - Build or expand academic partnerships with evaluation specialists to increase capacity.

- **Develop long-term engagement strategies to strengthen community partnerships for HES:**
  - Invite community partners to participate in advisory boards and establish methods to compensate (if feasible) them for their time and expertise.
  - Foster inclusive workforce development approaches to ensure the public health workforce represents the communities they serve.
  - Streamline procurement processes for community-based organizations to formalize public health and community collaborations.

**WHAT PARTNERS CAN DO TO SUPPORT HEALTH DEPARTMENT HES IMPLEMENTATION EFFORTS:**

- Develop frameworks and guidance on conducting HES.
- Create a comprehensive library or clearinghouse of evidenced-based, health equity-related interventions, programs, and policies.
- Provide a platform for health departments and partners to share promising practices, challenges, and opportunities for advancing HES.
- Provide HES trainings and technical assistance on:
  - Characterizing intersectionality and providing context through data.
  - Best practices for data collection, analysis, interpretation, and visualization.
  - Evaluation methods, with a specific focus on health equity impact evaluations.
- Generate long-term flexible funding opportunities that build in time and resources to:
  - Support non-traditional community-based partners.
  - Conduct qualitative data collection to contextualize findings.
  - Evaluate health equity impacts.

For more HES implementation considerations, check out this article.

2. Figure recreated with permission from CDC.
3. Partners include federal agencies, national and state associations, academic institutions, and community-based organizations.