

Health equity as a core system value in Cooperative Extension

Case study: Use of an in-service training (IST) within University of Florida's Institute of Food and Agricultural Sciences Extension (UF/IFAS Extension)

BACKGROUND

Cooperative Extension is uniquely positioned to be a key leader in advancing community-based initiatives aimed at tackling health inequities in underserved communities. In 2021, the Extension Committee on Operations and Policy (ECOP) adopted [Cooperative Extension's National Framework for Health Equity & Well-being \(Framework\)](#) that articulates a vision for this work. Advancing health equity as a core system value across the Extension system is the first of five key recommendations.

This case study highlights the University of Florida's Institute of Food and Agricultural Sciences (UF/IFAS) Extension's strategy to advance integration of health equity across their Extension programs through professional development training. Information from this case study was collected by reviewing relevant documents from the work as well as a key informant interview with Dr. LaToya O'Neal. As the first Health Equity fellow with the Extension Foundation and a key leader for health equity work in Cooperative Extension, Dr. LaToya O'Neal was a co-author of the Framework. She is currently an Assistant Professor and Extension Health & Wellness Specialist at the University of Florida and serves as the State Program Leader for Health Extension.

DESCRIPTION OF THE PRACTICE

After the launch of the Framework, Dr. O'Neal, in collaboration with colleagues, developed an in-service training (IST) to provide county-based UF/IFAS Extension agents and educators with methods to engage with the Framework, learn about key health equity principles and begin to develop ideas on how to incorporate health equity into their work. No additional funding was secured for the development or implementation of the training.

STEPS TAKEN TO IMPLEMENT THE IST

- 1. Formed a training team.** Dr. O'Neal strategically engaged a six-person team of state specialists and regional specialized agents (RSAs) from Family & Consumer Science and Community Development programs to help catalyze cross-program collaboration. Specialists and RSAs were knowledgeable and experienced with community-based participatory research principles, community resource development, and health equity.
- 2. Established leadership support.** Dr. O'Neal and colleagues had discussions with the UF/IFAS Extension leadership including the Dean of Extension, state program leaders, district Extension directors and various faculty to share the Framework and the plan to conduct a training.
- 3. Designed and developed training content.** The training team pooled their expertise and pulled from the literature to create the three modules of training content with a focus on helping Extension professionals think about how health equity matters in the work they are already doing.

STEPS TAKEN TO IMPLEMENT THE IST (CONTINUED)

- 4. Promoted and conducted the training.** The training details and invitation to register were shared with all Extension faculty across the state along with the Associate Dean of Family, Youth and Communities and the Associate Dean of Agriculture and Natural resources. The initial training was conducted online in the spring of 2022 across three non-consecutive days. About 25 County faculty attended, primarily Family and Consumer Sciences agents along with a few Agriculture and Natural Resources and 4-H agents.
- 5. Evaluated and revised the training approach.** The training team conducted evaluation surveys at the end of each day to understand participant satisfaction, knowledge of content, and overall feedback on the training. Participants responded positively to the training, content, and facilitators. Key lessons learned and changes in the training approach are noted below

TRAINING LEARNING OBJECTIVES:



1. Understand Extension's National Framework for Health Equity & Well-being



2. Be able to describe the role all Extension professionals have in advancing health equity.



3. Be able to develop a plan for integrating health equity strategies into upcoming Plan of Work and Report of Accomplishments (POW/ROA) annual reporting.

KEY LESSONS LEARNED FROM THE TRAINING

- **Engage all Extension programs early and repeatedly.** Though there were some training participants from Agriculture and Natural Resources and 4-H the majority were from Family and Consumer Sciences. The training team had hoped to engage more faculty from less traditional health and well-being program areas to participate. They reflected that in order to reach the entire system, it's important to engage leaders early and consistently to encourage broader participation.
- **Frame content to resonate with the audience.** The training team found it important to balance how health equity content is presented based on audience, perception, and social climate. Framing is important to ensure that people feel included in the mission.



WHAT'S NEXT: SCALING UP TRAINING & TRANSFORMATION

To advance this work further across Extension's five administrative districts in Florida, Dr. O'Neal formed a health equity working group, consisting of colleagues across programs, and who bring together different strengths and resources. Together they are advancing this work using a more comprehensive, stepwise approach to reach all Extension professionals:

- **Shift to a district model for training.** The working group is establishing buy-in from district leadership to offer training at district meetings. They are designing a training toolkit that keeps the three module training approach but adapts the first module to act as a one hour introduction module to reach more Extension staff and inspire them to attend the full four module trainings.

WHAT'S NEXT: SCALING UP TRAINING & TRANSFORMATION (CONTINUED)

- **Leverage district-level Health Equity Champions to expand training and capacity across districts.** One champion from each of the five UF/IFAS Extension districts and a champion from Florida's 1890 land-grant institution, Florida A&M University Extension are acting as district liaisons to the state-level working group. They are using a "train the trainer" model so champions will be equipped to train county faculty who then can train volunteers and community partners to advance health equity as a core system value. Champions will also serve in an ongoing coaching capacity to support faculty in health equity work across the district.
- **Expand partnerships and funding for health equity focused initiatives.** Dr. O'Neal secured support from Extension administration to fund demonstration pilot projects that utilize interdisciplinary teams to improve health equity outcomes in key priority areas including food insecurity, climate and health, and mental health. The aim is to leverage results from the pilot projects to transform projects at the district level and to secure larger integrated research grants and generate more interest from county faculty across programs to get involved.

FOR MORE INFORMATION CONTACT:

LaToya O'Neal, latoya.oneal@ufl.edu. The training toolkit is planned to be available for sharing with other states in early 2024.

This case study was prepared by the Center for Community Health and Evaluation as part of the evaluation of the Well Connected Communities (WCC) initiative with funding support from the Robert Wood Johnson Foundation (RWJF). Views expressed here do not necessarily reflect the views of RWJF.