

Equity Lens in Public Health

Reducing Health Inequities: The
Contribution of Public Health Services
in BC

Whole Team Meeting

October 17, 2012

Vancouver Sheraton

Purpose of Meeting

- To share current health equity initiatives and updates on ELPH program of research
- To obtain input on next steps in ELPH program research

Purpose of ELPH

The purpose of this program of research is to guide and inform learning about the integration of an equity lens in public health and to contribute knowledge of health inequities reduction.

As an exemplar, we will examine the integration of an equity lens in the promotion of mental health and prevention of harms of substance use.

Four Inter-Related Studies over 5 Years

1. Assessing health equity priorities and strategies
2. Intersectoral collaboration for health inequities reduction
3. Assessing the theoretical relevance and practical utility of health equity tools
4. Power and ethics in public health practice

Overview of Day

- Study 3 – Health equity tools
- Study 1 – Health equity priorities and strategies, interview recruitment
- *Lunch*
- Study 1 – continued
- Study 2 – Intersectoral collaboration
- KTE – Roles and priorities for knowledge translation

Study 3: Assessing the theoretical relevance and practical utility of health equity tools

Spotlight: Study 3 Research Questions

1. What health equity tools are available?
2. What is the theoretical relevance of available tools?
3. What is the practical utility of available tools?

Meeting Objective

- To discuss current initiatives in the development of health equity tools provincially and nationally.
- To determine next steps in the development of health equity tools inventory

Current Initiatives in the Development of Health Equity Tools

Inventory of Health Equity Tools

Study 3: Assessing the Theoretical Relevance and Practical Utility of Health Equity Tools:

METHODOLOGY

- Environmental scan (ES)

Why?

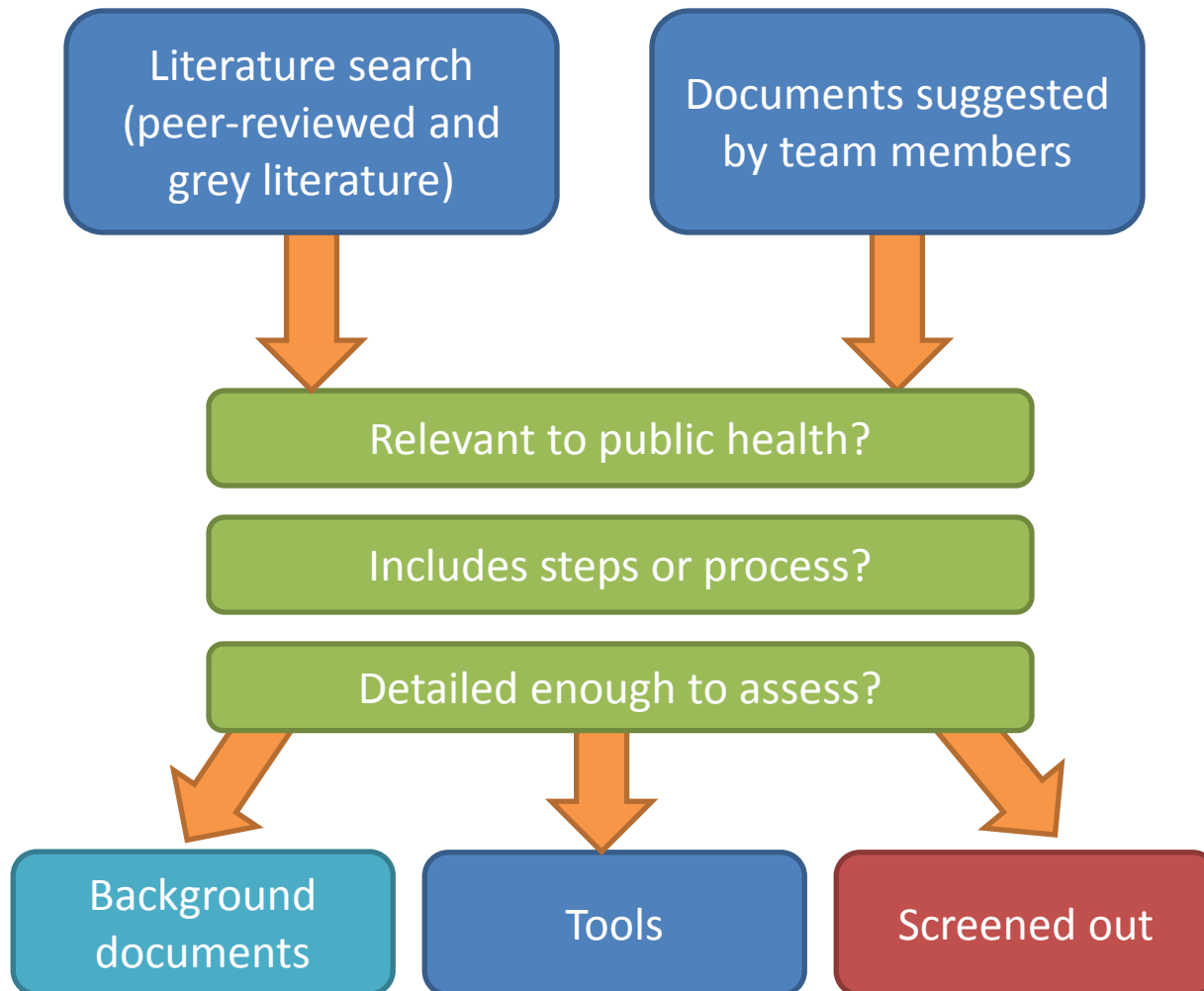
- Broad approach to information searching to capture a wide variety of sources and documents on health equity tools.
- Enables decision makers to understand external environment and interconnections of its sectors and to translate this understanding into decision-making (Morrison, 2006)

What is a health equity tool?

By “tool” we mean a document that either **assesses** the degree to which health equity is included in policies or programs, **measures** health equity, or **promotes** the inclusion of health equity in policies or programs.

Inclusion Criteria

- peer-reviewed or grey literature
- published in English
- 2011 or before
- all geographic areas
- document types: reports, peer-reviewed articles and any document that self-identified as a tool, guide, resource, audit or framework for health equity



Review of Health Equity Tools Inventory

- Is there anything on the list that should not be?
- Is there anything missing from the list?
- How might you use the HE Tools inventory?
- Does the detailed summary contain the right information? What could be removed? What else would you like to see?

Determining practical relevance: Concept Mapping

A health equity tool should...

Rating questions:

- How important is this statement for assessing the **practical utility** of an equity tool?
- How important is this statement for assessing the **effectiveness** of an equity tool?
- How **feasible** is it to apply this statement to an equity tool?
- How much would this statement help to determine if and equity tool has **impact in your area work**?
- How much does this statement accurately outline **what you are looking for** in a health equity tool?

Sign Up [PREVIEW]

Please fill out the form below to create your account. Please enter either a username OR an email address. This will become your sign in name.

* Username or E-Mail: ?

* Password: ?

* Repeat Password: ?

First name:

Last name:

Organization:

Title:

Address:

Address 2:

City:

State/Province:

Postal Code:

Country: ▼

Phone:

Cell:

Fax:

Language: ▼

* denotes required field

Equity Lens in Public Health | x

www.conceptsystemsglobal.com/project_accept.php?project=430&preview=true

Summon ELPH - Universit... Fruit Tree Project FluidSurveys - O... PARTNER Tool ... Equity Lens in P... Other bookmarks

Equity Lens in Public Health Concept Systems Global MAX[®]

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Equity Lens in Public Health Informed Consent [PREVIEW]

Study Information

You are being invited to participate in a study entitled *Equity Lens in Public Health* that is being conducted by **Bernie Pauly** and other research team members. Bernie is a Scientist at the Centre for Addictions Research in BC (CARBC) and Associate Professor in the School of Nursing at the University of Victoria and you may contact her if you have further questions by emailing bpauly@uvic.ca or by phoning 250 472-5915. This research is being funded by the Canadian Institutes of Health Research.

The purpose of this five-year program of research is to engage in a collaborative, participatory process between researchers and decision makers in all BC health authorities to study and foster learning about the use of an equity lens during a period of complex system change in public health to inform systemic responses for reducing health inequities.

Research of this type is important because as it aims to contribute to staff learning and knowledge development in equity-oriented practices and strategies; strengthen collaboration within and across sectors to work together on reducing health inequities; identify appropriate tools and frameworks to guide the development, implementation and evaluation of equity strategies; and provide a framework to support ethical public health practice in addressing ethical challenges inherent in developing and providing mental health and substance use services to reduce health inequities.

Your Participation

You are being asked to participate in this study because of your involvement in mental health and substance use public health programs and the expertise that you have in this area.

If you agree voluntarily to participate in this research, **your participation will include using a web-based program to brainstorm ideas on the concept of health equity (concept mapping)**. This includes brainstorming, and then returning to the website after the ideas have been gathered, to sort and rank the ideas. This can take up to one hour to complete, at your own speed and you can do part, then return to complete the task as you have time.

Participation in this study may cause some inconvenience to you as it will require some time commitment. However, the time you spend will be directly related to health equity. In other words, it will take place during work time (unless it is more convenient for you to participate outside work time). There are no known or anticipated risks to you by participating in this research.

The potential benefits of your participation in this research include learning from other health authority personnel and increasing your knowledge exchange capacity and research skills.

Your participation in this research must be completely voluntary. If you do decide to participate, **you may withdraw at any time without any consequences or any explanation**. If you do withdraw from the study, the information you provided up to the time of withdrawal will be kept in the dataset unless you indicate otherwise.

US Web-based data collection

The concept mapping exercise occurs over the internet on a secure site housed in the United States (Concept Systems). The type of information I am gathering is not the kind of information likely to be of interest for security reasons. But please be advised that information about you that is gathered for the concept mapping portion of the research uses a web program located in the U.S. As such, there is a possibility that information about you may be accessed without your knowledge or consent by the U.S. government in compliance with the U.S. Patriot Act.

Anonymity and Confidentiality

In terms of protecting your anonymity, the project staff will be sending the invitation via email but will not know who has responded, unless you indicate that. Project staff will be the only ones who see the individual answers to the demographic questions. Your confidentiality and the confidentiality of the data will be protected by removing your real name and assigning a code name to your information. Contents of quotes will not reveal individual identities and no one will be identified in any reports or papers emerging from the project. All the study data will be stored on a password protected computer and an external hard drive and saved for an indefinite period. It may use the data in the future for secondary analysis by a graduate student writing a thesis if written permission is obtained from the principal investigator and ethical approval has been granted. Only project staff will have access to the personally identifiable data.

It is anticipated that the results of this study will be shared with others in the following ways: directly to participants and their organizations, to other health authorities and the BC Ministry of Health through a Knowledge Exchange workshop, through scholarly journal or book chapter publications and presentations at conferences, as well as on a website.

Contact Information

In addition to being able to contact the researcher at the above contact information, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Human Research Ethics Office at the University of Victoria at 250-472-4545 or ethics@uvic.ca and the VIHA Research Ethics office at 250-370-8620.

Your Consent


Your participation in Concept Mapping indicates that you understand the above conditions of participation in this study and that you have had the opportunity to have your questions answered by the researchers.

Project Administrator: Bernie Pauly
E-Mail Address: bpauly@uvic.ca

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Equity Lens in Public Health

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 help

Equity Lens in Public Health [PREVIEW]

Our health authority partners have identified the practical challenge of applying an equity lens in their program development and practice. We have found that decision makers and practitioners understand and apply the concept of health equity in diverse ways, but overall are challenged in doing this work. With your help, we are creating a set of practical criteria to evaluate health equity tools that you can use to apply an equity lens to your work. A health equity lens is a way of approaching public health policy and program development that promotes positive health outcomes for everyone, especially those that face significant barriers to health, such as income, education and lack of social networks. A health equity tool clearly identifies improving health equity as a goal and provides a set of steps, questions, or a framework that people can follow to achieve this goal.

We would like to know what features/aspects/elements/characteristics of health equity tools you think make the tool effective and relatively easy to use. In this exercise, we are interested in your ideas on what makes a health equity tool practical to apply when you are developing, implementing, and evaluating policies, programs, or services aimed at reducing health inequities.


NEXT STEPS:

1. [Participant Questions](#) OPEN 
2. [Sorting](#) OPEN 
3. [Rating: Importance](#) OPEN 

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Brainstorming Statements **[PREVIEW]**

Brainstorming Statements - In the text box below, type a statement that completes or answers the focus prompt. You may add as many statements as you wish. Please keep each statement brief, just one thought. Select "add this statement" after each statement or idea. Your statement will then be saved and added to the list of collected statements at the bottom of the page. Please review the other statements to see if your idea is already there. You may search this list of collected statements using the search function below.

FOCUS PROMPT: A health equity tool should...

Add This Statement

Character Count: Maximum size is 250 characters

Search for statements: 

- provide connections to a community of practice, or people to discuss health equity with
- have some context
- walk through steps to see if this is a health equity issue
- use plain language
- have links to resources
- be concise and short
- guide your thought process

Done Brainstorming

Done with Preview

PROJECT FOCUS PROMPT:

A health equity tool should...

Progress Bar

0 out of 7 sorted.

Unsorted statements:

provide connections to a community of practice, or people to discuss health equity with

have some context

walk through steps to see if this is a health equity issue

use plain language

have links to resources

be concise and short

guide your thought process

Instructions

INSTRUCTIONS: In this activity, you will categorize the statements, according to your view of their meaning or theme. To do this, you will sort each statement into piles in a way that makes sense to you. First, read through the statements in the Unsorted Statements column to the left.

Next, sort each statement into a pile you create. Group the statements for how similar in meaning or theme they are to one another. Give each pile a name that describes its theme or contents.

Do NOT create piles according to priority, or value, such as 'Important', or 'Hard To Do.'

Do NOT create piles such as 'Miscellaneous' or "Other" that group together dissimilar statements. Put a statement alone in its own pile if it is unrelated to all the other statements.

Make sure every statement is put somewhere. Do not leave any statements in the Unsorted Statements column.

People vary in how many piles they create. Usually 5 to 20 piles works well to organize this number of statements.

signed in as Bernie Pauly [sign out](#) [home](#) [help](#)

[Instructions](#) [Create a pile](#) [Save](#) [Arrange all](#) [Minimize all](#) [Maximize all](#) [Edit pile name](#) [Switch to](#) [Preview Done](#)

PROJECT FOCUS PROMPT:

A health equity tool should...

Progress Bar

5 out of 7 sorted.

Unsorted statements:

walk through steps to see if this is a health equity issue

guide your thought process

structure

use plain language

be concise and short

additional information

provide connections to a community of practice, or people to discuss health equity with

have some context

have links to resources

Equity Lens in Public Health

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Progress:

Importance Rating [PREVIEW]

INSTRUCTIONS: Please rate the following statements, in the range indicated below.
 The following statements were generated in response to what makes a health equity tool effective and convenient to use. Please rank each statement in relation to all other statements.

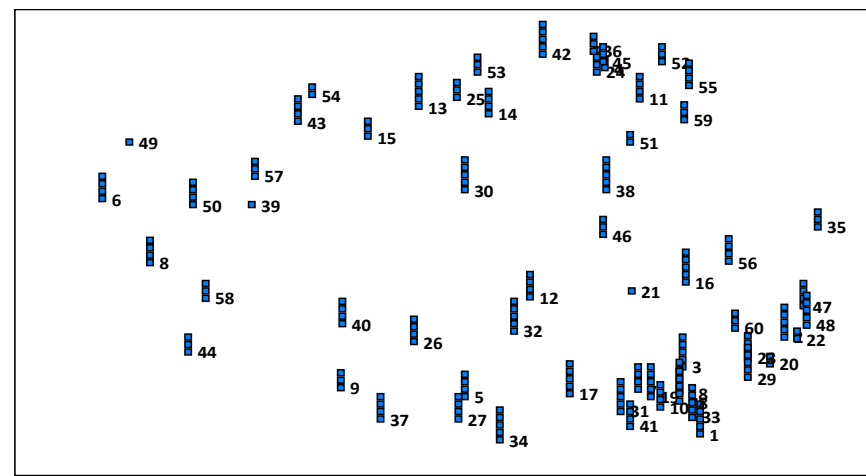
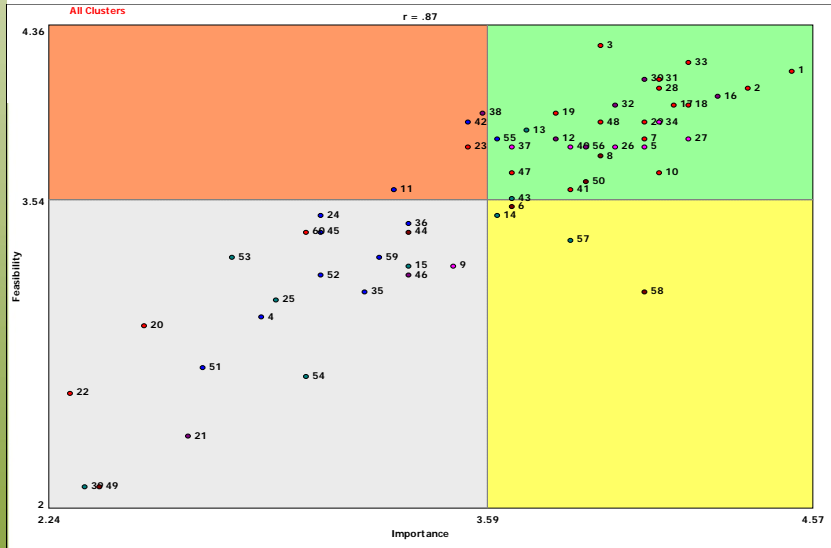
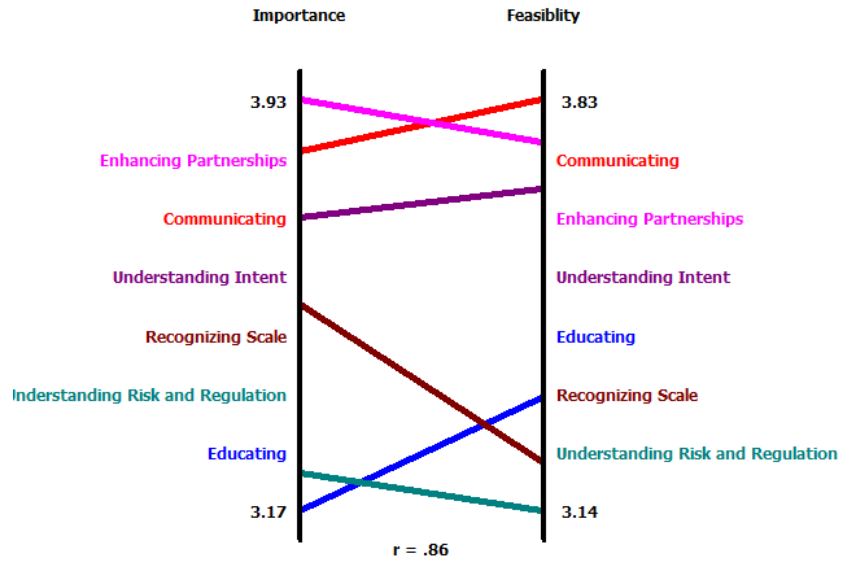
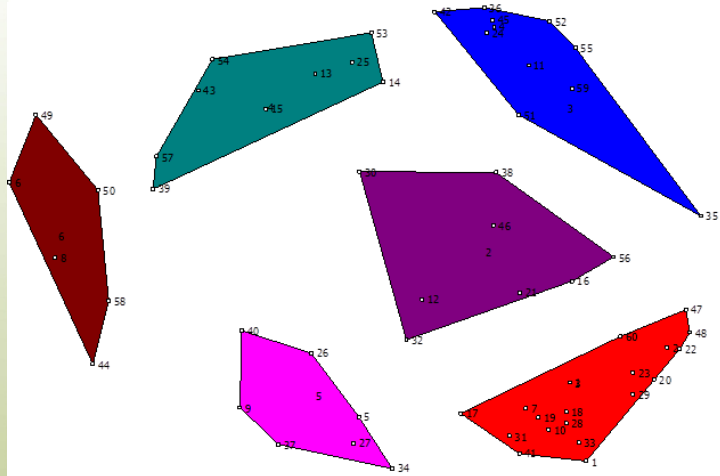
Project Focus Prompt: A health equity tool should...

Show unrated statements only Show all statements

Rating					Statement
<i>not important</i>		<i>extremely important</i>			
<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	provide connections to a community of practice, or people to discuss health equity with
<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	have some context
<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	walk through steps to see if this is a health equity issue
<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	use plain language
<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	have links to resources
<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	be concise and short
<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	guide your thought process

Save Rating Information

Done With Preview



Study 1: Assessing health equity priorities and strategies

Study 1: Assessing health equity priorities and strategies

1. To what extent has health equity, in general, been identified and prioritized across the HAs as reflected in core HA documents and plans?
2. What are the contextual influences on priority setting and equity goals at the organizational systems level?
3. What specific strategies are proposed and implemented by PH to reduce health inequities associated with mental health promotion and prevention of harms of substance use? How has the provincial, regional, and community context influenced the selected mental health promotion and prevention of harms of substance use equity strategies and what is the impact of the context on the development, implementation and outcome of these strategies?
4. What are the changes with respect to the above over time? (Comparative case analysis from T1 to T2)

Meeting Objective

- To learn about and discuss health equity initiatives in BC.
- To determine next steps in recruitment strategies for Study 1.

Current work on health equity priorities in health authorities

Study 2: Intersectoral collaboration for health inequities reduction

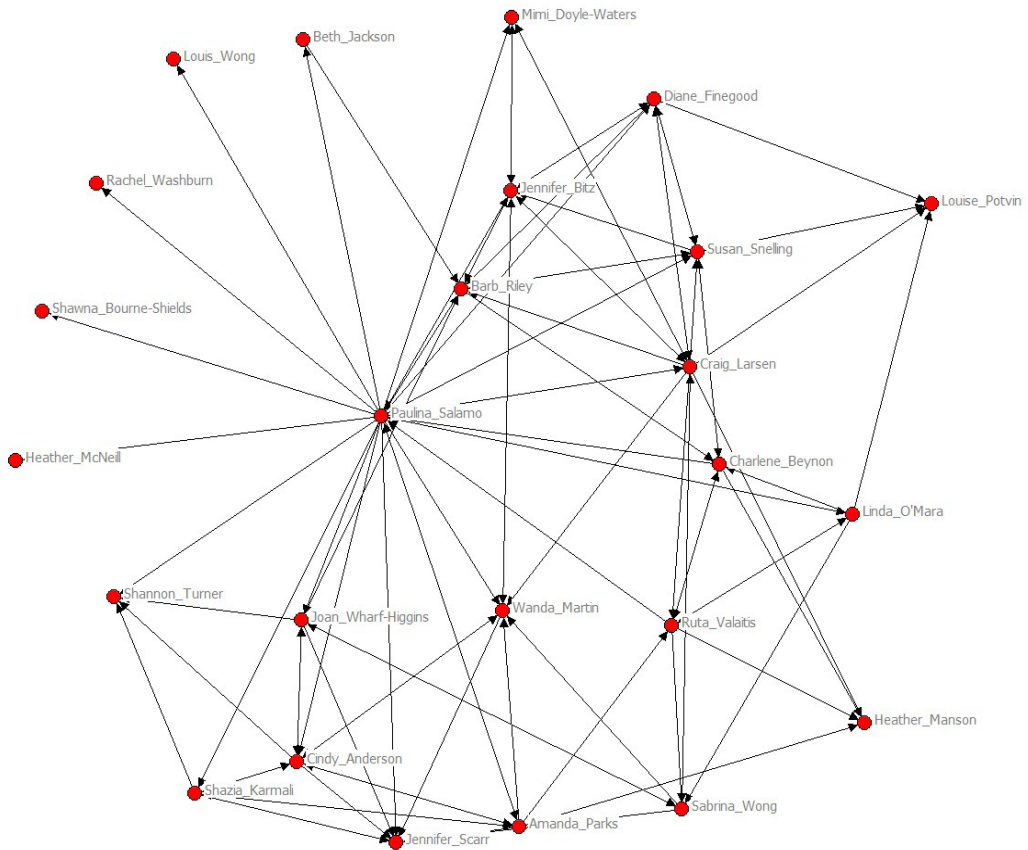
Study 2: Intersectoral Collaboration for Health Inequities Reduction

1. Who do PH practitioners engage with inside of the health authority on health equity issues related to mental health promotion and prevention of harms of substance use?
2. Who does PH engage with outside of the health authority on health equity issues related to mental health promotion and prevention of harms of substance use?
3. Who are prominent actors/organizations in social networks for promotion of health equity?
4. What opportunities exist to strengthen intersectoral engagement in the promotion of health equity in mental health promotion and prevention of harms of substance use programs?
5. How does this change over time?

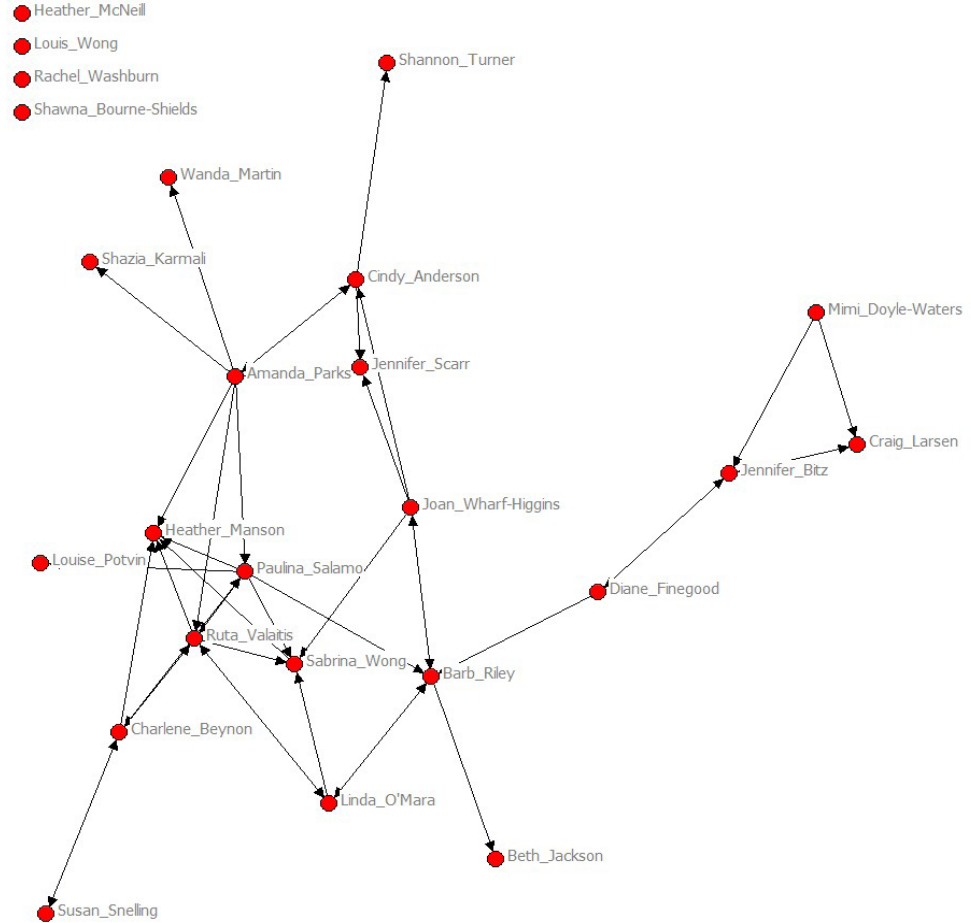
Social network analysis

- Used to collect and analyze data from multiple interacting individuals or organizations
- Focuses on linkages and networks of relationships
- Can explore frequency, nature, and quality of relationships

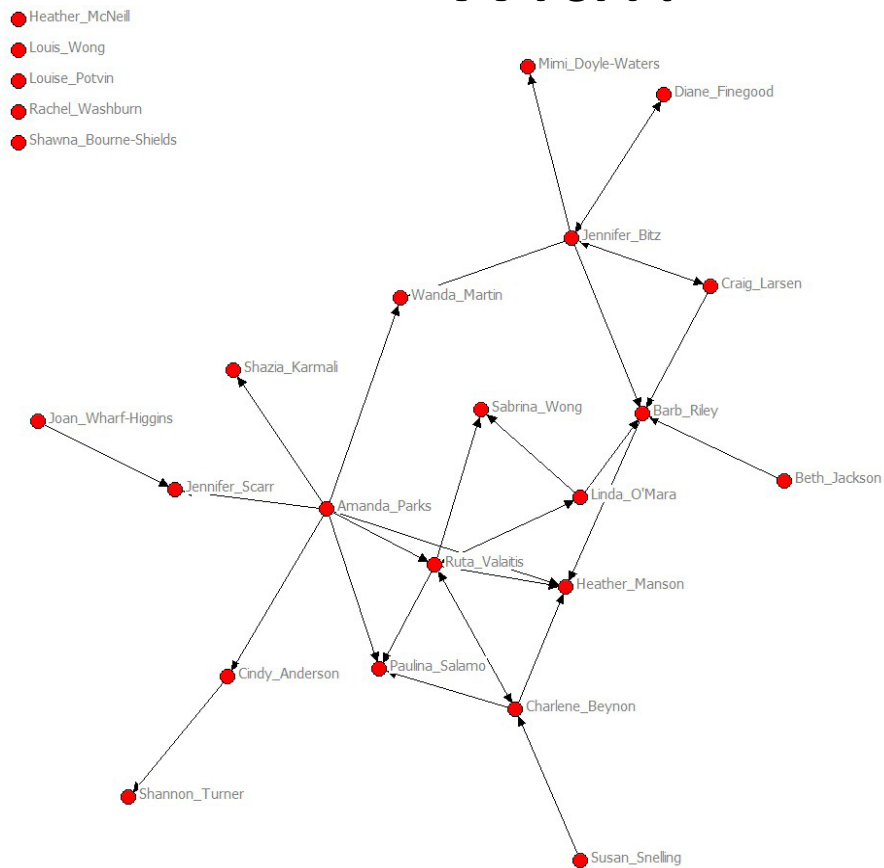
Who Do You Share Information With?



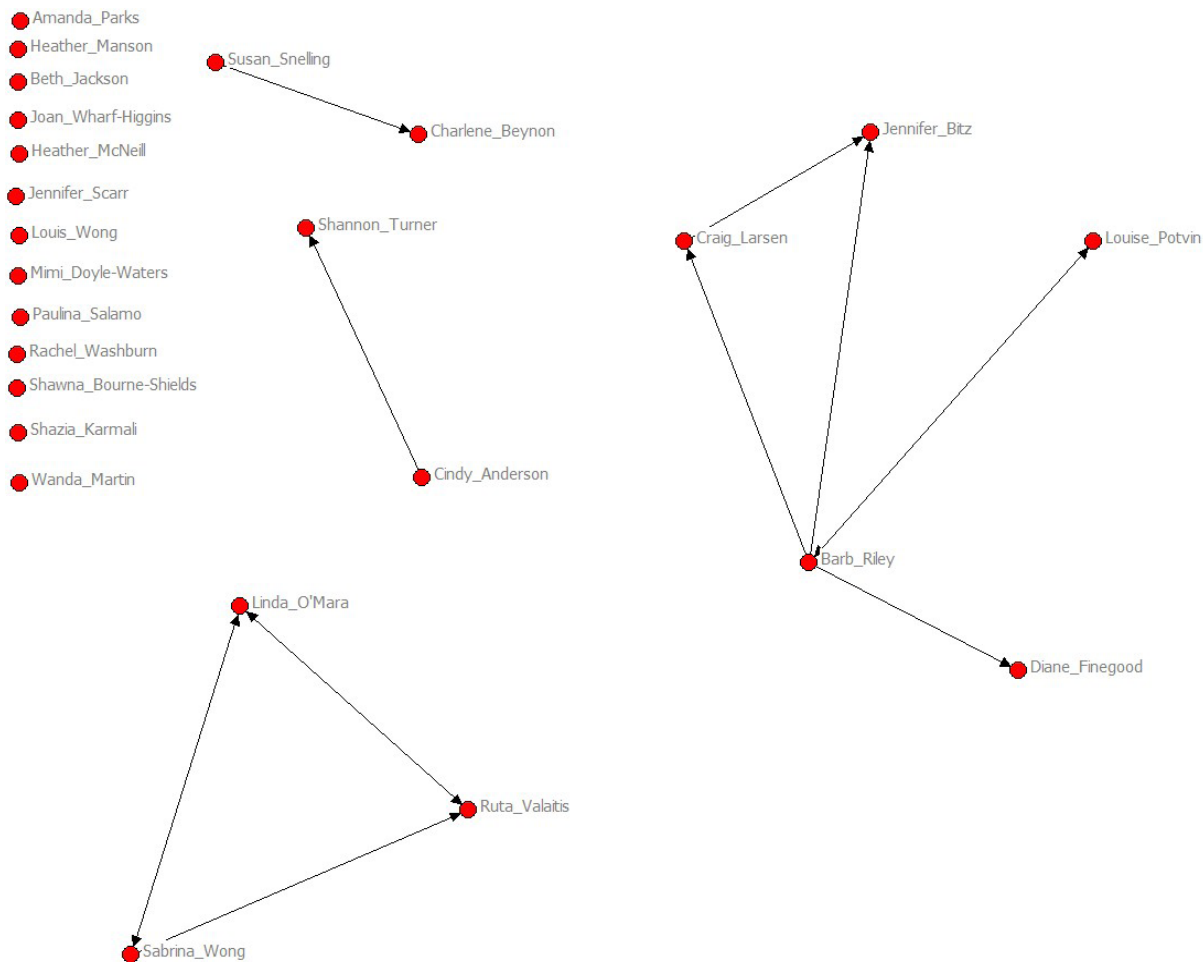
Who Do You Share Resources With?



Who Do You Do Joint Planning With?



Who Do You Share Programs With?



Knowledge Translation and Exchange

Objective

- To determine roles and priorities of ELPH research team in communication and exchange strategies
- To obtain feedback on proposed approach to research policy internships.



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ELPH Communication & Linkage Strategies

This is an ELPH research team survey to help orient and plan our communication and linkage strategies for our research results. With your help, we would like to identify team member roles, activities and communication strategies to enhance synthesis, sharing and uptake of the new knowledge we generate with those who might use it to inform practice and/or policy. A summary of the findings from this survey will be shared with ELPH team members.

Section 1: Introduction

We have a few questions about your experience with communicating research findings.

What is your role on the ELPH grant?

(knowledge user, principal knowledge-user, collaborator, co-investigator, co-principal investigator)

What is your primary work setting?

(examples: university, health authority, provincial government, federal government agency, national collaborating centre)

Do you have experience with communicating research findings?

We are specifically interested in you experience of developing ways to select, prepare, and communicate research knowledge for non-research audiences.

- No previous experience
- Some experience not related to health equity
- Some experience related to health equity
-

Summary and Next Steps

Funders



CIHR IRSC

Canadian Institutes of Health Research Instituts de recherche en santé du Canada



Public Health
Agency of Canada

Agence de santé
publique du Canada