Addressing health inequities through collaboration   going beyond our limits

Marilyn Wise
Health Equity Research & Development Unit
SLHD & UNSW Sydney

Inequalities or inequities in health?

Inequalities in health are differences that can arise naturally, randomly, or as a result of personal choices

Inequities, though, are differences that affect some social groups **systematically,** and that are judged to be unfair and unjust

because they arise from social treatment

What is 'social treatment'?

A

A local health district has a limited system in place to monitor changes in its population that means adapting to changing needs

A clinician prescribes a complex medication regime to people with limited literacy

each of the decisions is made by people from within the health sector

clinicians, technical or administrative staff
managers
the Board
the Ministry of Health

Inequities

Collaboration is

A process

through which parties who see different aspects of a problem

can constructively explore their differences and

search for solutions that go beyond the limits of their own

The most important step is to articulate the NECESSITY to collaborate?

Who are the other parties involved? Are they as concerned as we

Why is it a necessity to work with communities?

The ways our system is structured, which policies are given priority

rewarded for   as individuals and as a whole system. The system is set up to satisfy the needs of the majority.

AND

Worldviews   our beliefs, values, norms, our knowledge and experiences. We make assumptions and judgements based on these.
They vary by age, culture, gender, occupation, religion, peer group and living and working environments.

Why is it a necessity to work together?

To clarify what communities are seeking from the health sector

Respect, dignity, safety, and responsiveness to expressed need?

Access to high quality health care services?

Information that is relevant, comprehensible, timely?

Communication through avenues and by people who are trustworthy authoritative and respected?

And to understand what communities bring?

Worldviews   beliefs, values, norms and assumptions

Knowledge   of lived experiences, of current living conditions, and of the demands of and skills in living across cultural boundaries

Access to community resources   people, infrastructure   reach

Felt needs and priorities

Skills in community organisation + technical advice

Legitimacy   trust and respect

WHAT ARE CHALLENGES for communities in working with the health sector?

Difference in power and capacity

Differences in experiences in and expectations of health care

Limited, formal representative structures

Few opportunities to create shared meanings

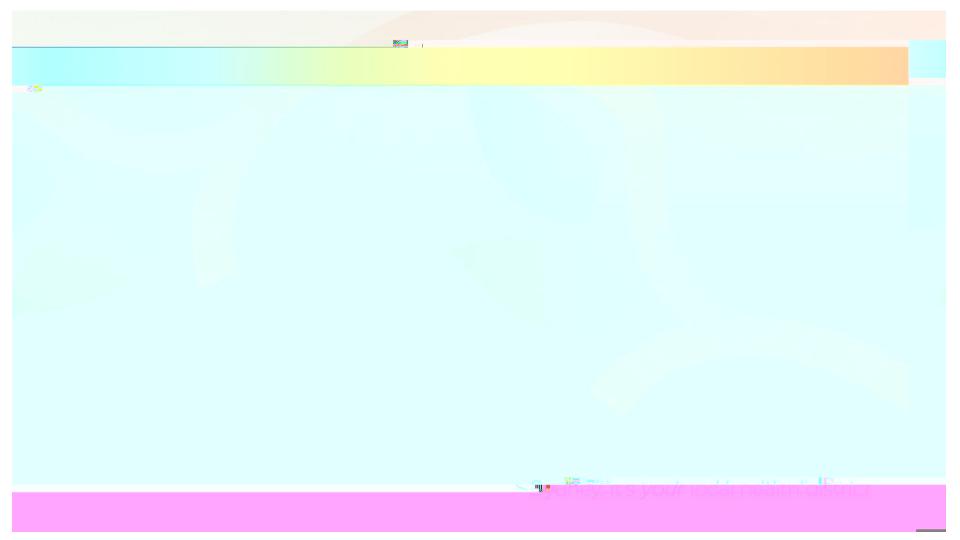**What are challenges for the health sector working with communities?**

Difference in worldviews, experiences, and understanding the impact of how we treat one another   message sent may not be the one received;

Few opportunities to create shared meanings about problems and solutions;

We engage with community members but not with formally-selected or appointed representatives

Necessity + Opportunity + Capacity + Relationships + Actions + Sustainability

Each of the steps in the NOCRAPS model is critical to collaborating effectively to reduce inequities in health

You are us!

We are one!