

Public Health Governance:

DALHOUSIE UNIVERSITY TECHNOSCIENCE & REGULATION RESEARCH UNIT

Emerging themes from community engagements across Canada

PROBLEM

There is a pressing need for better public health institutions, policies, programs, and practices so people, communities, and environments can flourish. Having researched public health authorities' (political and professional elites') insights during the pandemic, our research team set out:

- To collect and analyze the diverse experiences of marginalized communities across Canada;
- To develop a public health framework that reflects the values, experiences, and needs of all, including marginalized communities.

METHODS

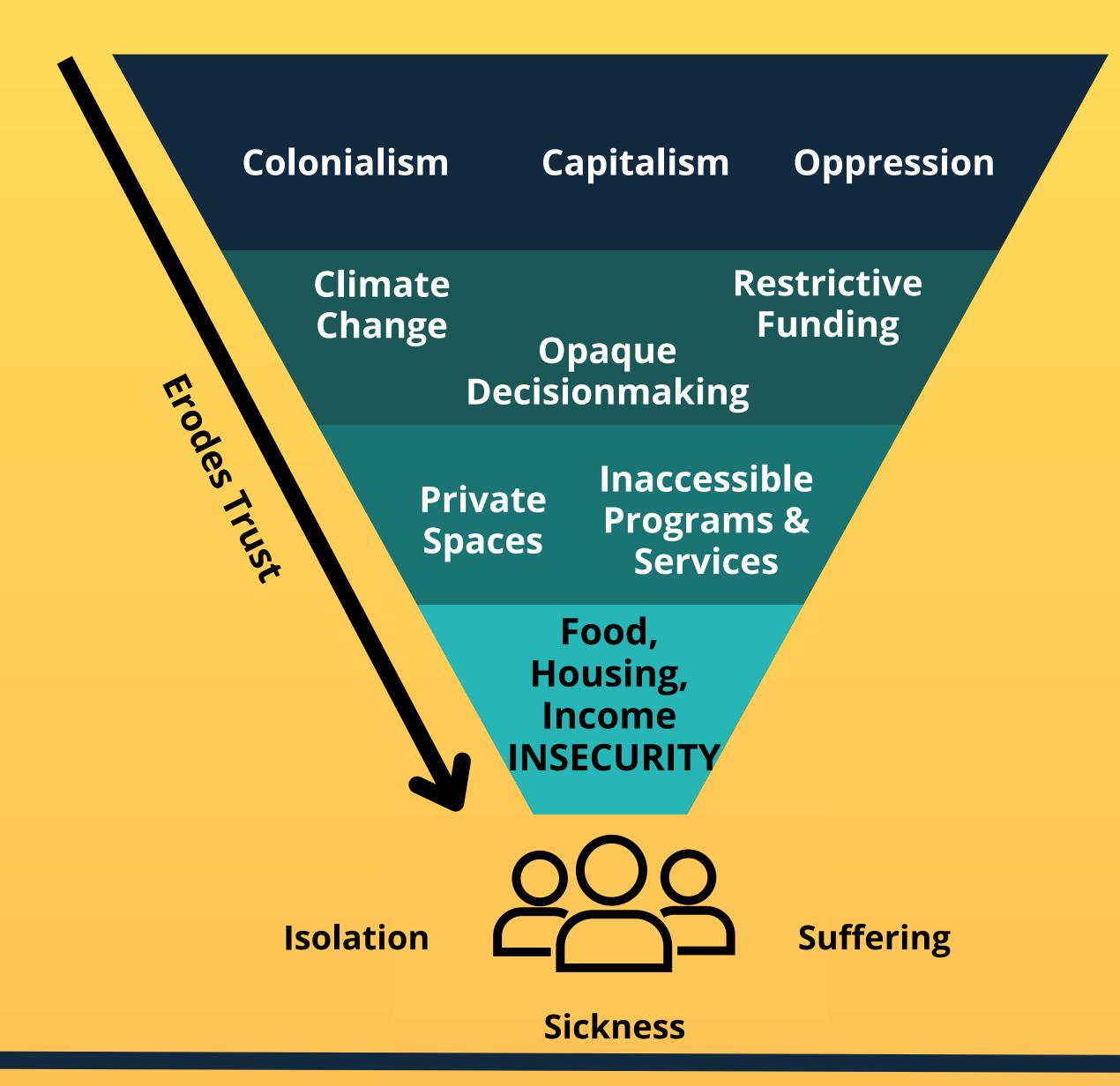
- Conducted 7 semi-structured virtual **focus groups (FG)** between May 27 June 19 2024.
- FGs represented 5 jurisdictions (NS, QC, ON, AB, BC), frontline health workers and Indigenous voices.
- Using real-time polling, Mentimeter and Google Jam Board, participants discussed:
 - 1. What supports wellbeing in your communities?
- 2. What are your communities' strengths and weaknesses?
- 3. What values and practices are critical to public health?
- 4. Who do you trust to make good public health decisions? Is this different in emergencies?
- 5. What approaches might improve public health?
- A combination of inductive and deductive thematic analysis to identify themes across the data using NVivo 14.
- Used inductive thematic analysis to add nuance and specificity to the coding based on participants' insights.

RESULTS 1 Focus Group Demographics (N=56)

Age		Location		
20-29	5	Alberta	8	
30-39	15	British Columbia	15	
40-49	9	Nova Scotia	11	
50-59	9	Ontario 9		
60-69	1	Quebec	13	
00-07	4			
70-79	4	Ethnic identity		
No Answer	10	Black/African Descent		4
Gender		East Asian		1
	4.0	South Asian		2
Male	13	Southeast Asian		3
Female	36	White/European Descent		27
Non-Binary	3	Indigenous		16
2-Spirit	1	Other		1
No Answer	3	No Answer		1

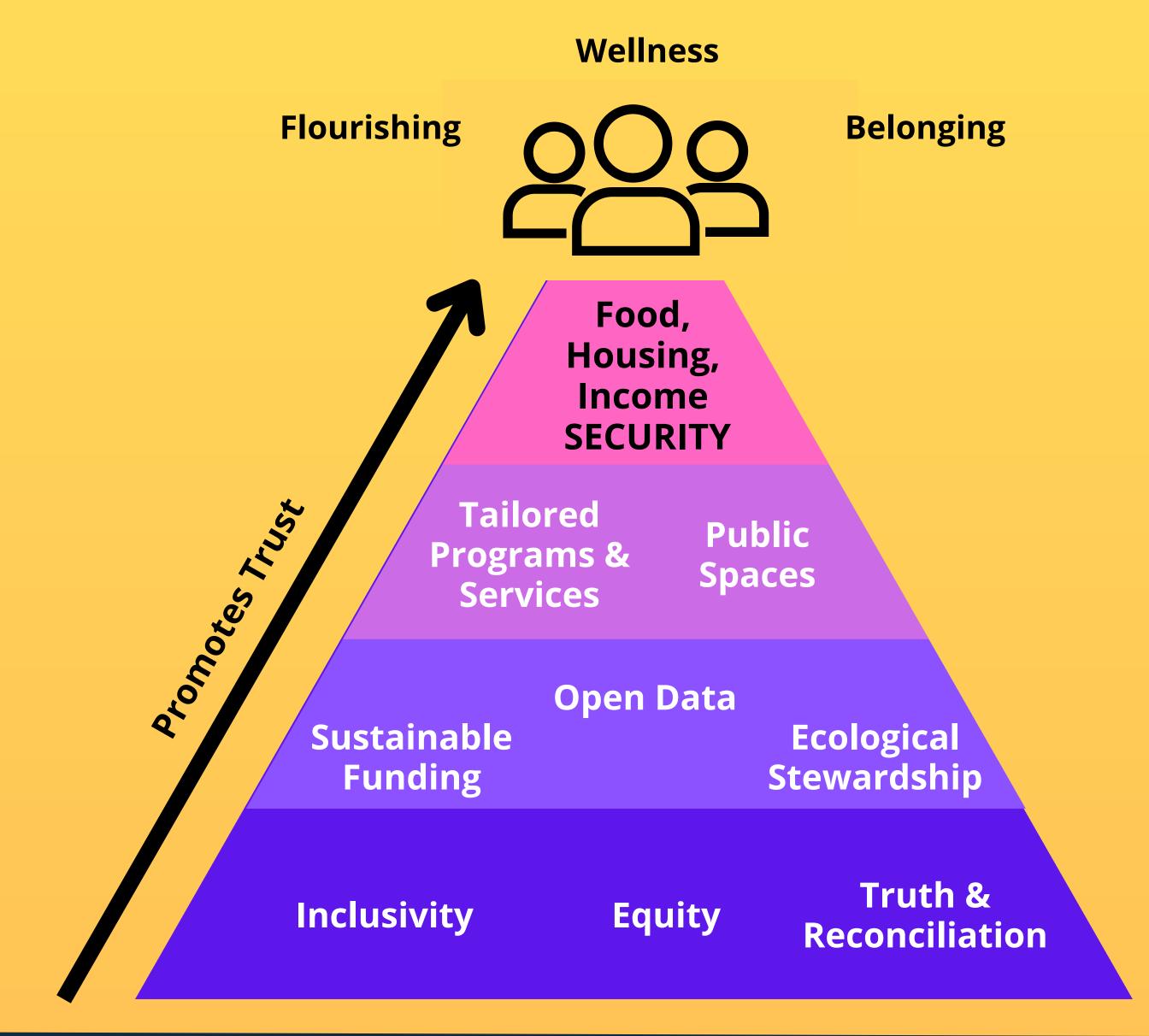
RESULTS 2 - Thematic Analysis

Multi-Level Determinants of Wellness and Sickness



The contemporary Canadian governance framework is grounded in capitalist, colonialist, and oppressive social structures, which create marginalization, insecurity, and sickness.

Contrarily, a new governance framework grounded in equity, inclusivity, and truth and reconciliation can promote security, belonging, wellness, and flourishing.



What Supports Wellbeing?

Nova Scotia Focus Group.

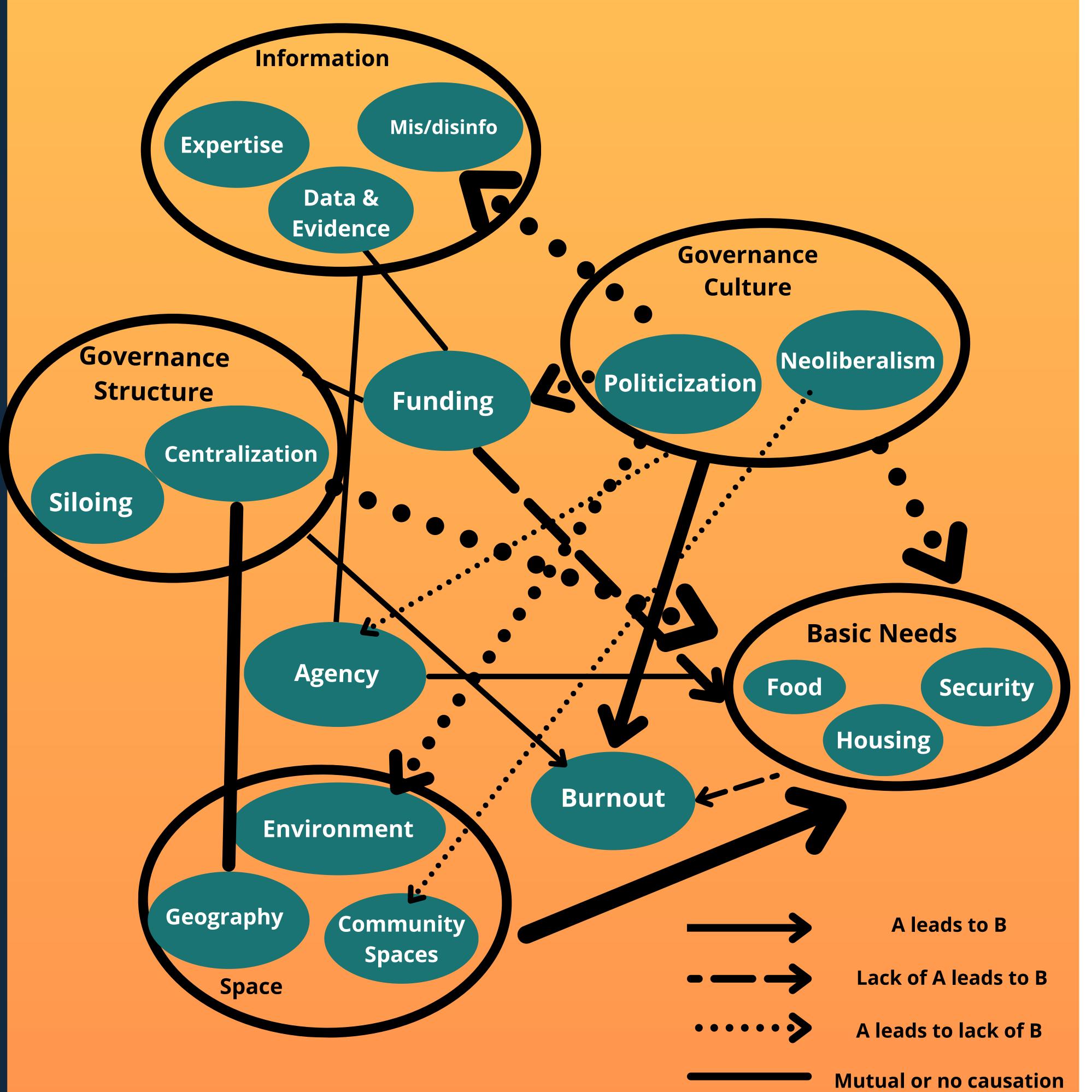
material history community entres inclusive material history culture canadian communities prevention healthy spirituality affordable education mutual churches compassion accessible national profits transportation inclusion resource events people diverse measures fires mental around places spaces centres art elders music health 2slgbtqia parks access food sharing eat mall histories built libraries free gender accessibility family beaches listen affirming nature housing empathy priorities green supports security reflective reclaiming gathering agencies traditions attainable honouring narrative employment celebrations displayed profit neighbourhoods home healthcare homelessness reciprocity intergenerational proactive recreation

All Focus Groups.

engagement differences ceremony employment inclusion accessibility primary active centres listening mutual écoute transportation indigenous informed communication nature affordable green water healing base savoir safety libraries elders liaison centers trails language family community social sharing learning empathy cultural care spaces health events income traditions home local culture partage listen compassion public reciprocity space healthcare entraide diversity programs healthy de accessible resources affordability reduction belonging programming sovereignty organizations 2-slgbtqla

Word clouds represent participants' responses to question 1 (see Methods) using real-time polling software. Larger text size correlates with the number of times a word was submitted by participants. Participants were permitted to submit multiple responses.

Thematic Relationships



RESULTS 3 - Notable Quotations

Public Health must be located and sustainably engaged in all communities

"Our Public Health sits in offices with phones and that is just such a waste of money and time, they can't do anything. Their hands are tied. They have all this knowledge, all this power, all this resource, and they can't use it appropriately with the populations that really need to be used, because they're not connecting with them." - Healthcare Worker Focus Group Participant

Participants want to be included and recognized in Public Health programs, policies and practices

"To be taken into consideration, even if I'm not a health professional, I'm a professional of my life. I'm a professional in my story. I am a professional in my community. I'm a professional in my neighborhood. Just because I don't have a doctorate doesn't make me a person who shouldn't be taken into consideration."

- Quebec Focus Group Participant

DISCUSSION

- Legacies of colonialism, capitalism, and oppression have deeply negative impacts on wellbeing
- Lack of representation, availability, accessibility, and affordability are barriers to trust in public health programs and services
- Local context and lived experiences need to be recognized as integral scientific evidence in public health decision-making

CONCLUSIONS

- Secure housing, food, and income should be regarded as the most pressing public health need
- Indoor and outdoor public space are crucial to promote community belonging
- Longitudinal, meaningful community engagement to co-create public health programs is vital to addressing local need
- Changes must take place in both the structure and culture of public health governance to promote trust and accountability

ACKNOWLEDGEMENTS

Thicker lines = stronger relationships

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