

SOCIAL ACCOUNTABILITY STATEMENT**Faculty of Medicine**

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Social Accountability Statement

The Dalhousie University Faculty of Medicine is committed to meaningfully engaging with, and being socially accountable to, its diverse, internal and external stakeholders.

In striving to meet its education, research, patient care, population health and advocacy mandates, the medical school actualizes this responsibility through the integrated, practical application of the following four social accountability lenses to its deliberations, decisions and actions:

- Equity
- Diversity, Inclusion and Cultural Responsiveness
- Community/Stakeholder Engagement and Partnering
- Justice-Fairness and Sustainability

EQUITY LENS

The commitment of the Faculty of Medicine to identify, and play a constructive role in addressing and reducing, unfair disparities among individuals, social groups and communities in their health outcomes and access to quality healthcare, education and employment.

Inequities typically result from unjust structural and systems factors within societies including the historical marginalization of particular social groups and their related experience of differing impacts of the socioeconomic, political and environmental determinants of health.

Development of the capacity to recognize and critically reflect on one's own values, beliefs, attitudes and 'social group advantage' assists leaders, faculty, staff and learners to collaboratively identify and address equity-related concerns and issues.

Examples of what this commitment to equity looks like in action/practice:

- Increase the admission of learners to the medical school from historically marginalized and disadvantaged communities within the Maritime provinces
- Support and accommodate 'difference' in the recruitment, hiring, promotion and retention of faculty and staff
- Equity training opportunities exist, and the participation of members of the medical school's internal community in these programs is strongly encouraged or mandated
- A designated individual is responsible for supporting and monitoring equity-related objectives and outcomes within the medical school
- The access of rural residents to quality health care is enhanced through the medical school's education and patient care programs and activities in rural communities
- Health outcomes in underserved local and global communities are improved through the medical school's participation in research and health policy development that addresses relevant social determinants of health

DIVERSITY, INCLUSION AND CULTURAL RESPONSIVENESS LENS

Diversity is valued and demonstrated within the Faculty of Medicine when a wide breadth of difference in people, ideas, perspectives and experiences is respected, affirmed and actively supported.

The inclusion of individuals, social groups and communities who identify with one or more dimensions of ‘difference’ enriches medical school environments and enables an appreciation of, and respect for, the complexity of the lived experiences of societal members.

Relevant elements/dimensions of diversity include: age, race, ethnicity, gender, sexual orientation/identity/expression, ability-disability, income, health literacy, religion/spirituality, geographical location and language.

The Faculty of Medicine responds in culturally competent, safe and constructive ways to the self-identified challenges of individuals, groups and communities with whom it engages in various capacities.

Examples of what this commitment to diversity, inclusion and cultural responsiveness looks like in action/practice:

- The appreciable diversity within the medical school’s community of leaders, faculty, staff and learners is reflective of the medical school’s situation within the Maritime provinces and its efforts to meaningfully engage with diverse stakeholder communities
- Leaders actively promote and support optimal inclusion and diversity
- A designated individual is responsible for monitoring, maintaining and enhancing the diversity of the medical school’s internal community
- Programs exist to promote and ensure intercultural competency and safety within the medical school’s programs and activities
- Educational cases, and other elements of the core curriculum, are responsive to the diverse communities that the medical school serves
- Members of local, diverse cultures and ‘communities of meaning’ are sensitively approached and actively enabled to participate in research activities, including the setting of the medical school’s overarching research agenda

COMMUNITY ENGAGEMENT AND PARTNERING LENS

The meaningful participation of its stakeholders, i.e., affected individuals, social groups, communities and collaborative partners, enhances and legitimizes the decisions made, actions taken, and policies developed by the Faculty of Medicine.

In this context, ‘communities’ are not strictly defined by geography or political considerations but, rather, are broadly interpreted as collectives of persons who are bound together in interdependent relationships by shared experiences, interests and goals. Connections with stakeholders and communities occur across a broad spectrum – from observation of community-based service learning activities to robust, reciprocal partnering where the Faculty and its multi-level partners identify and work closely together to achieve mutual education, patient care, population health, research and policy goals.

Dynamic interprofessional collaboration across a broad range of health and social science disciplines is an integral feature of this engagement. Effective partnering with communities/stakeholders is fostered by good governance and the use of transparent processes to guide deliberations, promote trust, and help justify decision making outcomes.

Examples of what this commitment to community/stakeholder engagement and partnering looks like in action/practice:

- A core set of stakeholders (individuals, groups and communities), including those who/that are directly impacted by the medical school’s mandate and operations, has been identified
- Learners and educators:
 - Observe health- and social-related activities within stakeholder communities
 - Engage with stakeholders in collaborative, community-based service learning programs
- Continual efforts are made to establish and maintain trust in the medical school’s relationships with its stakeholders/collaborators
- The direct and meaningful engagement of members of stakeholder communities in the medical school’s decision making and policy development processes is enabled through a collaborative, capacity-building approach
- Reciprocal-partnering arrangements have been established with core stakeholders, i.e., formal agreements are in place with some collaborative and/or strategic partners
- An appropriately-wide variety of professional groups participate in the medical school’s core functions and activities
- A focus/emphasis on participatory, community-based research is promoted and actively supported by senior leadership

JUSTICE-FAIRNESS AND SUSTAINABILITY LENS

The Faculty of Medicine accepts and embraces its responsibility to treat individuals, social groups and communities fairly and, in so doing, to meaningfully attend to differentials in power and context.

The anticipated benefits and burdens of decision-making are distributed in a fair manner, and differential treatment is justified by the transparent demonstration of relevant differences among individuals and groups in their legitimate needs/interests and opportunities. In the making of challenging allocation decisions, competing obligations to meet currently prioritized mandates and to prevent future depletion of limited educational, research and clinical resources are identified and carefully balanced.

Those working within the Faculty demonstrate that their deliberations take the perspectives and interests of local, historically marginalized and otherwise disadvantaged social groups into account. The Faculty's leadership in, and commitment to, the promotion of justice is comprehensive and multifaceted, extending from its internal community and organizational structures to communities and populations with which it is engaged across the globe.

Examples of what this commitment to justice-fairness and sustainability looks like in action/practice:

- Explicit attention is paid to the fair/just treatment of individuals, groups and communities in the medical school's day-to-day functioning
- Fair and open/transparent decision making processes and procedures are consistently used to distribute/allocate limited resources
- In the making of decisions at multiple organizational levels, careful attention is paid to the sustainability of the medical school's programs and financial/human resources
- When strategic decisions are made, thoughtful consideration is given to:
 - The anticipated benefits and burdens of various decision making options, and *to whom* these benefits and burdens will (likely) accrue
 - The interests and needs of historically marginalized and otherwise disadvantaged social groups
- When comparable individuals or groups are not treated the same, a justifying difference between/among them is identified and openly communicated
- 'Spaces' are intentionally created within the curriculum and other activities of the medical school for individual and collective reflection on social justice issues/matters
- The medical school actively supports significant local, regional and global justice initiatives