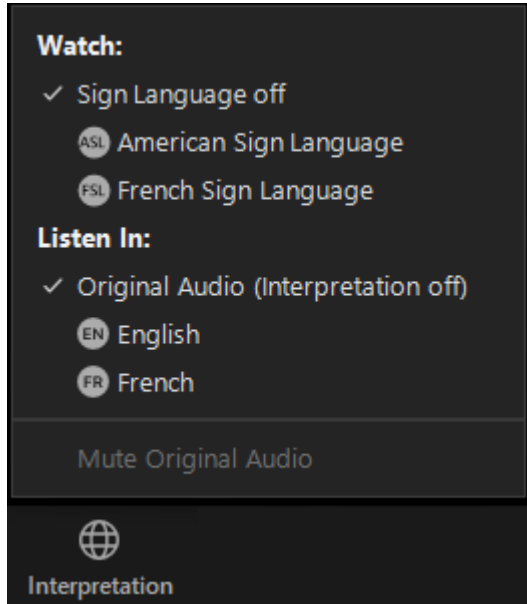


# Participate in the language of your choice.

# Participez dans la langue de votre choix.



## Interpretation | Interprétation

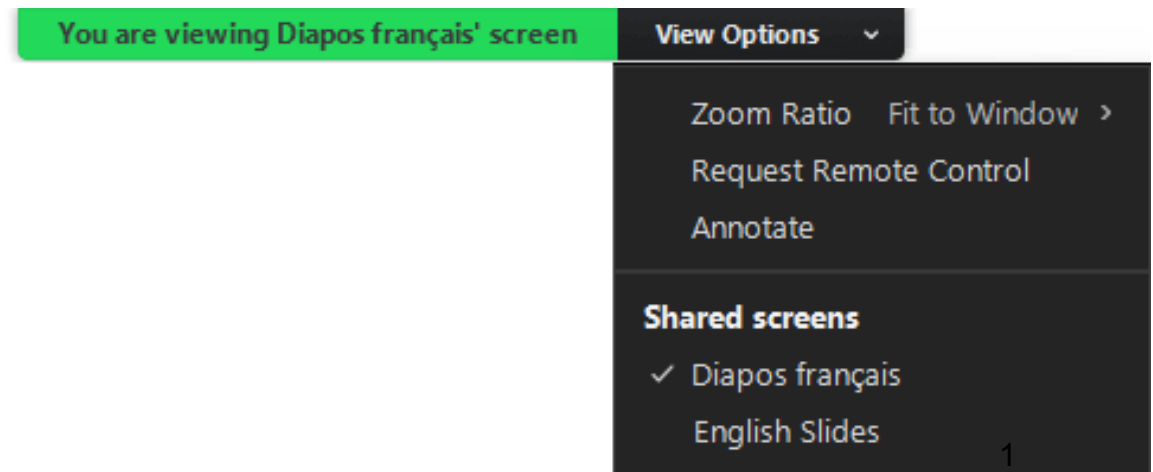
Interpretation can be activated from the Interpretation button on your Zoom toolbar

L'interprétation peut être activée à partir du bouton Interprétation de votre barre d'outils Zoom

## Slides | Diapositives

Choose which slides you would like to see from the View Options menu above this slide

Choisissez les diapositives que vous souhaitez voir dans le menu « Options d'affichage » au-dessus de cette diapositive





# Stories from the field: Inclusive Engagement

Equity, Diversity and Inclusion Virtual Learning Exchange

May 2, 2023



**Healthcare Excellence Canada honours the traditional territories upon which our staff and partners live, work and play. We recognize that the stewardship of the original inhabitants of these territories provides for the standard of living that we enjoy today.**

# Co-hosts



**Denise McCuaig**  
Executive Director,  
Healthcare Transformation and  
Capacity Building  
Healthcare Excellence Canada



**Carol Fancott**  
Director  
Patient Safety, Equity and Engagement  
Healthcare Excellence Canada

# Advisory Group

Denise  
McCuaig

Carol  
Fancott

Tammy  
Hoefler

Anila  
Sunnak

Jenny  
Gilbert

Hannah  
Moffat

Amy Ma

Karen  
Brooks

Maria  
Zaccaria-  
Cho

Juanna  
Ricketts

Payal  
Khazanchi

Nazret  
Russon

Jill Ritchie

# Speakers



**Laura "LT" Todd**  
Patient Partner,  
BC Mental Health and Substance  
Use Services



**Katie Mai**  
Senior Leader,  
Patient Experience and Community  
Engagement,  
BC Mental Health and Substance  
Use Services

# Speakers



**Ambreen Sayani**

Scientist, Women's College Research Institute;  
Equity-Mobilizing Partnerships in Community (EMPACT); Health Equity Expert Advisor to the Canadian Partnership Against Cancer



**Alies Maybee**

Patient Partner, Equity-Mobilizing Partnerships in Community (EMPACT)

# Disrupting Stigma for Better Care: The UNITE Project

Laura “LT” Todd, Storyteller and Patient Partner

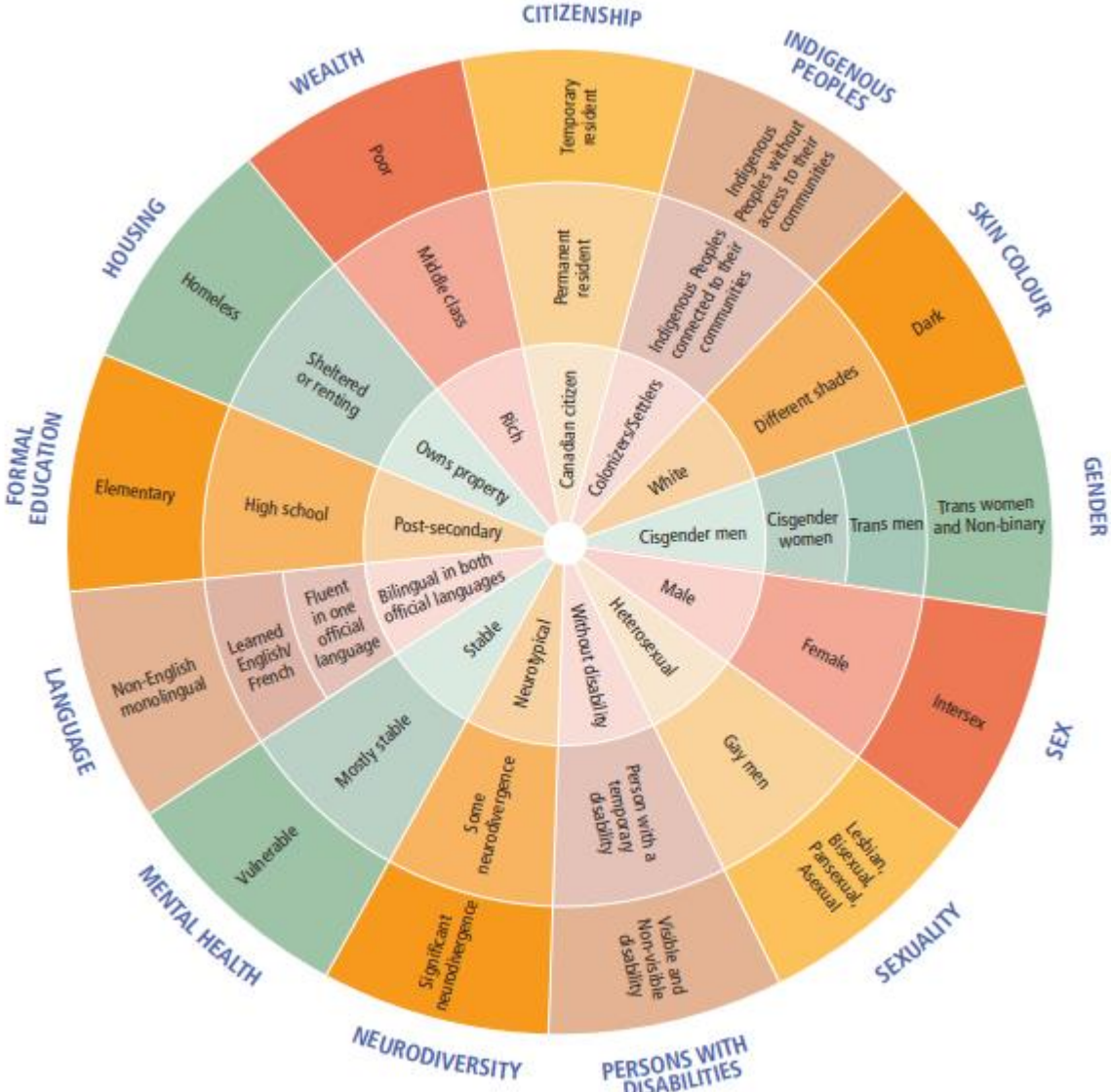
Katie Mai, Senior Leader of Patient Experience and Community Engagement



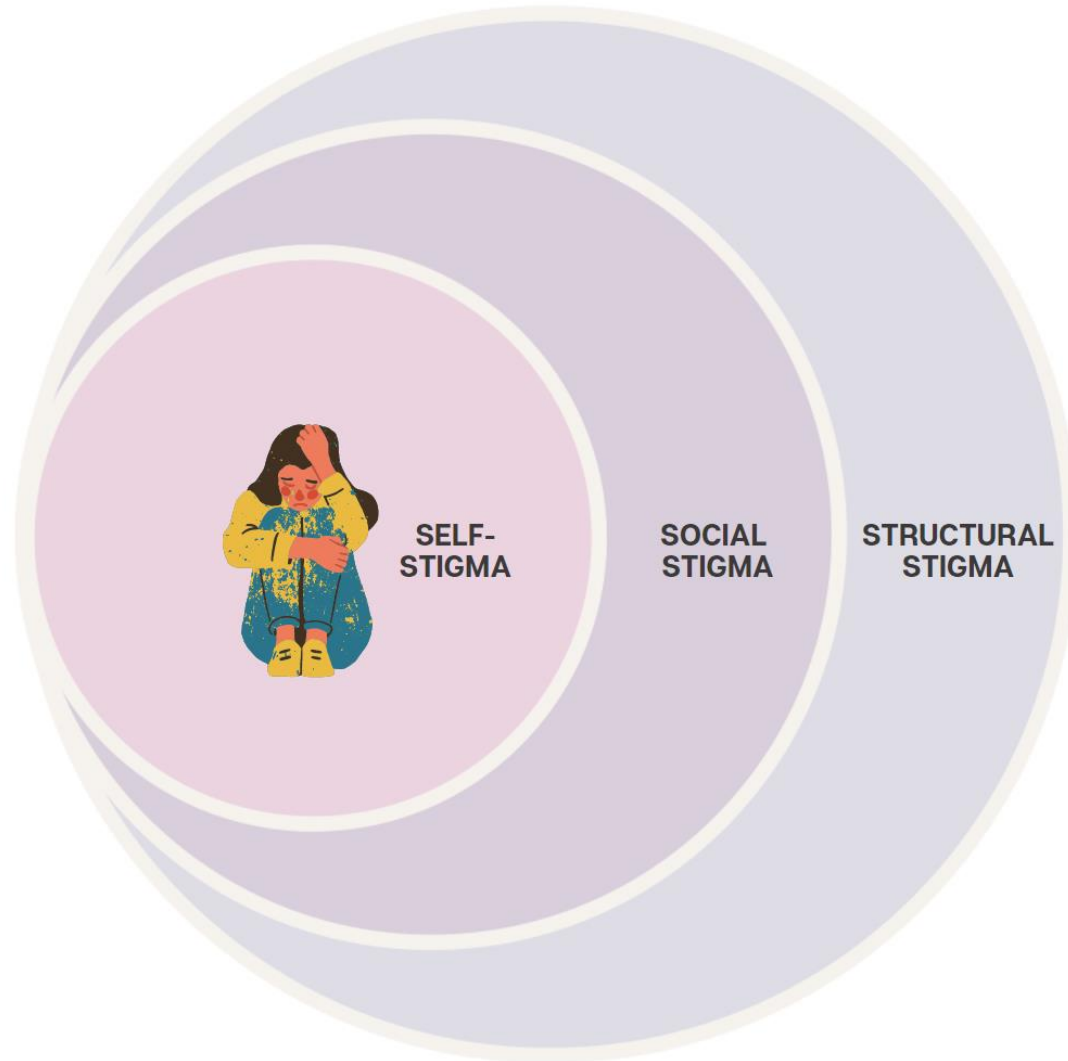
**BC MENTAL HEALTH  
& SUBSTANCE USE SERVICES**  
*Provincial Health Services Authority*



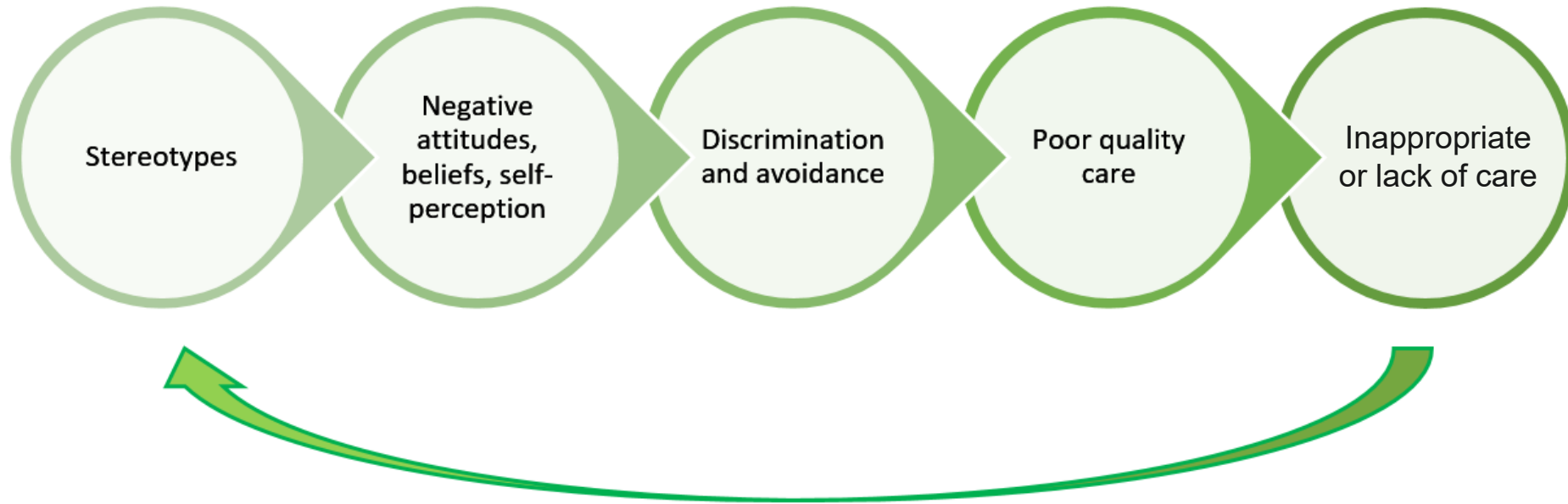
# Intersectionality Lens in Engagement



# Types of Stigma



# Cycle of Stigma



# Desired State: Breaking the Cycle



# Co-Design Process: UNITE Videos

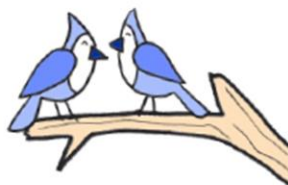
The image displays a Zoom meeting interface. On the left, a video editing software window is open, showing a hand-drawn illustration of two eyes with the text "Blinking in" above them. The Zoom meeting interface on the right shows a grid of video thumbnails for participants: Vannysa Chang, Caylee Raber (she/her), Malika Gill, Victoria (She/her), Charles Santa, Chris, and Katie Mai (she/her). A subtitle for Katie Mai reads: "I think people are relative to seek treatment, when they feel like they will be met with judgment. Someone can be really." The Zoom interface also includes a live transcription at the top and a control bar at the bottom with options like Unmute, Stop Video, Security, Participants, Chat, Share Screen, Polling, Pause/Stop Recording, Reactions, More, and End.

Source: Health Design Lab at Emily Carr  
University of Art and Design





# UNITE VIDEO DIALOGUE COMPANION



## Welcome!

Stories have the power to create change and foster understanding across differences of experience and perspective. By inviting us on an emotional journey, stories prompt us to question assumptions while sparking ideas of what might be possible.

We invite you to consider that...

- ...we all face challenges.
- ...change is possible.
- ...healing is attainable.
- ...recovery is a reality.

### WHY ADDRESS STIGMA?

Challenging stigma can reduce barriers related to accessing housing, employment, and appropriate medical care. Reducing stigma extends dignity and compassion while undermining assumptions and judgements. Stories can foster an environment where shame doesn't have a chance to grow, where diversity is celebrated, and where change unfolds.

—Charles, Chris, LT, Nicolas & Victoria  
Storytellers and Lived Experience  
Strategic Advisors 

“Real dialogue depends on us being passionately committed to our own world, and simultaneously, passionately interested in other worlds. It is possible to work for the realization of our values and interests, but to do so in a way that remains continuously open to inquiry and dialogue.”

—Margaret McKee

## SPIRIT OF DIALOGUE

Dialogue is a way to create trust and bridge divides among people. Through dialogue, simplistic explanations are replaced by greater awareness of complexity and increased empathy for the challenges others face. Different perspectives and values can be expressed, heard and understood.

Dialogue is not a method but an orientation to “being-with” other people that involves openness and a willingness to push beyond discomfort.

For more resources on dialogue, visit [\(link\)](#).

## 3 MOVEMENTS OF DIALOGUE

1. Come together by carefully creating the container (setting or situation) in which people can truly **listen to one another as equal participants**. Nurture understanding and trust by identifying preconceptions and committing to openness.
2. **Focus on building relationships** rather than on sharing information or problem solving. Encourage participants to get curious and to seek to learn from others' experiences. When we do this well, learning and problem solving follows.
3. **Explore questions together** with openness and curiosity rather than promoting our own position. Learning is not so much about being taught answers but being exposed to good questions. Genuine questions open up possibilities.



## Applying Dialogue

Each of the UNITE videos can be used to stimulate dialogue. The prompts below offer one way to start dialogue after viewing each video. It is often a good idea to remind participants about the nature of dialogue (see previous page). Complex issues that divide our communities can be addressed when we come together in a spirit of openness and curiosity, with a willingness to listen and understand the perspectives of others.

“One must not be afraid of a little silence... It is often a devastating question to ask oneself, but it is sometimes important to ask it – ‘In saying what I have in mind will I really improve on the silence?’”

—Robert K. Greenleaf

## DIALOGUE PROMPTS

### VIDEO ONE

*Stories of Experience*



- What word, thought, phrase, or idea stands out for you after watching this video?
- How does it feel when someone doesn't trust you?
- Can you recall a time when your trust in someone shifted? How did it feel?
- What are the risks involved in trusting? Are those risks different for different people? How might we mitigate those risks?

### VIDEO TWO

*Standing in the Gap*



- What word, thought, phrase, or idea stands out for you after watching this video?
- How does it feel when someone believes in you? Or doesn't believe in you?
- How does it feel when you find it hard to believe in someone you care about?
- How might we help each other believe in each other?

### VIDEO THREE

*Overcoming & Healing*



- What word, thought, phrase, or idea stands out for you after watching this video?
- Reflect on a time when you changed something about yourself. How did it feel?
- Who or what supported the change? How did you experience that support?
- We all tell ourselves stories about our life and about who we are. How has changing helped you re-write your life story?

## CLOSING

How has this experience of dialogue impacted you?

Share with your dialogue group or by visiting [\(thought exchange link\)](#)

“The essence of a question is to open up possibilities and keep them open.”

—Hans-Georg Gadamer



BC MENTAL HEALTH  
& SUBSTANCE USE SERVICES  
Provincial Health Services Authority







Thank  
you!

THE  
UNITE  
PROJECT



All of this was  
integral  
to finding  
my voice.





# EMPaCT

Equity Mobilizing Partnerships in Community

**WCHI** WOMEN'S  
COLLEGE  
HOSPITAL

## Stories from the field: EMPaCT

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Presentation for: Healthcare Excellence Canada

Alies Maybee and Dr. Ambreen Sayani

2<sup>nd</sup> May 2023

# We would like to acknowledge...



1. **WCH** for the support and willingness to innovate, change process and policy to allow for newer models of patient engagement
2. **CIHR** – Patient-Oriented Research – Transition to Leadership Stream Award for grant funding to support this work
3. **OSSU** (Ontario Strategy for Patient-Oriented Research Support Unit) -- Engaging Multi-stakeholders for Patient Oriented research Wider Effects & Reach (EMPOWER) Award for seed funding to co-develop EMPaCT



CIHR IRSC

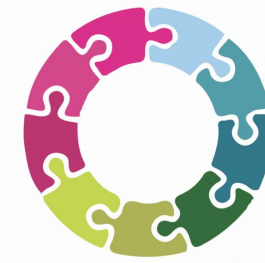
Canadian Institutes of Health Research / Instituts de recherche en santé du Canada

Strategy for Patient-Oriented Research



# Agenda

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1. What is EMPaCT
2. The inclusive engagement story
3. Taking action

Equity-Mobilizing Partnerships in Community  
(EMPaCT)

**Inclusive patient engagement**

# What is EMPaCT?



## The Diversity Jigsaw



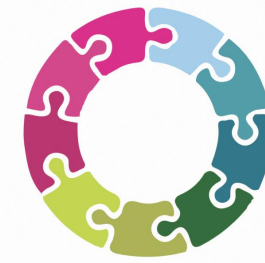
Equity-Mobilizing Partnerships in Community (EMPaCT) is a patient engagement model co-designed to:

- centre the voices of diverse community members
- build capacity for inclusive and impactful partnerships

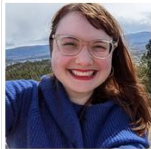
Source: Connecting the Pieces, EMR Alliance

Sayani, A et al. and the members of Equity-Mobilizing Partnerships in Community (2022). Equity-Mobilizing Partnerships in Community (EMPaCT): Co-Designing Patient Engagement to Promote Health Equity. Healthcare Quarterly, 24(Special Issue).

# Who we are



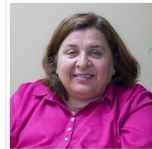
Fatah Awil



Emily Cordeaux



Ryan Hinds



Tara Jeji



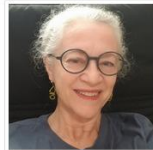
Kelly Wu



Omar Khan



Bee Lee Soh



Alies Maybee



Desiree Mensah



Linda Monteith  
Gardiner



Mursal Musawi



Mar Rathbone



Jill Robinson



Ambreen Sayani



Stacey Sterling

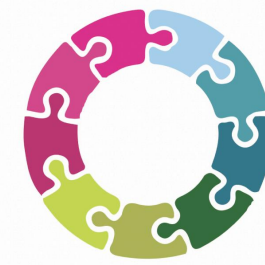


Dean Wardak

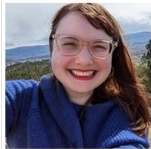


Victoria Garcia

# United by a shared value



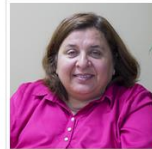
Fatah Awil



Emily Cordeaux



Ryan Hinds



Tara Jeji



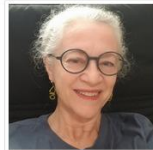
Kelly Wu



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Bee Lee Soh



Alles Maybee



Desiree Mensah



Linda Monteith  
Gardiner



Mursal Musawi



Mar Rathbone



Jill Robinson



Ambreen Sayani



Stacey Sterling



Dean Wardak



Victoria Garcia

**If we want an inclusive health system that is socially just and fair for all, we need to hear from people who have diverse lived experiences and apply a health equity lens to everything.**



# Creating impact since January 2021



Impact Chart: based on the Canadian Academy of Health Sciences Framework of measuring impact from investments

Building capacity		Advancing knowledge		Informing decisions	
Members of EMPaCT	17	Publications	3	Impact-Partnerships	13
Sources of grant funding as PI *granted to Sayani, A	3	Presentations	10	Impact-Partners engaged	35
Awards	2	Workshops	3	Hospitals served	6
		Digital videos	3	Research teams engaged	13
		Technical reports	17	Provincial-level decision-making	3

**This is phenomenal. There is so much for us to learn and unpack here. Thanks again, terrific experience for US** — Decision-maker, Hospital Research and Policy Project

**Thanks so very much for taking the time to do this work. We are so appreciative. It is amazing work that your team is doing!**  
— Decision-maker, Hospital Practice Project



Disrupting the way we do patient engagement

# The story

# Classic patient engagement



# Classic approach



## Councils, pools and projects

- Recruited and hosted by the organization
- Time limited
- Not always compensated

Patient councils



Pool of patient partners



Project table with Patient partner



# Challenging assumptions

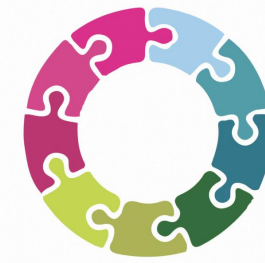
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- Whose voices are missing?
- Who is excluded?
- Why does that happen?
- What can we do?



# Two heads are better than one



Scientific partner:  
Ambreen Sayani



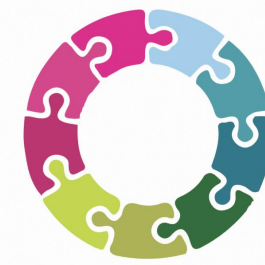
Patient partner:  
Alies Maybee

Language and culture

Place and space

Practical considerations

# Intersectionality



Patient partner, Alies Maybee



THINKING...



Scientific partner, Ambreen Sayani

# Taking action...



**EMPaCT**  
Equity Mobilizing Partnerships in Community

**WCHH** WOMEN'S  
COLLEGE  
HOSPITAL

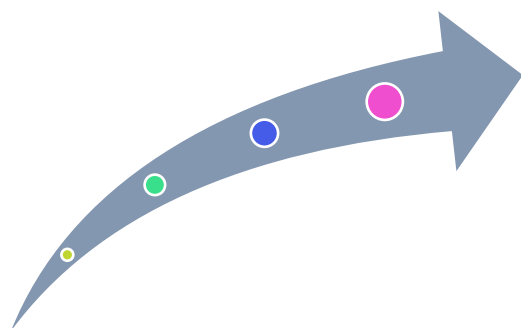


Transforming spaces and places of patient  
engagement

**Through action**

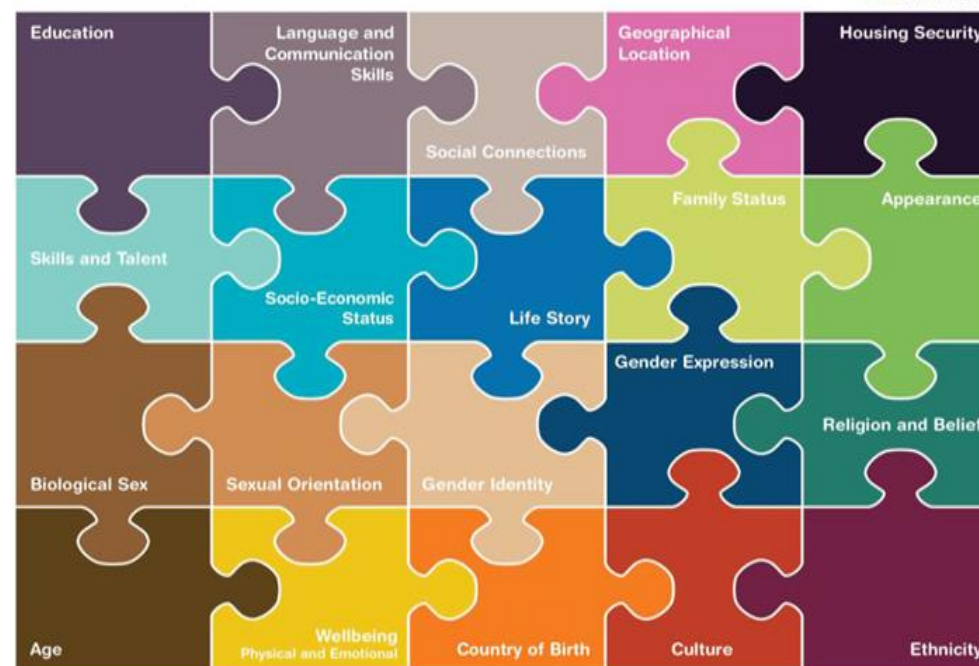


# Engaging inclusively



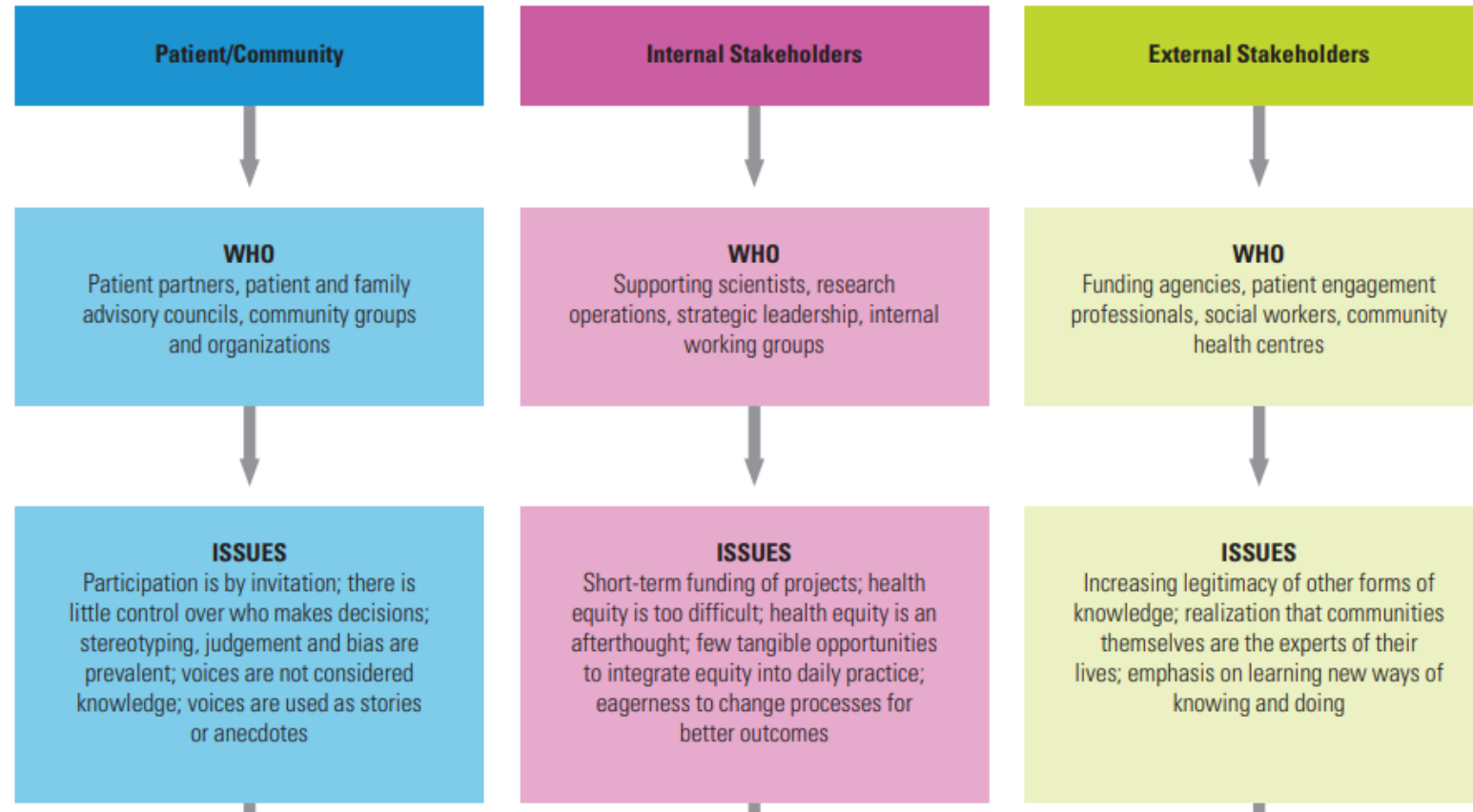
1. Equity-oriented outreach;
2. Trauma-informed trust building

## The Diversity Jigsaw

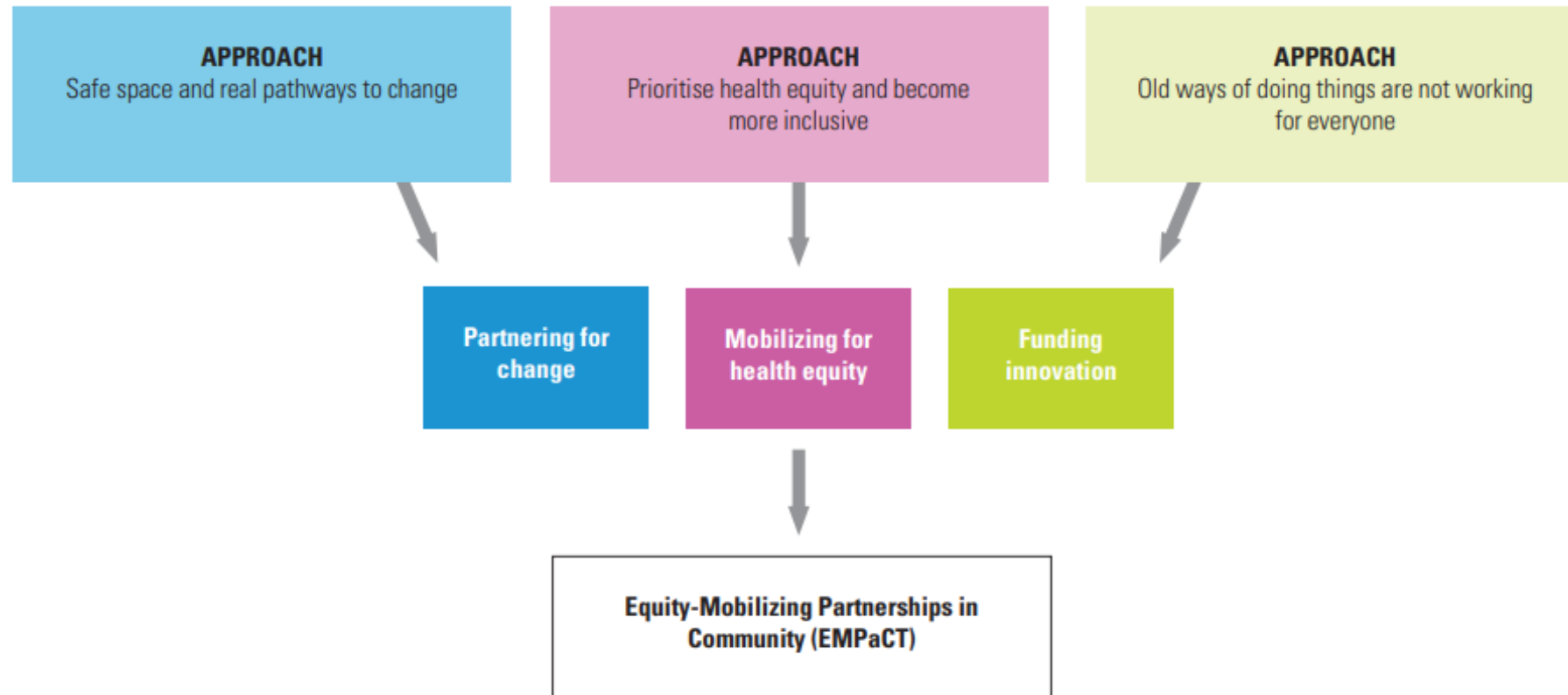


Source: Connecting the Pieces, EMR Alliance

# Listening and learning



# Finding intersecting opportunities



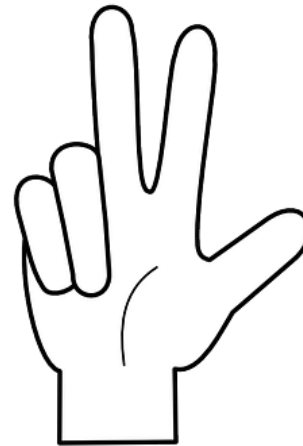
# Building capacity for change



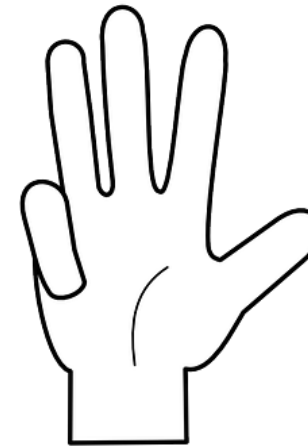
Thinking about the **CONTEXT** of the project



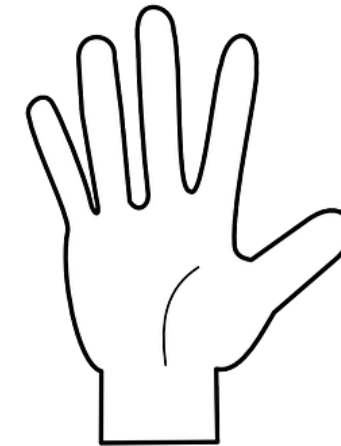
Thinking about the **PROJECT**



Thinking about **CHANGE**



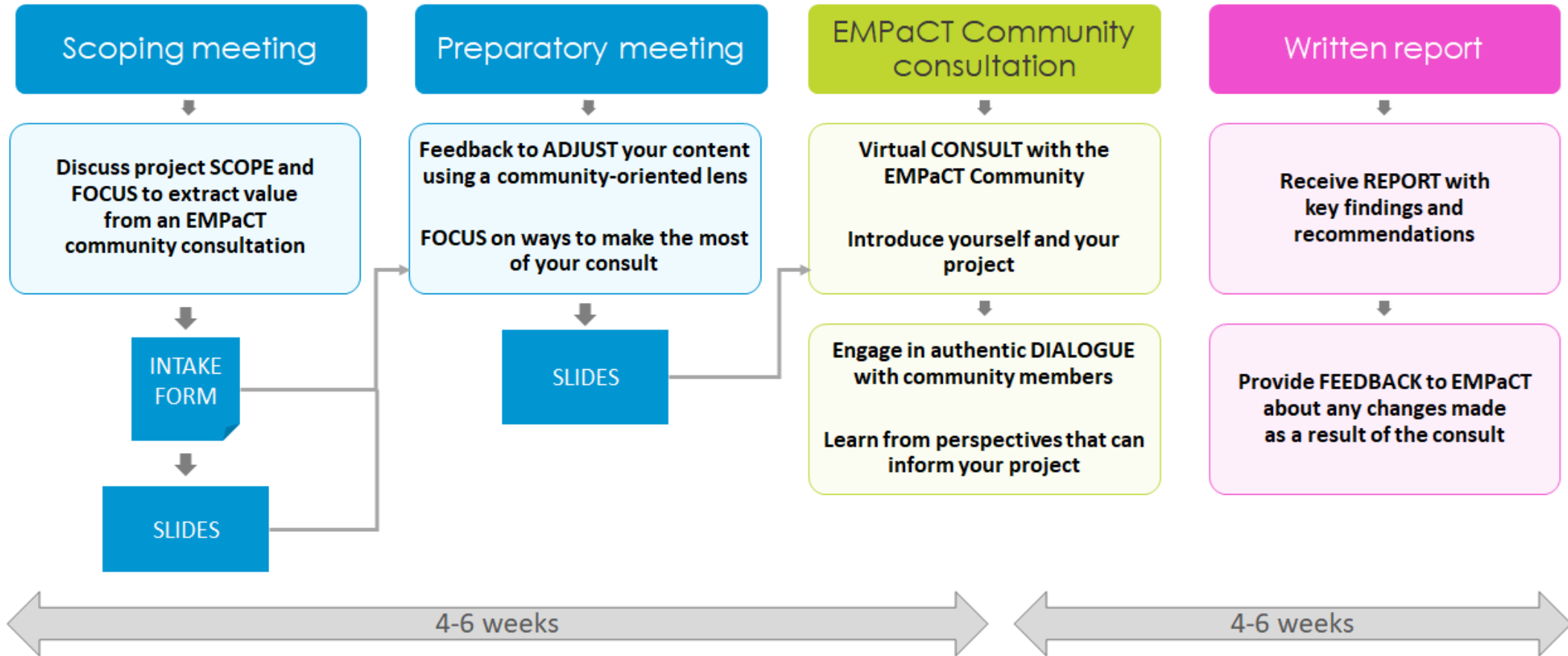
Thinking about **RECOMMENDATIONS**



Thinking about **COMMUNICATING**

## EMPaCT's five steps to a HEA (Health Equity Analysis)

# Partnering for impact



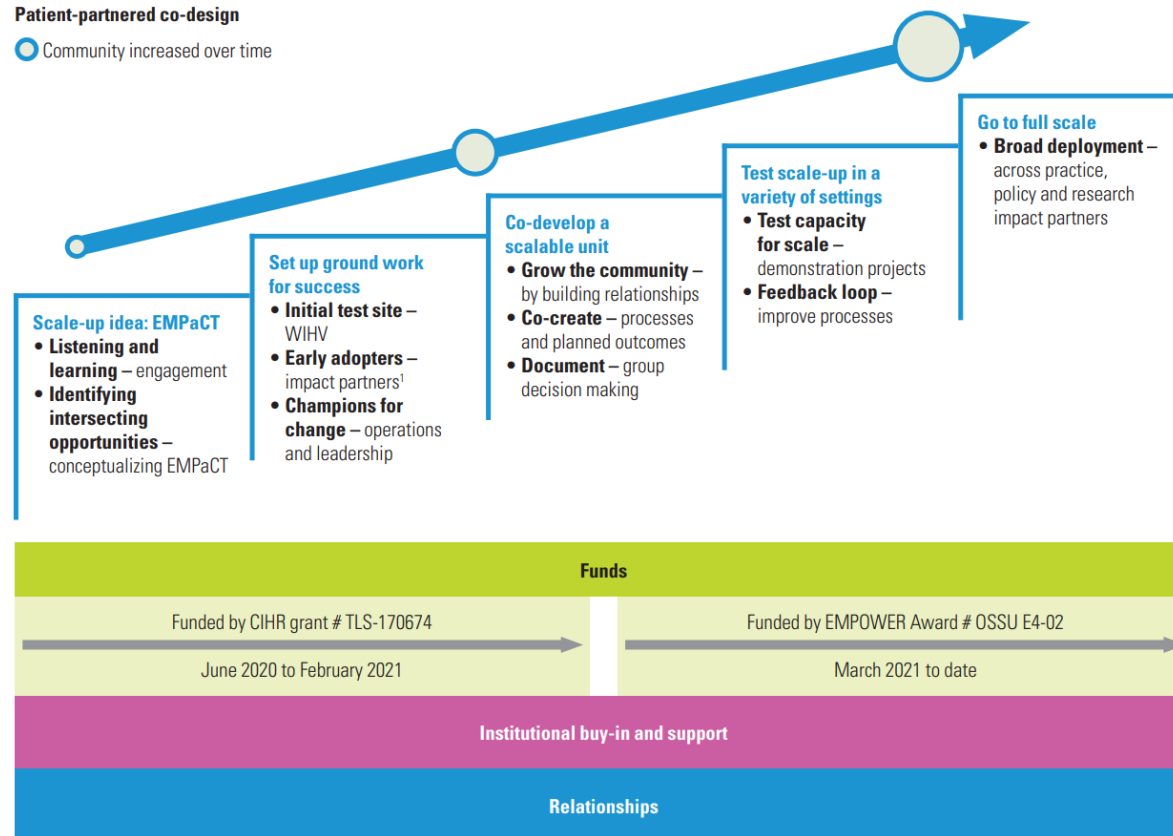
# Co-designing for success



**Framework of going to full scale for EMPaCT, based on the IHI Framework for Going to Full Scale and the underlying foundations for success**

**Patient-partnered co-design**

● Community increased over time



<sup>1</sup> Impact partners = policy makers, health/social service administrators and/or research collaborators interested in engaging with EMPaCT.



# Creating a health equity movement



Developing  
a shared  
analysis



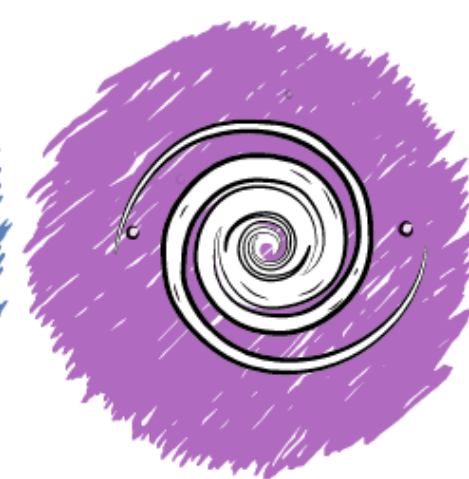
Sharing  
power with  
communities



Building  
community  
alliances



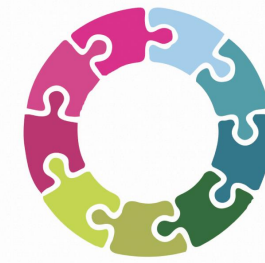
Changing  
the  
conversation



Building a  
health  
equity  
movement

\*Adapted from the Strategic Priorities of the Human Impact Partners Project

# Learning from EMPaCT



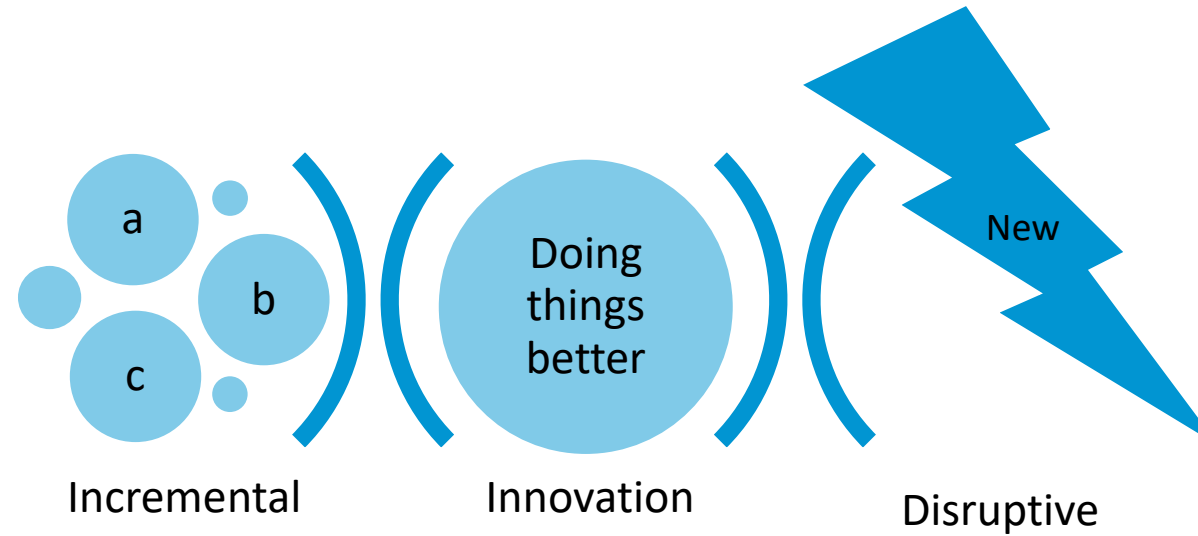
## 5 key principles for building inclusive and diverse partnerships with patient and communities

1. Use an equity-oriented approach
2. Co-build sustainable safe spaces
3. Consider issues of accessibility
4. Build capacity one relationship at a time
5. Do no harm



In summary

# Disruptive innovation: EMPaCT



# What can you do?

---



**EMPaCT**  
Equity Mobilizing Partnerships in Community  
**WCHH** WOMEN'S  
COLLEGE  
HOSPITAL

1. Join the health equity movement – engage with EMPaCT
2. Create your own movement – learn from EMPaCT

Look us up: <https://www.womensresearch.ca/empact/>

[Ambreen.sayani@wchospital.ca](mailto:Ambreen.sayani@wchospital.ca)

 @SayaniAmbreen

[Alies.maybee@gmail.com](mailto:Alies.maybee@gmail.com)

 @amaybee

**Thank you!**

# Equity, Diversity and Inclusion Virtual Learning Exchange

## Stories from the field: Inclusive Care

Date and time: June 6, 2023, 12:00 – 1:00 pm ET

Join us to explore practical approaches to fostering more equitable engagement with a broad diversity of people in the health system. This session features two examples of initiatives designed to address inequity and offer more inclusive care: Doctors of the World and Caring Community.

## Speakers

Pénélope Boudreault, Infirmière Directrice des opérations nationales Médecins du Monde Canada

Antoine Boivin, Chairholder of the Canada Research Chair in Partnership with Patients and Communities

Ghislaine Rouly, Patient Partner, Caring Community