

# Relational Equity: Engaging in Co-Creation of Values through an EDI Lens

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## Background

- Relational equity is: "something that is carefully cultivated and preserved by those who desire to influence others"; crucial for the retention of patient-partner members over time; and the establishment of trust between community members and the Network partners.
- During the transition phase for restructuring the Pan-Canadian Patient Council, the need to co-create values and a protocol around engaging patient partners became apparent with the council's history engaging in CPCRn governance amongst researchers, patient partners and allied professionals.
- The Pan-Canadian Patient Council held monthly meetings focused on orienting the Patient Council on priorities and planning an event to build relational equity within the Council.

The objectives of co-creating these values and the protocol were to:

- 1) Describe relational equity and why it is important to the members of the Pan-Canadian Patient Council of the Canadian Primary Care Research Network (CPCRn);
- 2) Identify and name the values co-created by the CPCRn's Pan-Canadian Patient Council along with a protocol for the establishment of relational equity across the CPCRn.



## Methods and Approach

- The overall design was informed by the integration of community-based participatory research and transformative action research. This approach facilitated the process of co-creation of identified issues to the forefront while utilizing the strengths and contributions of the community.
- The process of co-creating values evolved from transformative action research and utilized an Indigenous process of a **talking circle** which was led by a Métis woman, mother and grand-mother and facilitated by one of the Co-Chairs of the Patient Council.
- A talking stick which was gifted to one of the Co-Chairs of the Patient Council was utilized in the facilitation of the talking circles. A talking stick is considered an ancient and powerful communication tool so that only the person holding the talking stick has the right to speak and all others must listen quietly and respectfully.



- Given that this is a Program Evaluation, it is exempt from Ethical Review based on Article 2.5 of the Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada, Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, December 2022.

## Equity, Diversity and Inclusion (EDI) Consideration

- Council members come from diverse: backgrounds; geographic locations; genders; ethnicities; languages; and disabilities.
- During the meetings, we ensured that everyone knew that all voices are heard, all voices are supported to be heard and all voices are equal.

## Findings

- As a result of the Patient Council meetings combined with input from the talking circles, discussions and the post-event survey, the Patient Council **established the following values: trust, kindness, respect and humility.**
- A cultural safe environment will be established to ensure members of the Patient Council are given an opportunity to provide input and be heard. Talking circles can be utilized to ensure everyone's has an opportunity to provide input and have their voice heard.



## Expected Contributions

- The co-creation of the governance structure for the Patient Council brought together the members in a way that addresses the potential power imbalances by building a cohesive understanding of relational equity and ways to address it, within and external to the Patient Council.

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