

# Mapping Policy Pathways for Community Action on Urban Respiratory Health Inequities in Children and Youth

## Study Sites

Edmonton, Alberta & Winnipeg, Manitoba

## Who is Doing the Study?

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## The Problem

Millions of Canadians are affected by respiratory diseases, including asthma and tuberculosis (TB). Children and adolescents living in poverty are at an increased risk of developing these conditions. Support for low-income children/adolescents with respiratory conditions is important but currently lacking.

## Our Key Questions

- 1) What are low-income children/adolescents' and their parents' perceptions of programs and services that are currently available and what are their preferences for supportive and innovative multi-level interventions?
- 2) What services and programs are currently available for low-income children/adolescents and parents affected by respiratory health conditions from the perspective of service providers and what do they recommend for supportive multi-level intervention?
- 3) What are program planners' and policy influencers' recommendations for policies and programs that address health inequities experienced by low-income children/adolescents and families affected by respiratory health conditions?
- 4) What strategies would engage low-income people living with respiratory conditions in program and policy planning?

## What We Seek to Accomplish

- 1) Speak with low-income children/adolescents with chronic lung conditions, their parents, as well as those who work with and for them -- service providers, program planners and policy influencers -- in identifying gaps and inequities in existing programs and policies in order to inform the design of supportive programs;
- 2) Use the information gathered to improve current health programs and policies.

## How We Seek to Accomplish These Goals

### Phase 1:

We will conduct group interviews separately with 30 low-income older children/adolescents affected by respiratory health conditions (e.g., asthma, allergies, cystic fibrosis) in low-income and mixed neighbourhoods in urban centers in Alberta (AB) and Manitoba (MB) and their parents (n=30), to find out what programs and services are available and what types of support programs they would like to see in place.

### Phase 2:

We will also conduct group interviews with service providers and service planners (15 from Alberta and 15 from Manitoba); program planners/managers and policy influencers at local and provincial levels in health and related sectors about available programs and policies relevant for low-income children with respiratory health conditions and their parents and suggestions for future community-based interventions, and programs and policies in health-related sectors at provincial and local levels.

### Phase 3:

To ensure translation of knowledge to action, one face-to-face symposium engaging provincial/regional program planners and policy makers from public health and low income organizations in Winnipeg (n=15) and another in Edmonton (n=15), to share the group interview results to seek input on the implications for multi-level program and policy interventions that benefit low income children/adolescents with chronic respiratory conditions and their families.

Next, we will host a symposium for program planners and policy influencers at national level via videoconference to share the study results and to seek input on the implications for innovative multi-level programs and propose policy pathways that could address respiratory health inequities.

## Community Involvement

Group interviewers/dialogue facilitators will be low-income peers in order to enhance credibility and acceptability. Site Community Advisory Committees, building on partnerships developed through previous studies of people living in poverty, homeless youth and children with asthma and allergies and a National Advisory Committee will be created. Members will include program planners, public advocacy organizations and policy influencers at national levels.