




## Strengthening the Capacity of CHNs to Advocate for Social Justice & Policy Change to Reduce Inequities in Health

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## KEY LEARNING OBJECTIVES



- Participants will:
  - Describe what is known about the theory-practice gap in relation to CHNs' role in advocacy for social justice and policy change that addresses social determinants of health inequities
  - Identify current and potential CHN advocacy actions to promote social justice and policy change that addresses social determinants of health inequities
  - Identify necessary skills and potential strategies that can strengthen capacity of CHNs to maximize their expected role in advocacy for social justice and policy change that addresses social determinants of health inequities


## WORKSHOP OUTLINE



- Overview of CHNs' role in advocacy for social justice & policy change to reduce health inequities
- 'Gallery Walk' and report back
  - Examples of advocacy for social justice/policy change are/could CHNs be involved in
  - Knowledge/skills that CHNs require to engage in these advocacy activities
  - Innovative strategies for strengthening CHNs' capacity to engage in these advocacy activities
- Large group discussion & wrap-up

## DEFINING "ADVOCACY"

"Advocacy: Interventions such as speaking, writing or acting in favour of a particular cause, policy or group of people....Advocacy often aims to enhance the health of disadvantaged groups..."  
[PHAC, 2007, Core Competencies, p.9; see ]



\* Advocacy may involve lobbying politicians, but it is much broader than that\*

## WIDE RANGE OF ADVOCACY STRATEGIES

- use of research, data, community and impact assessment to build a case or draw attention to an issue
- grassroots lobbying (attempting to influence the public to take action on specific legislation)
- use of mass media and multi-media to raise awareness, (re)frame issues, generate debate
- letter writing to legislators or other government employees who participate in lawmaking
- celebrating days to bring about public awareness
- personal and professional networks
- community mobilization and capacity building through, for example, coalitions of interest around defined issues, petitions, public meetings, presentations, and seminars
- contesting the way that a problem is constructed or defined by an opposing group
- acts of resistance to changes or policies considered damaging to public health
- direct political lobbying, litigation

[see also: 'Advocacy Wheel' in PHAIWA (2013), listed in 'Resources' slide]


## SUPPORT FOR CHN ROLE IN ADVOCACY FOR SOCIAL JUSTICE & HEALTH EQUITY-I

- Strong theoretical support for CHNs' role as an agent for social change:
  - Commitment to 'emancipatory ethic' (Falk-Rafael, 2005a)
  - 'Critical caring' (Falk-Rafael, 2005b)
  - Policy advocacy re: social equity (Daiski, 2005)
  - 'Bringing about social change' to address child & family poverty (Cohen & Reutter, 2007)
  - Witnessing social justice downstream and advocating for health equity upstream (Falk-Rafael & Belker, 2012)
  - Community health nursing advocacy (Ezeonwu, 2015)

### SUPPORT FOR CHN ROLE IN ADVOCACY FOR SOCIAL JUSTICE & HEALTH EQUITY-II

- Strong professional/regulatory support**
  - Advocacy for public policies that address SDOH, and for 'social justice'; ethical responsibility (CNA, 2005; 2006; 2008)
  - Advocacy a 'standard of practice' for CHNs (CHNC, 2011)
  - Advocacy for SJ a discipline-specific 'core' Public Health competency (CHNC, 2009)
  - Advocacy/action on environmental & socioeconomic determinants of health & health inequities part of CHNs' health promotion role (CPHA, 2010)

### BUT EVIDENCE OF THEORY → PRACTICE GAP




- Excellent examples of policy advocacy by nursing organizations (e.g., CNA, RNAO)
- However, empirical evidence suggests that CHNs' advocacy activities mostly at the individual client/case level
- More limited involvement in broader 'community development,' 'community activism,' or 'social policy reform' advocacy activities

(Cohen, 2006; Cohen & McKay, 2010; Falk-Rafael & Betker, 2012)


### BARRIERS TO CHN ROLE IN ADVOCACY FOR SOCIAL JUSTICE & HEALTH EQUITY

- CHNs' actual/perceived lack of skills
- CHNs' hesitance about engaging in an activity that they view as 'political'
- Lack of time due to mandatory programs
- Lack of support/encouragement and/or role modeling from managers
- Organizational philosophy does not promote this type of activity



### BARRIERS (cont'd)

- Narrow job description
- Workload measures don't capture advocacy activities
- Limited understanding/recognition (from other health professionals/public) about potential role of CHNs in advocacy for SC



(Cohen, 2006; Cohen & McKay, 2010; Falk-Rafael 2005a; Falk-Rafael & Betker, 2012)



### STRENGTHENING CHN ADVOCACY ROLE

[Network Café, CHNC conference, May 2008]

- Better preparation of new nursing grads in advocacy skills; theory not enough
- Utilizing professional organizations as an avenue for advocacy
- Building community capacity
  - Coordinating discussion groups with key stakeholders to identify social issues
  - Providing information to help direct community development initiatives



### 'GALLERY WALK'

- STATION #1**  
 What examples of advocacy for social justice/policy change are/could CHNs be involved in?
- STATION #2**  
 What knowledge/skills do CHNs require to engage in advocacy activities?
- STATION #3**  
 What are some innovative strategies for strengthening CHNs' capacity to engage in advocacy activities?

## FOR DISCUSSION...



- Which station was the most challenging, and why?
- If you could be 10 times bolder than you already are, what would the next step be for you to strengthen the capacity of CHNs (in your organization) to engage in advocacy for social justice and health equity?



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- Falk-Rafael, A. (2005b) Advancing nursing theory through theory-guided practice: the emergence of a critical caring perspective. *Advances in Nursing Science*, 28(1), 38-49.
- Falk-Rafael, A., & Betker, C. (2012). Witnessing social injustice downstream and advocating for health equity upstream: "the trombone slide" of nursing. *Advances in Nursing Science*, 35(2), 98-112.

## RECOMMENDED RESOURCES

- NCCDH (2015). *Let's talk advocacy*. [<http://nccdh.ca/resources/entry/lets-talk-advocacy-and-health-equity>]
- Public Health Advocacy Institute of Western Australia [PHAIWA] (2013). *Public health advocacy toolkit – Third Edition*. Curtin University, Perth. [<http://www.phaiwa.org.au/component/attachments/download/259>]
- Public Health Alliance for the Island of Ireland. (2007). *Public health advocacy toolkit*. [[http://www.cieh-nireland.org/uploadedFiles/core/policy/public\\_health\\_advocacy\\_toolkit\\_07.pdf](http://www.cieh-nireland.org/uploadedFiles/core/policy/public_health_advocacy_toolkit_07.pdf)]

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