

Using Situational Assessment and Identifying Priority Populations in Program Planning:

Evidence and Practice-based Planning Framework

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PUBLIC HEALTH

Learning Objectives

- **Share our attempt to incorporate situational assessment and identification of priority populations from the PHAS protocol into a planning framework**
- **Find out what other organizations think about this approach**
- **Discuss other considerations for addressing priority populations**

OPHS and Health Inequities

- **OPHS and PHAS protocol give direction**
- **Need to disaggregate “population”**
- **Respect the impact principle and do no harm**
- **Priority populations ⇒ narrowing health inequity gaps ⇒ achieving population health goals**



Another Planning Model?

What is unique about it?

- **Health inequities are the focus of planning**
- **Uses local and diverse evidence**
- **Examines accessibility of existing programs and how to reduce barriers**
- **Acknowledges various sources of evidence, research and practice, and engages the community and stakeholders**

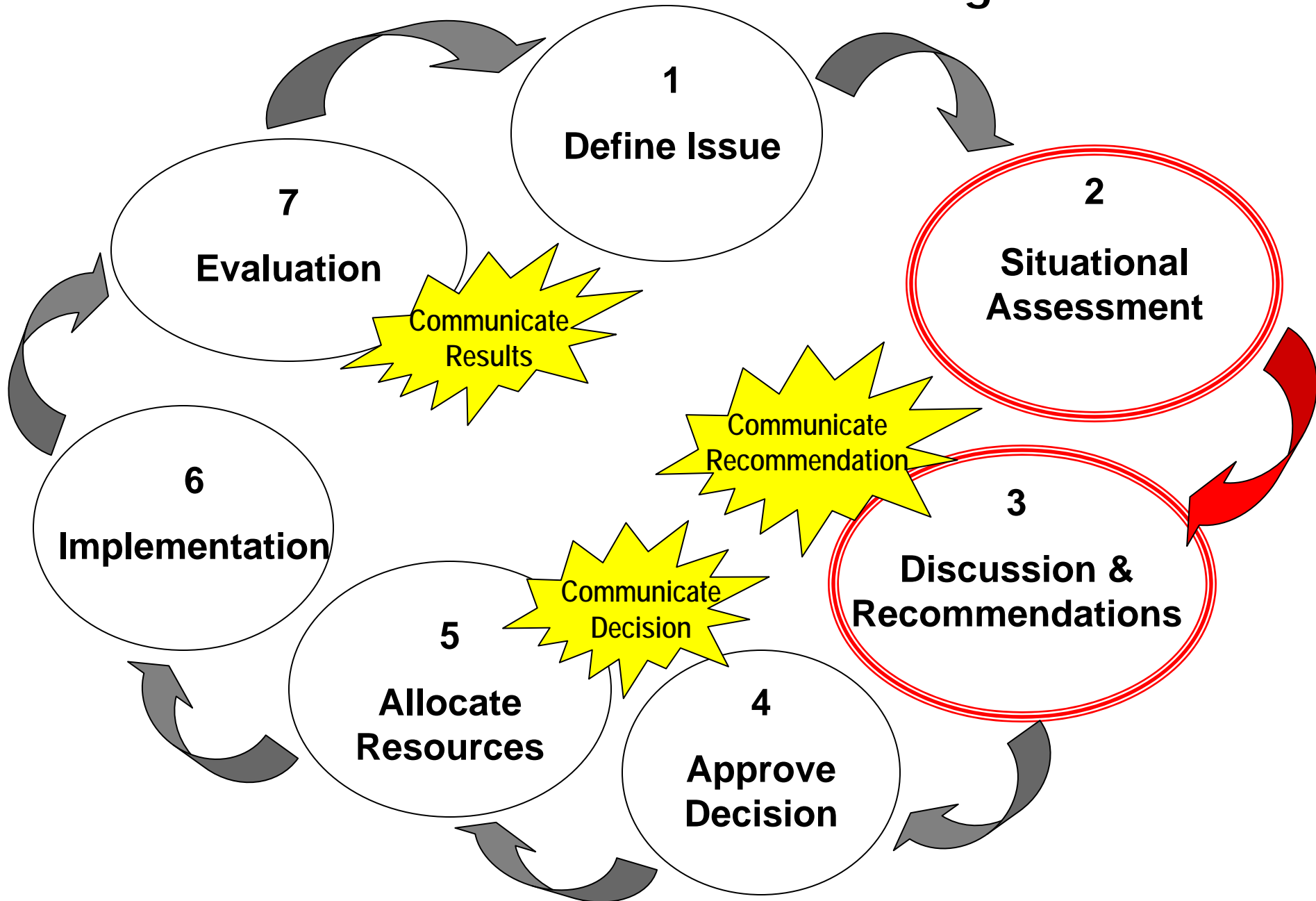


When would we use this model?

- **Creation, review, and modification of health equity focused policies and programs**
- **Not suitable for minor modifications of activities or minor program changes, however...**
 - **some stages and tools could be used for this purpose**



Evidence and Practice-based Planning Framework



Process to Determine Priority Populations within a Situational Assessment

- 1. Examine literature, local research, & evaluation results**
- 2. Examine local health data**
- 3. Analyze relationship between health indicators and social determinants of health (SDOH)**
- 4. Identify information gaps**
- 5. Engage key stakeholders and discuss:**
 - Findings
 - Local context
 - Identified priority populations and potential approaches
- 6. Determine priority populations and suitable practices**
 - Based on local need, impact, capacity & collaboration

Situational Assessment

1. Literature and Evaluation Results

- **Describe relationship between socio-demographics and health indicators, health risks, and service use**

Examples:

- **Who's at risk for poor oral health?**
- **Are women living on low-incomes visiting Early Years Centres?**



Situational Assessment

2. Local Health Data

- **Determine incidence of poor health outcomes or other health risk indicators**
 - e.g., low or high birth weight; injury rates
- **Data sources may include:**
 - **PH information systems, e.g., ISCIS, CCHS**
 - **Administrative information systems**
 - **Local/Regional planning documents**
 - **Neighbourhood-level data**



Situational Assessment

3. Analysis of Health Inequities

- **Analyze relationship between health indicators and SDOH to identify health inequities**
 - e.g. pregnancies by age ⇒ teen pregnancies
 - ⇒ teen pregnancies and low income
- **Understand current situation for specific local groups through qualitative inquiry**
 - e.g. low birth weight and low income
 - ⇒ low birth weight and immigration status
 - ⇒ low birth weight and history of oppression



Situational Assessment

4. Address Information Gaps and Engage Stakeholders

- **Does literature or practice suggest priority populations not identified through mapping SDOH and existing data sources?**
- **Gather additional information from:**
 - **Service providers**
 - Who are the populations they serve?
 - What are their health behaviours?
 - Who are and are not accessing services?
 - Who is not benefiting from programs and why?
 - **Identified populations/neighbourhoods**
 - What are their lived experiences and practices?
 - What supports & services would be welcome?



Situational Assessment

5. Analysis of the Community Context

- **Define process to engage key stakeholders in discussing results and examining local context**
- **Consider community & political context:**
 - **What current partnerships exist and should be maintained?**
 - **What are current trends that may provide opportunities or reflect best practices?**
 - **How ready is the community for the considered approach? Is there a need to further engage partners?**
 - **Are there approaches that have proven to work better than others for some priority populations (e.g. Aboriginal groups, immigrant groups, young mothers)?**



6. Determine Priority Populations & Suitable Practices

- **Review and discuss findings from all sources of evidence**
- **Review and discuss:**
 - **Community health needs**
 - **Mandate**
 - **Potential impact**
 - **Resources required**
 - **Capacity**
 - **Collaboration**
- **Decide on priority populations and most suitable practice**



Discussion

- **First Impressions?**
- **Would you use it? If yes, how?**
- **Is it doable? What would be easy? What would make it difficult?**
- **What other questions would you ask?**
 - **What else is important for using an equity lens?**



More on this Planning Framework and Related resources:

At this conference:

1. **Presentation: Using an Evidence-based Framework to review Prenatal Health Fairs in the Region of Waterloo**
2. **Workshop: How do I address health inequities in my Program Development: Using First Steps to Equity in Population Health Assessment, Planning, and Evaluation**

Related resources:

- **First Steps to Equity**
- **PHAS Protocol**
- **Input into Guidance Documents**
- **Region of Waterloo Website www.region.waterloo.on.ca/ph**



Location of Evidence and Practice-based Planning Framework on Region of Waterloo Public Health Website

Step 1:

- Go to www.region.waterloo.on.ca/ph
- Under “Resources” click “Partners and Professionals”

Step 2:

- Click on link: “Evidence and Practice-based Planning Framework – with a focus on health inequities”
- For a summary of why we need to work with priority populations and how this relates to population health, see link “Population Health Summary.”

For more information:

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