

Diversity in Patient and Family Engagement

You will need to plan an engagement that is accessible, safe, reflective of diversity and respectful for groups generally considered vulnerable. This could be people who are street-involved, under-housed, older adults, LGBTQ2S+, or people from a specific cultural group.



Hard-to-Reach or Hardly-Reached?

These are groups often called "hard to reach," but they are not. They are "hardly reached." When systems expect these groups to fit into our ways of working, we *make* them appear "hard to reach." It requires more planning to design engagements that work for them.



Considering Accessibility and Safety

We tend to think of accessibility as a question of ramps, safety rails and mobility support. But for some groups it is far more complex. Are they likely to be comfortable travelling out of their neighborhood? Will translation be a concern? Are you asking them to come to an institution they may distrust? Can they afford to travel to you?

If you can't fully imagine how to support their safety and accessibility, ask someone who might better know the group you are engaging. Always reassure people that speaking freely won't compromise their current or future care, no matter what they say.



Finding Your Own Partners

If there is a particular group you want to engage, it may be more productive to find your own partners. Still, reach out to the Patient Experience Program! They can help you with other aspects of planning your engagement and give support to strengthen your partnership with the partners.



Groups and Representatives

Sometimes it is easier to engage with organizations that represent the groups whose opinions you want. Representatives from organizations often work 9-5, Monday to Friday. They are comfortable in institutional settings like yours and will be happy to come to your offices. The ultimate goal is to speak to people directly, not through others who represent them, but this can be a start.

Representatives can also help connect you with people, provide comfortable space and even be present at the engagement itself to increase feelings of safety.



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The population may change, but the questions you should ask yourself do not.

Ask y	ourse	lf:
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- □ What time would be best for this community? It may be outside your normal working hours.
- ☐ What location would be easiest and most comfortable? It may not be in your building or institution. It may be at a space where they already meet.
- □ Is there someone who should be there to increase a feeling of support or lend legitimacy? Case manager, Elder, advocacy organization representative, head of a department?
- ☐ What other supports does this population need? Respite care, diet, ground floor, Elder to open the event, a counsellor, cultural norms to follow?
- ☐ Are you asking for financial obligations that haven't occurred to you? Will a teleconference add charges to a pay-as-you-go phone? Can they print documents?
- □ Is there something they may be afraid of, such as compromising their future care, their doctor hearing what they said, their community being unimpressed that they are cooperating with you?
- □ Are there literacy or language concerns?



Helpful Resources:

Patients as Partners at the BC Ministry of Health provides tip sheets on engaging specific groups.

- Patients as Partners, BC Ministry of Health. (2018). *Mental Health / Substance Use Care Engagement Tip Sheet*. Retrieved from:
 - https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/heath-care-partners/patients-as-partners/mental-health-substance-use-engagement-tip-sheet.pdf
- Patients as Partners, BC Ministry of Health. (2018). Seniors with complex medical conditions engagement tip sheet. Retrieved from:
 - https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/heath-care-partners/patients-as-partners/seniors-tip-sheet.pdf