



## Introduction

This worksheet outlines EMPaCT's **Five Steps to a Community-Engaged Health Equity Analysis (CEn-HEA)** praxis tool for reflection and action, emphasizing the importance of psychological safety, lived experience, and actionable recommendations to advance health equity. It provides prompts for reflections to guide action towards meaningful engagement and decision-making across the levels of equity analysis.

# **Activity**

For each step, reflect on areas where your practices align or fall short, and identify opportunities for improvement. Use the guiding questions to explore challenges and specific actions that could advance health equity and strengthen community partnerships. Document your reflections and proposed actions, focusing on how to foster inclusivity, safety, and accountability in engagement and decision-making processes.

## 1. Setting up Safe Spaces for Inclusive Engagement

## considerations

- How can we create an environment where everyone feels safe to engage authentically?
- 2. What preparation is needed to align the project with community priorities?
- 3. How can meeting formats, timing, and compensation promote accessibility and inclusivity?
- 4. What mechanisms can sustain trust and safety throughout the engagement?

## 2. Identifying & Analyzing Inequities

## considerations

- What inequities exist across downstream, midstream, and upstream levels? \*
- 2. Who will benefit from the project, and who might be excluded?
- 3. What structural or systemic factors contribute to these inequities?
- 4. What unintended consequences could arise from the project, and how can they be mitigated





## 3. Thinking About the Change

## considerations

- 1. What changes are needed to prevent the project from worsening inequities?
- 2. How can the project be adapted to promote health equity more effectively?
- 3. Who will be responsible for making these changes at individual, organizational, or systemic levels? \*\*
- 4. What community resources (e.g., networks or partnerships) can support these changes?

#### 4. Making & Communicating Recommendations

## considerations

- 1. Do the health equity benefits of the project outweigh any unintended consequences?
- 2. What recommendations can the project team implement immediately?
- 3. What systemic recommendations require long-term collaboration or advocacy?
- 4. How will recommendations be communicated to beneficiaries?
- 5. What policy windows could support systemic change in the future?

## 5. Reporting & Accountability

# considerations

- 1. How will recommendations be tracked and monitored over time?
- 2. What processes are in place to document progress and address challenges?
- 3. How will feedback from previous engagements shape future actions?
- 4. How will beneficiaries be informed about the outcomes of the engagement?

\*Downstream = immediate individual health; Midstream = community-level factors; Upstream = structural determinants (e.g., institutional policies, historical inequities)

\*\*Individual = personal actions and behaviours; Organizational

= institutional policies and programs; **Systemic** = broad societal or policy frameworks influencing equity.