



Case database PolÉthicas—Call for proposals

Context

The *PolÉthicas* case database is a joint initiative of the Public Policy and Ethics axes of the Quebec Population Health Research Network (RRSPQ). The Public Policy and Population Health axis funds the 2021–2022 competition. The *PolÉthicas* database aims to capitalize on the expertise of others, to pool and enhance the knowledge and practices developed to date on public policy and ethical analysis. The case study approach allows for the examination of various problems in different contexts and the ethical issues that may affect public policy in population health.

Public policies structure and drive action in various sectors of society and are a key element in improving population health. For several decades, the health promotion community has encouraged governments to adopt healthy public policies and Health in All Policies strategies. These policies target determinants of health other than the healthcare system and health services.

Political science offers tools to better understand policy making: What issues are on the minds of elected officials? What roles do experts play in formulating solutions? How do non-health actors perceive health and well-being? What does the analysis of implementation tell us? Why is there not more emphasis on evaluation to improve public policy? A better understanding of the policy process is an important asset for public health actors.

Public health ethics (PHE), an interdisciplinary field developed over the past 20 years in response to increasingly complex ethical issues (individual and collective rights, resource allocation), addresses moral issues using the major concepts of ethical and political philosophy to solve population health problems. Understanding how ethical concepts relate to practice is imperative for the soundness of public policies.

OBJECTIVES OF THE POLÉTHICAS DATABASE

1. To promote a better understanding of public policy making and of the decision-making process;
2. To promote the understanding of ethical issues and challenges in the framework of public policies related to population health;
3. To provide a pedagogical and research tool for students, researchers and policymakers, and for public health managers and professionals.

TARGET AUDIENCE

This database is intended for all those interested in public policy and its ethical issues. The cases will be available online. Students, researchers from academia and practice, managers and public health professionals are invited to submit cases.

Case submission Guidelines for authors

Competition deadline: November 15, 2021, 4:00 p.m.

Competition results: December 15, 2021

Funds available: \$4,000

Funding: The amount of the grant can be up to \$4,000.

ELIGIBILITY REQUIREMENTS

- This competition is open to all regular research members and student members of the RRSPQ. **The lead author must be a regular research member or student member of the RRSPQ.**
- The term "public policy" refers broadly to laws, regulations, strategies, plans, and formal policy statements. We may consider cases about programs, to the extent that their analysis is integrated with public policy directly related to population health.
- Authors must ensure that there are no publication rights conflicts as cases will be published online in the *PolÉthicas* database and accessible to the public.
- The same publication cannot be funded more than once by the RRSPQ and its axes and training programs.
- The same author may submit multiple submissions or appear as a co-author in multiple submissions **to the current publication support competitions organized by the RRSPQ and its axes.** However, in order to give equitable access to this publication support to the greatest number of our members, the same author cannot be funded more than once per year.
- If the same author (whoever he or she may be) appears in more than one submission, priority may be given to the submission with the highest score in the evaluation.
- The same RRSPQ student member may submit entries to different annual competitions of the Network and its axes. However, a master's student may not receive more than \$5,000 per year in financial support, and a doctoral student or postdoctoral fellow may not receive more than \$10,000 per year.

EVALUATION CRITERIA

A peer review committee of RRSPQ members will evaluate applications according to the following criteria:

- Relevance of the theme in relation to healthy public policies;
- Originality and quality of the data available for the case;

- Relevance to the objectives of the case database;
- Interest for users of the database.

SUBMISSION OF APPLICATIONS

Applications may be written in English or French. To submit, complete the case description form available [here](#) and attach the case description and a short CV, **by 4:00 p.m. on Monday, November 15, 2021.**

CONTENT OF THE APPLICATIONS

Only complete applications will be considered for evaluation:

- 3 pages of content (see details below);
- An online description form;
- The main author of the application must attach a short CV (3 pages max.). **Long CVs will not be accepted.**

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- Name, affiliation, and full contact information (address, phone number, email) of the principal author of the proposal
- Name and affiliation of co-authors
- The title of the case
- The amount requested, up to a maximum of \$4,000.
- A budget justification.

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- Relevance of the topic to healthy public policy and ethics (max. 150 words)
- The link with the objectives of the database and the target audience (max. 100 words)
- Data sources, originality, and quality (max. 100 words)
- Status of the case study (e.g., data collection in progress, data analysis completed) (max. 150 words)
- Suggestion of 2 readers for the final acceptance of the case

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- The case summary (max. 350 words)

Your abstract should not include any figures, tables or references.

Full version of the case for publication

The content of the case should follow the attached outline. Cases may be written in English or French.

Cases should be submitted in Word format in Letter size (8.5 x 11), Times New Roman font, size 12, 1½ line spacing. They should be between 2500 and 5000 words long (5–10 pages), excluding references.

References should use the author-date system, in which resources are cited in the text in parentheses with the author's name and year of publication. References are listed at the end of the text in alphabetical order and following the APA 6th edition style, in a section called "References".

Authors of accepted abstracts will be invited to submit a full manuscript of their case by **June 30, 2022**. Prior to publication, the case will be peer reviewed for final acceptance. Corrections may be requested from the author.

COMMITMENT OF THE RECIPIENTS

- Recipients agree to publish the title and an abstract of their publication (in French and English) on the RRSPQ website, upon announcement of their selection.
- Funded authors agree to acknowledge the financial participation of the RRSPQ and to use the RRSPQ logo (if possible) in all activities resulting from the funded project, including publications, announcements and communications. The following wording is suggested:
"The authors thank the Public Policy and Population Health axis of the Quebec Population Health Research Network (RRSPQ) for its contribution to the funding of this publication."

For references, see the case studies [available here](#).

For further information, please contact Maël Permal, coordinator of the Public Policy and Population Health axis, at the following address: coordination.ppsp@gmail.com

Drafting Outline for the Case Study¹

The outline proposed below serves as a guide for the drafting of the case studies. The information presented in the case should follow the following structure: presentation of the case; description of the actors, their vision (s) of the problem and their solution (s); outcome of the problem; discussion. Note that not all of the elements are necessarily uniformly applicable to all cases. Depending on the case, the emphasis may be placed on some elements more than on others.

		Case Title	
		PRESENTATION OF THE CASE	
DESCRIPTIVE DATA	➤ Context	Briefly describe the problem addressed by the policy under consideration. <ul style="list-style-type: none"> • What policy will the case study be focusing on? • What problem or demand is at the core of this policy or future policy? 	
	➤ Period covered by the study	Specify the start and end dates of the case study, identifying the key event or decision related to it.	
	➤ Characteristics of the field under study or relating to the problem	<ul style="list-style-type: none"> • Briefly state the current status (factual or statistical data on the field of study); • Core socio-cultural values (e.g. with respect to population groups or policy practices); • Constitutional structures and division of jurisdiction between, for example, federal, provincial and municipal jurisdictions. 	
	➤ Stage(s) of the policy concerned and the problem situation	<ul style="list-style-type: none"> • Emergence; • Agenda-setting; • Formulation; • Adoption; • Implementation; • Evaluation. 	The case study may focus on one or the other or some of these six steps; It is not necessary to cover all of them.
		ACTORS, VISION(S) OF THE PROBLEM, PROPOSED SOLUTIONS AND ARGUMENTATION	
ELEMENTS OF AN EXPLICIT NATURE²	➤ Position(s) of the main actors facing the problem	Who are the main actors (groups or individuals) who raised the problem: government actors, political parties, interest groups, citizens, journalists, scientists and others? <ul style="list-style-type: none"> • How do the actors define the problem (perceptions and positions)? • What are the main arguments put forward by the actors to justify their position? • Is the argumentation of the actors based on scientific knowledge, experience or other? 	

¹ This outline is an adaptation of the design used in the context of retrospective case studies conducted by the Task Force on Public Policy and Health (Groupe d'études sur les politiques publiques et la santé, GÉPPS), see Gagnon, F. Turgeon, J. Michaud, M. And C. Dallaire (2011), Annex 3.1 (p.46). G. Malboeuf and J. Leclerc collaborated to adapt and test it for this project.

² These elements should lay the foundations of the discussion, including the ethics argument.

	➤ Solution(s) put forward by the main players	Who are the main players who propose solutions? <ul style="list-style-type: none"> • What options are being considered by the main actors to solve the problem? • What are the main arguments put forward by the actors to justify their solution? (Promotion of particular interests?) • Is the argumentation of the actors based on scientific knowledge, experience (here or elsewhere) or other?
	➤ Determinants of health	What are the determinants of health explicitly mentioned by the various actors, in relation to the problem, the solutions or the policy?
	➤ Expertise and use of knowledge	What is the main expertise involved in the case under study: public health, environment, economy, urban planning, and transport? <ul style="list-style-type: none"> • Is knowledge leveraged?
	➤ Values and stakes explicitly put forward by the actors	Identify the values and issues explicitly put forward by the actors. <ul style="list-style-type: none"> • Economic, financial, environmental, ministerial, population health, and others.
	DENOUEMENT	Adoption, non-adoption, status quo, deviation from what was originally planned, etc.
	DISCUSSION	Questions to consider
ELEMENTS OF AN IMPLICIT NATURE		<p>What is the "nature" of the problem?</p> <ul style="list-style-type: none"> • Simple (consensus and availability of easily applicable technical solutions); Complicated (divergences, multiple solutions, but applicable and complementary); Complex (controversy, scientific and social uncertainty). <p>What are the explanatory factors (external events)?</p> <ul style="list-style-type: none"> • Are there external factors or events that may have affected policy-making? Changes in socio-economic conditions, in government; decisions or impacts of other areas of intervention; public opinion; media coverage? <p>What are the gains or losses, based on the initial demands and ideals, and on population health?</p> <p>Are there conflicts of interest between actors or groups of actors; Organizations; Government departments; Regions; Institutions, other?</p> <p>What are the ethical issues?³</p> <ul style="list-style-type: none"> • Respect for the autonomy of individuals, groups; Respect for privacy; Free and informed consent; Respect for fundamental rights; Charity (acting in the public interest), health equity (equitable allocation of resources, equal treatment), transparency (of information), and so on. <p>What are the expected effects of the policy on:</p> <ul style="list-style-type: none"> • Allocation of resources; the populations concerned; Inequalities, etc. <p>What are the lessons to be learned for public health actors and for the health of populations?</p>

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³ Document for consultation : Institut national de santé publique du Québec (INSPQ). (2015). *Référentiel de valeurs pour soutenir l'analyse éthique des actions en santé publique*. Québec, Montréal.