Réseau de recherche en santé des populations du Québec

***Public Policies and Population Health* and *Ethics and Integrity* axes**

PolÉthicas Case Study Bank
Call for Proposals

Context

The *PolÉthicas* case study bank is a joint initiative of the *Public Policy and Population Health* and *Ethics and Integrity* axes of the Quebec Population Health Research Network (QPHRN). It aims to capitalize on the expertise of each grouping, to combine and to enhance the knowledge and practices developed so far in public policy and ethics analysis. The case study examines multiple problems in different contexts and the ethical issues that may affect public health policies.

Public policies structure and guide action in various sectors of society. They are a key element in improving the health of populations. The adoption of "Healthy Public Policies" by governments or Public Policies Favorable to Health (PPFH) have for decades been a central focus of health promotion strategies. These policies target the determinants of health other than the health care system and health services.

Political science offers tools to better understand policy-making: what problems do the elected officials draw attention to? What roles do experts play when formulating solutions? How are health and well-being perceived by actors in sectors other than health? What does the analysis of implementation tell us? Why isn't there more emphasis on evaluation to improve public policy? A better understanding of how public policy is realized is an important asset for public health actors.

Public health ethics (PHE), an interdisciplinary field developed over the past two decades in response to increasingly complex ethical issues (individual and collective rights, resource allocation), focuses on moral issues using concepts of ethical and political philosophy to solve population health problems. It is imperative for the validity of public policies to understand how ethical concepts relate to practice.

OBJECTIVES OF THE CASE STUDY BANK *POLÉTHICAS*

1. Foster a better understanding of public policy-making and the decision-making process;
2. Promote understanding of ethical issues and challenges in public health policies;
3. Provide a pedagogical and research tool for students, researchers and decision-makers, as well as managers and public health professionals.

TARGET AUDIENCE

This case bank aims to reach all those interested in public policies and their ethical issues. Cases will be available online. Students, researchers from academia and practice, public health managers and professionals are invited to submit cases.

Submitting a case
Guidelines for Authors

Contest deadline: February 3, 2020, 4 pm EST

Results of the contest: March 2, 2020

Available Funds: $ 8,000

Funding: The amount of each individual award is up to $ 4000 max

ELIGIBILITY CRITERIA

- This contest is open to all researchers who are regular researcher members and student members of the QPHRN. **The lead author must be a regular researcher member of the QPHRN or a student member of the QPHRN**.
- The terms « public policy » are used in their broadest sense, encompassing laws, regulations, strategies, and plans such as formal political statements. Programs can also be considered to the extent that their analysis is part of a public policy directly related to population health.
- Authors must ensure that they do not have a conflict of publication rights since cases will be published online in the case study bank *PolÉthicas* and made accessible to the public.
- The same publication cannot be funded more than once by the RRSPQ and / or one of its strategic groupings or training programs.
- A same researcher can apply and/or appear as a co-researcher in several applications to the current competitions of the QPHRN and/or its axes. Yet, in order to provide all Network members with a fair access to this financial support, a same researcher cannot be funded more than once per year in these competitions. If any author appears in multiple applications, priority may be given to the application that gets the highest evaluation score.
- A same QPHRN student member can apply to various annual competitions launched by the QPHRN and its axes but he/she cannot be awarded more than $5,000 per year.

EVALUATION CRITERIA

Applications will be reviewed by a peer review panel of members of the QPHRN.
Applications will be evaluated based on the following criteria:

- Relevance of the theme addressing ethics and public policies that are favorable to health;
- Originality and quality of the data available for the case;
- Links to the objectives of the case study bank;
- Interest for the users of the case study bank.

SUBMISSION OF APPLICATIONS

Applications may be submitted in English or in French. They must be submitted as an attached file (Microsoft Word) by e-mail with the subject heading "Contest – Case Study Bank" at the **February 3, 2020, 4 pm EST** at the following address: genevieve.malboeuf@teluq.ca

CONTENT OF APPLICATIONS

Only complete files will be retained for evaluation, consisting of 3 pages of content and a fact sheet to be completed online. In addition, the lead author of the application must attach an abbreviated CV (3 pages). **Long CVs will not be accepted.**

Page 1

- The name, affiliation and complete coordinates (address, telephone number, email) of the proposal's principal applicant
- The name and affiliation of the coauthors
- The title of the case
- The amount requested, up to a maximum of $ 4,000. The amount awarded will depend on the state of progress of the work, including the collection of data.
- A justification of the budget. Please note that a ¼ of the amount granted will be paid upon final submission of the case.

Page 2

- The relevance of the theme addressed in the case study in regards to public policies favorable to population health and ethics (max 150 words)
- The link with the objectives of the case bank and the target audience (max 100 words)
- Origin of the data, its originality and its quality (max 100 words)
- The progress status of the case study (max 150 words)
- Suggestion of 2 readers for final acceptance

Page 3

- Summary of the case (max 350 words)
  Your summary must not contain any figures, tables or references.

CASE STUDY FACT SHEET

To submit your application, you must complete a fact sheet for your case study ONLINE.

Full version of the case for dissemination

The content of the case should be in accordance with the attached drafting outline. Cases can be written in French or in English.

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

References must use the author-date system, in which the resources are cited in the text in parentheses, indicating the name of the author and the year of publication. References are listed at the end of the text in alphabetical order and APA style 6th edition. This section is titled "References".

Authors of accepted abstracts will be invited to submit a complete manuscript of their case study by **August 31, 2020**. Prior to publication, the case will be submitted to a reading committee for final acceptance. Corrections could be requested from the author.

RECIPIENTS' COMMITMENTS

- The laureates agree to publish the title and a summary of their publication (in French and English) on the QPHRN's website, as soon as they are announced.
- Authors awarded funding undertake to mention the financial participation of the QPHRN and to use its logo (if possible) for any activity resulting from the funded project, including publications, announcements, communications. The following acknowledgment is suggested: *"The authors thank the Public Policy and Population Health and Ethics axes of the Quebec Population Health Research Network (QPHRN) for their contribution to the financing of this publication"*.
  « Les auteurs remercient l'axe Politiques publiques et santé des populations et l'axe Éthique du Réseau de recherche en santé des populations du Québec (RRSPQ) pour leur contribution au financement de cette publication ».

For references, see the following case studies ONLINE

For further information, please contact Geneviève Malboeuf:
genevieve.malboeuf@teluq.ca

Drafting Outline for the Case Study[1]

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. • 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**	• 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**	• 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 NATURE[2]	➢ **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? • 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? • 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? • Is knowledge leveraged?
	➢ **Values and stakes explicitly put forward by the actors**	Identify the values and issues explicitly put forward by the actors. • 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		What is the "nature" of the problem? • Simple (consensus and availability of easily applicable technical solutions); Complicated (divergences, multiple solutions, but applicable and complementary); Complex (controversy, scientific and social uncertainty). What are the explanatory factors (external events)? • 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? What are the gains or losses, based on the initial demands and ideals, and on population health? Are there conflicts of interest between actors or groups of actors; Organizations; Government departments; Regions; Institutions, other? What are the ethical issues?[3] • 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. What are the expected effects of the policy on: • Allocation of resources; the populations concerned; Inequalities, etc. What are the lessons to be learned for public health actors and for the health of populations?

@ FGAGNON 2017

[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.