

WELCOME!

Inclusive public health - challenges and opportunities -

Please turn off your microphone during the presentations

Please note that all sessions will be recorded

Inclusive public health ...

1. ... is not excluding any particular groups of *people* →
 - with a particular focus on groups who have historically been excluded (as because of their ethnic background, gender etc.)
 - people/groups as objects of public health
2. ... open *minded*, broad in orientation or scope
 - with a particular focus on perspectives that have historically been excluded (e.g. that of children, lower socio-economic groups etc.)
 - people/groups as co-creators of public health

Inclusive *research* as a prerequisite for inclusive public health: including all groups (1)

1. ... is not excluding any particular groups of *people* →
 - why important?
 - health differs between groups, and so does the effect of interventions
 - public health interventions should be based on evidence (evidence-based PH)
 - evidence should reflect all people
 - why not self-evident?
 - homogeneity as the dominant paradigm in health research
 - as it increases the internal validity of the results

Probability of Middle-Aged Men Developing Coronary Heart Disease in Five Years

By ANCEL KEYS, PH.D., CHRIST ARAVANIS, M.D., HENRY BLACKBURN, M.D.,
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SUMMARY

Characteristics of 11,132 men aged 40–59 years and free from coronary heart disease (CHD) at entry were related to follow-up experience, using multivariate analysis. In 5 years among 2,404 U. S. railroad men and 8,728 European men there were 615 cases of CHD, 214 of whom died from CHD or suffered definite nonfatal infarction.



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*Cardiovascular
Research*

www.elsevier.com/locate/cardiore

Editorial

A radical idea: men and women are different

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See article by Dantas et al. [8] in this issue.

Gender has a pronounced influence on the type and

to cardiovascular disease reduction in premenopausal females. It is thought that enhanced endothelial production of NO not only reduces blood pressure, but may delay the

Inclusive *research* as a prerequisite for inclusive public health: including all groups (2)

Taking heterogeneity as a paradigm → methodological issues?

- Promoting participation of traditionally underrepresented groups

But there is more:

- Research question should reflect heterogeneity
- Validity of instruments
- Retention
- Etc.

Inclusive *research* as a prerequisite for inclusive public health: including all groups (3)

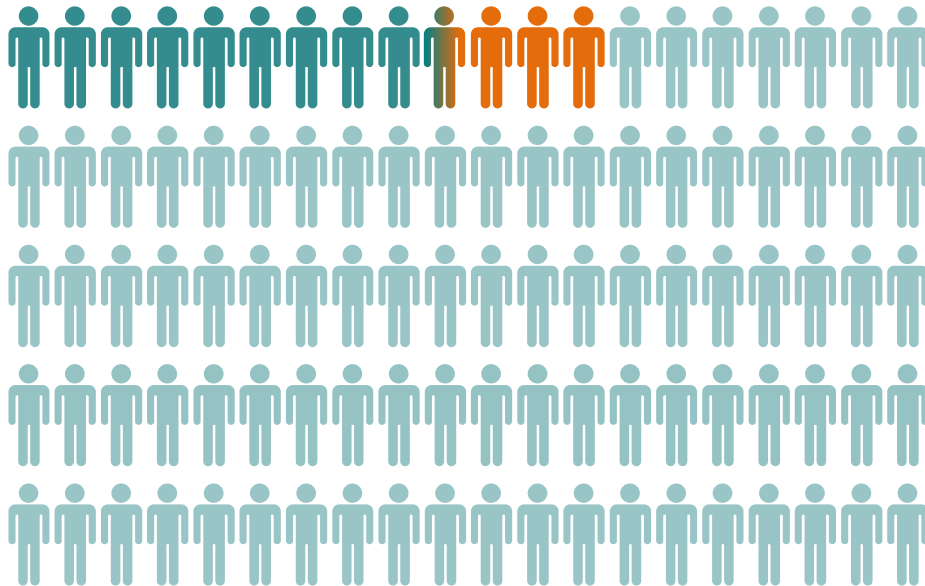
Symposium today

- Plenary lectures and break out sessions will address these methodological issues
- In the context Sarphati Amsterdam, and the Sarphati Cohort in particular
- How to address diversity? Recommendations, suggestions, experiences

Sarphati Cohort response rate



× GGD
× Amsterdam
×



13.0%

based on YHC population
0-4 years*

*with contact moment YHC in 2019,
living in Amsterdam-Amstelland

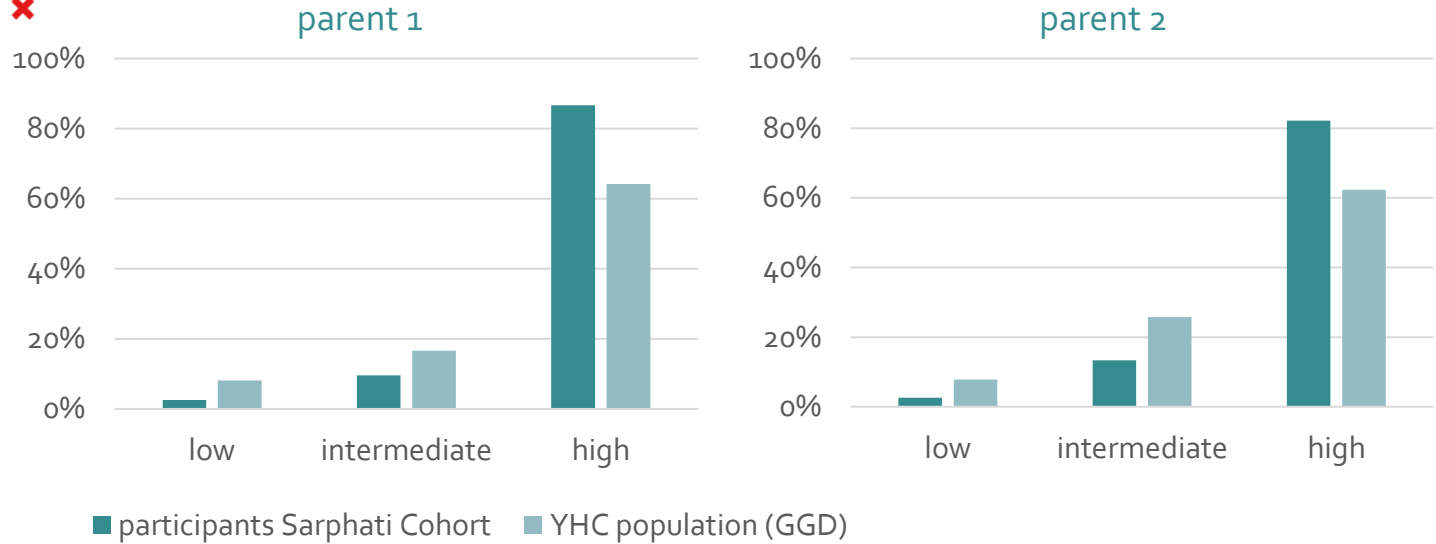
13 October 2020

characteristics participants

educational level

✘ GGD
✘ Amsterdam
✘

educational level: participants Sarphati Cohort vs YHC population (GGD)



Inclusive *research* as a prerequisite for inclusive public health: target population as co-creator (1)

2. ... including perspectives of multiple actors, actors seen as co-creators in research
 - why important?
 - participation of target group will increase effectiveness of interventions
 - participation of multiple stakeholders will promote the implementation of an intervention
 - people have equal rights to participate in research
 - etc.
 - why not self-evident?
 - public health inherently paternalistic (?)
 - homogeneity of people who do research

Inclusive *research* as a prerequisite for inclusive public health: target population as co-creator (2)

Symposium today

- Plenary lectures and break out sessions will address the question as to how to incorporate multiple perspectives in research
- In the context of research done in Sarphati Amsterdam
- E.g. how to increase participation of the target population? What form should participation have? what are prerequisites for co-creation? etc.

Plenary lectures

1. Prof. Charles Agyemang: inclusive *epidemiology*
2. Dr Corine Meppelink: inclusive *communication*
3. Dr Christine Dedding: inclusive *participation*