

Division of Health Sciences

Social Accountability Plan

What is Social Accountability?

The World Health Organization defines social accountability as institutions' obligation to direct their education, research and service of activities towards addressing the priority health concerns of the communities that they have a mandate to serve. Priority health concerns should be identified jointly by educational institutions, governments, health care organisations, health professionals and the public¹.

Vision

Social accountability is embedded across all areas of the Division's health and biomedical sciences teaching, research and service, and within clinical practice, for the purpose of improving health outcomes of people in New Zealand and around the world.

Mission

The Division of Health Sciences promotes and supports its commitment to direct its research, education, advocacy and clinical activities towards the priority health concerns of local, regional, national and international communities.

Social Accountability to Improve Health Outcomes by:



¹ Division of Development of Human Resources for Health, World Health Organization. *Defining and Measuring the Social Accountability of Medical Schools*. Geneva, Switzerland: World Health Organization; 1995. Available at: whqlibdoc.who.int/hq/1995/WHO_HRH_95.7.pdf.

Strategic Plan Goals

Our strategic mission will be achieved by:

Developing Leadership Commitment, Capability and Capacity

- a) Designing and developing a plan to ensure commitment to social accountability by all Divisional leaders.
- b) Actively recruiting and retaining an academic workforce from diverse communities, and developing an academic workforce that is responsive to diverse communities.
- c) Identifying opportunities to strengthen governance and partnerships with community/health/education and government stakeholders.

Creating a Responsive and Inclusive Workforce

- a) Using admission criteria that actively seeks students from communities that experience inequities, and selecting students who can be responsive to communities that experience inequities.
- b) Providing curricula that reflect the priority needs of New Zealand and its colonial history, with an emphasis on clinical learning in partnership with New Zealand's health service providers and health practitioners.
- c) The provision of curriculum frameworks which support quality practice that contribute to health advancement with communities that experience inequities
- d) Actively using learning methods and environments that encourage the development of collaborative and patient/community-centred professional practice, (e.g. Team-based learning, interprofessional learning opportunities, student-led clinics, and learning sites within a diverse range of communities).
- e) Ensuring graduates have the necessary skills, knowledge and commitment to support communities' access to equitable quality health care.
- f) Developing a future health workforce that can advocate for positive political and systemic change to improve health outcomes.

Being the Critic and Conscience of Society

- a) Actively participating in national and international health policy setting processes.
- b) Partnering with community groups to support health rights and/or agenda that they identify is important.
- c) Develop curricula that encourages clinical and cultural competency through critical analysis of institutional, systemic and interpersonal enablers and/or barrier that maintain privilege and health inequities within society.

Fostering Bidirectional Community Partnerships

- a) Partnering with communities in New Zealand society and globally to ensure research and course curricula are mutually beneficial and orientated towards addressing issues of importance (as identified by the community) within such communities.
- b) Establishing and maintaining on-going networks and relationships that contribute to the development of a sustainable and equitable health care system.
- c) Partnering with key stakeholders to capitalise on individual strengths (education, research, and service provision) to advance the overall performance of the health sector.
- d) Strengthening commitment to primary Tiriti o Waitangi partner, Ngāi Tahu, and other iwi/Māori and indigenous groups with which the University holds a formal relationship or engages, to ensure mutual benefit for all partners.
- e) Acknowledging the relationship between New Zealand and its Pacific nation neighbours and strengthening formal relationships with these communities.
- f) Continuing to build formal relationships with communities who experience inequities in Aotearoa New Zealand.

Encouraging Research with Health Impact Focus

- a) Engaging in research inspired by, and that responds to, the priority health needs and well-being of all people in New Zealand society, and globally.
- b) Encouraging research that responds to current and future health needs and challenges in society.
- c) Encouraging research that identifies inequalities in health outcomes and identifies system solutions.
- d) Increasing the production of quality research that contributes to the achievement of Māori development aspirations and advances the University's Māori research profile and overall research excellence.
- e) Increasing the production of quality research that contributes to Pacific community health aspirations.
- f) Increasing the production of quality research that documents solutions to health care barriers and inequitable treatment to communities, in New Zealand society and globally, who are impacted by health inequities.

Strategic Implementation

Developing Leadership Commitment and Capability

Strategies <i>What</i>	Actions <i>How</i>
Ensuring and celebrating a commitment to social accountability by all Divisional leaders	<ul style="list-style-type: none"> • The Division of Health Sciences (Division) embeds the principles of social accountability into all strategic documents. • An operational plan for social accountability is formulated to translate social accountability into concrete measures over a given period (i.e. five years). • The operational plan at Divisional and School/Faculty level is developed in consultation with Divisional leadership, teachers, healthcare practitioners, researchers, administrative staff, students and health stakeholders. • The Division of Health Sciences Operational Plan reflects stakeholder involvement in the decision-making process.
The development of a culturally diverse academic workforce	<ul style="list-style-type: none"> • The Division recruits and supports staff (academic and professional) who demonstrate commitment to social accountability principles. • The Division is committed to increasing the diversity of staff to better reflect the mirror on society.
Strengthen governance and partnerships with other stakeholders	<ul style="list-style-type: none"> • The Division actively engages with and supports other 'like-minded' institutions/groups to achieve common social accountability goals.
Ensuring resource availability to implement social accountability	<ul style="list-style-type: none"> • Schools/Faculties take into consideration social accountability goals during the budget-setting process.

Creating a Responsive and Inclusive Workforce

Strategies <i>What</i>	Actions <i>How</i>
Active recruitment and retention of diverse student cohorts	<p>The admissions processes integrate social accountability by:</p> <ul style="list-style-type: none"> • Admitting students into undergraduate and postgraduate programmes from a diverse range of backgrounds. • Admitting students likely to be willing to serve under-served populations and communities (e.g. rural). • Ensuring all students are aware of, and understand, the different needs of the diverse communities within New Zealand. • Ensuring support mechanisms for all students. • Contextualising student support to students' needs.
Ensuring that education and training:	<ul style="list-style-type: none"> • Incorporates social accountability into the curricula. • Integrates priority health, workforce and social needs into curricula. • Provides all students with interprofessional learning experiences. • Placements are developed to ensure adequate exposure to priority health needs while learning in context. • Models and teaches professionalism and community-responsiveness. • Develops learning objectives based on professional roles and responsibilities reflective of current and projected health and workforce needs. • Provides meaningful opportunities for community service. • Includes cross-cultural training and/or professional development for all staff and students.
Ensuring graduates have the necessary skills and commitment to provide health care that meets societal needs	<ul style="list-style-type: none"> • Provide all students with a solid understanding of the social determinants of health. • Provide all students with cultural and social competencies. • Provide students with experiences in health contexts that reflect the range of delivery of health care.
Developing a future health workforce that understands its obligation to drive positive political and systemic change to improve health outcomes	<p>Produce graduates who:</p> <ul style="list-style-type: none"> • Have the attributes (technical, social and cultural) to address the health and social needs of all members of New Zealand's population. • Are policy-literate in terms of working for positive change. • Recognise the potential of systems thinking to address issues in health care provision. • Are committed to advocate for the health needs of individuals and communities.

Being the Critic and Conscience of Society

Strategies <i>What</i>	Actions <i>How</i>
Actively participating in national and international health policy setting processes	<p>The Division of Health Sciences promotes health-service change by:</p> <ul style="list-style-type: none"> • Producing graduates who have the attributes to address social inequities in healthcare provision. • Producing graduates who advocate for positive change in healthcare in New Zealand. • Actively encouraging staff to develop external relationships with government agencies. • Engaging in a continuous process of critical reflection and analysis about the healthcare system and disseminating this information widely.

Fostering Bidirectional Community Partnerships

Strategies <i>What</i>	Actions <i>How</i>
Partnering with communities, in New Zealand society and globally, to ensure our research and our course curricula are mutually beneficial and orientated towards addressing issues of importance (as identified by the community) within such communities	<ul style="list-style-type: none"> • Provide local communities/stakeholders with opportunities for involvement with curricula design and placement opportunities. • Curricula design and placement opportunities reflect priority health needs. • The Division encourages research projects that are community- or stakeholder-oriented, involving community/ stakeholder members at all stages. • The Division develops a guide for transboundary partnerships. • The Division audits community/stakeholder participation and participant outcomes.
Establishing and maintaining on-going networks and relationships that contribute to the development of a sustainable and equitable health care system	<ul style="list-style-type: none"> • We engage and support community health service providers as educators in a manner which strengthens local healthcare services.
Partnering with key stakeholders to capitalise on individual strengths (education, research, and service provision) to advance the overall performance of the health sector	<ul style="list-style-type: none"> • Schools/Faculties actively engage with other 'like-minded' institutions to undertake social accountability projects to achieve health system improvement.

Encouraging Research with Health Impact Focus

Strategies <i>What</i>	Actions <i>How</i>
Engaging in research inspired by, and that responds to, the priority health needs and well-being of all people in New Zealand society, nationally and internationally	<ul style="list-style-type: none"> • Research conducted in the Division of Health Sciences reflects New Zealand's priority health and health system needs and is undertaken in partnership with key stakeholders. • The Division of Health Sciences Research Plan incorporates Social Accountability principles and aligns with regional and national research priorities.
Encouraging research that responds to current and future health needs and challenges in society	<ul style="list-style-type: none"> • The Division, along with Schools and Faculties, regularly identify and review priority health and workforce needs.
Encouraging research that identifies inequalities in health outcomes and identifies system solutions	<ul style="list-style-type: none"> • The Division actively promotes research projects that address priority health and workforce needs. • Schools/Faculties/Departments regularly apply for funding grants (and are successful) for research that supports activities with under-represented communities.



Approved by
Date

Health Sciences Divisional Executive
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