the EQUITY SCIENCE Lab
in collaboration with the

IKT Research Network
Integrated Knowledge Translation Network (www.iktrn.ohri.ca)

Knowledge-to-Equity Action 2026 | Syllabus | 24-28 August 2026

Intensive in-person/zoom

Course Instructor

Dr. Katrina Plamondon PhD RN (She, Her, Hers)
Associate Professor | UBC Impact Research Chair in Applied Health Equity Science
Co-Director, Equity Science Lab

Faculty of Health & Social Development | School of Nursing
University of British Columbia | Okanagan Campus, Located on Unceded Syilx Okanagan Nation Territory
ART360 1147 Research Road | Kelowna BC | V1V 1V7 Canada
katrina.plamondon@ubc.ca

Course Coordinator

Ms. Lisa Knox (She, Her, Hers), RN
Research Coordinator & PhD Candidate
Equity Science Lab | Faculty of Health & Social Development | School of Nursing
Lisa.knox@ubc.ca

Intention Statement

The Knowledge-to-Equity Action Course is a not-for-profit, equity-centred training intervention aimed at strengthening equity attunement and cultivating capacity for equity practices across a variety of settings and contexts. Grounded in a commitment to solidarity, this course is an equity intervention with a particular interest in global health research. It creates a community of learners that come together from many different countries, disciplinary backgrounds and stages of career around a shared interest in understanding how to apply concepts, theories and practices for connecting knowledge with action *for equity*. It is one, among many, efforts to spark more equitable futures.

Background

This intervention builds on and extends the 2012 (open access) CCGHR KT Curriculum, and the CCGHR KT Summer Course (2020, 2021)—with a specific focus on integrating knowledge mobilization and integrated knowledge translation (KMb/KT) theory and practices with equity science. In 2026, the course is hosted by the Equity Science Lab (University of British Columbia), in partnership with the Integrated Knowledge Translation Research Network.

Course Description

Knowledge mobilization and integrated knowledge translation (KMb/KT) and co-production fall along a spectrum of engaged, relational approaches of connecting knowledge with action, specifically inclusive of research evidence. Common among these approaches is a goal of doing or applying research evidence in ways that include people affected by or in positions of influence over contexts, issues or focus of research. Also common among these approaches is a need for greater attention to equity considerations in both process and outcomes.

KTEA embeds attention to equity practices and principles in an exploration of how people can collaboratively work toward advancing meaningful action through research. KTEA delivers content on foundational practices for KMb/KT and co-production with an explicit focus on advancing equity, offering opportunities for small groups to apply their learning in a real-life setting as they respond to an equity action challenge.

Learning Objectives

Through a blend of in-person and Zoom synchronous sessions, individual work and working groups, learners in this course will:

1. Develop foundational knowledge on core theories, frameworks, concepts and practices common to both KMb/KT sciences *and* equity science.
2. Examine aspects of worldview and its relationship to KMb/KT and equity action, deliberating on what constitutes the 'knowledge' of knowledge-to-equity action.
3. Develop an action plan for how to apply mutually informative and non-hierarchical equity-centred principles in practice.
4. Appraise the equity implications and choices presented in different KMb/KT responses or strategies.
5. Explore dialogue-based and evaluative thinking strategies and approaches for connecting knowledge with action in different settings and contexts.

6. Understand how systematic equity action analysis can context analysis of an equity issue.
7. Using a case study-style approach, create a knowledge-to-equity action response to an active equity issue through an applied service-learning project.
8. Extend insights from KTEA to their own practice or work setting, creating foundations for equity-centred practice to carry forward beyond the service-learning project.

Course Style & Delivery

In this course, our goal is to cultivate a thriving learning community that engages through critically reflective dialogue, service-learning, and respect for our shared humanity. Solidarity and reciprocity are guiding values.

Our approach to delivering KTEA appreciates adult learning theory and is guided by critical pedagogy. In practice, this means we appreciate, respect and honour all learners' contributions to the course as adult learners. We assume each person brings a wealth of experience, expertise, strengths, and perspectives with them. We also assume that people learn best when the course content honours both what each person brings into the learning community; and when the content allows immediate and relevant application to each learners' own context(s).

We put these assumptions into practice by modelling equity-centred engagement and using dialogue-based approaches. By focusing both the content and delivery on *how* to advance equity in knowledge-to-action approaches, the course is interventional in its effort to invite transformative capacity building. We invite collective practices of solidarity and reciprocity by bringing learners from across disciplines, geographies, and stages of career, offering service-learning opportunities for people to collaborate on in a supported environment, and creating a platform for ongoing collaboration and partnering.

Learners who participate in KTEA are warmly welcomed to continue their engagement with this course in future offerings, creating pathways for leadership and catalyzing capacity to extend equity-centred engagement in research and KMb/KT.

Preparing for KTEA

Two weeks prior to the course, participants will be provided a learning package with core readings and instructions for navigating our time together in ways that can optimize their learning. We encourage people to set aside about 10 hours of preparation time, allowing time for reading and reflection that will set them up for a positive experience. In addition, groups will be provided some beginning introductions to a community partner who they will connect to for the peer/service-learning component of the course.

Each person will be invited to introduce themselves to others joining them in the course and begin the first steps of creating an individualized equity action plan (which will evolve over the duration of the course). These plans will be tailored to their own unique work setting.

For many folks, this preparation could be completed in a few evenings, 1.5 work days, or a weekend. All readings will be either open-access or available upon request.

Course Schedule & Platforms

Synchronous sessions will take place in person at Landmark 4, 6th Floor boardroom (Kelowna, BC) and over Zoom (0900-1130 Pacific Time) between August 24-28, with a 2-hour follow-up session on September 25 (0900-1100 Pacific Time).

Daily Schedule

0900-1130	Collaborative, dialogue-based learning session
1130-1200	Recommended: Check-in with peer learning group, self-directed review of content and create personalized learning goals for the day
Afternoon or at a time of your choosing	Lunch, rest, move Group check-in, setting direction for peer-learning time Peer/service-learning time (various spaces available in and around Landmark)

A zoom link below will be provided to you in a meeting invite. If learners require support to coordinate zoom for peer-learning connections, please let us know. Course resources will be hosted on MS Teams. Each participant in the course will receive an invitation to join and be able to access this platform via email.

Expectations of Course Participants

For this intensive course, we recommend full commitment to the week. Calendar invites will be shared in advance. We understand if you need to miss a session, but please let us know of your absence ahead of time via the meeting invitation as we will keep attendance.

To get the most of this learning experience, learners are expected to visit and review the course platform on MS Teams frequently. This course invites learners to engage in critically reflective dialogue that can broaden your understanding and perspectives about knowledge-to-action and equity issues. To be critically reflective means being vulnerable, curious, and open to others' perspectives. Importantly, it invites respect and care for others who are collaborating with you in learning. As a participant, you are expected to be respectful and kind in your engagements.

This syllabus provides a comprehensive list of potentially relevant readings. It is not exhaustive, and there may be many other sources you find helpful for your own learning! Learners are not expected to read everything, but rather to draw upon the resources offered to help design a set of readings and engagement that aligns with their own unique learning needs, interests, and goals. Please take or leave what works for you, selecting from this list of readings as you might select from a menu.

Participants will receive a certificate for their participation in this course. Aligned with our own commitment to practicing equity, there is no assessment of learning or performance in this course, contingent on their own self-assessment of satisfactory contribution. Learners will be invited to complete a self-evaluation of their contribution and level of participation in the course, with a recommendation that completion of the course and eligibility to receive a certificate be extended if learners' self-assessment reflects a score of 3 or 4 across all categories described below. If a learner has not been able to engage with the course at a level 3 or 4, we recommend they consider re-taking KTEA at its next offering.

Table 1. Recommended Self-Assessment for KTEA Course

	Level of Engagement			
	1	2	3	4
Category	Drifting	Moving in the right direction	Valuable contribution	Ideal for this KTEA Course
General contribution to learning community	Does not make effort to participate in learning community as it develops; is absent or non-participatory	Occasionally makes meaningful reflection on topics of discussion; makes marginal effort to engage in dialogue	Often presents reflections that become central to the group's discussions, interacts with thoughtfulness, and encourages others' contributions	Consistently presents creative and active reflections on topic, aware of needs of community, frequently prompts further discussion of topic
Participation in synchronous sessions	Attends less than 3 of the synchronous sessions	Attends 3-4 of synchronous sessions	Attends 4+ of the synchronous sessions	Attends all of the synchronous sessions
Engagement in reading and other supportive course materials	Reads >50% of recommended resources	Reads 50-60% of recommended resources	Reads most of the recommended resources	Reads most or all of the recommended resources
Engagement in service-learning efforts	Offers infrequent or unreliable contributions to the group that is recognizably inequitable in comparison to others' contributions to the workload	Offers some and sporadic contributions to the group, carrying a less-than-ideal workload for the service-learning project	Offers regular contributions to the group in meaningful ways, responsive to requests for input and willing to carry a reasonable portion of the workload	Offers consistent and weekly collaborative and service-driven leadership to the group, leveraging their own and others' strengths toward a collective goal. Actively ensures the workload of the service-learning project is shared and steps up to complete tasks as needed
Engagement with peers	Does not make efforts to learn about others in the course, in the community partner, or in their peer learning group; is disengaged	Makes some limited efforts to learn about and engage with others in the course, community partner, or peer learning group	Actively demonstrates attentiveness to others' interests, needs, and learning goals and works collaboratively toward shared goals	Seeks synergies and harmony among peer learners and with others in the group, creating strong networks and partnerships that extend beyond the confines of the course

Course Mentors

Mentors are individuals with experience in KMb/KT who have had some experience supervising and supporting multi-disciplinary groups of learners. They provide guidance to a group of learners as an advisor. In some cases, mentors connect a group to a community organization that is working to respond to a real, on-the-ground knowledge-to-action challenge. They support learners over the intensive sessions and, as they are able, contribute to the broader KTEA course community by supporting synchronous sessions (e.g., guest speaker, facilitator of small group conversations).

Community Partners & Reciprocity through Service Learning

KTEA works with community partners who have an active equity-to-action challenge they are navigating play a key role in the KTEA course. The course invites learners to apply concepts and practices covered in the course in a service-learning project. During the KTEA course, groups of learners will work with a

mentor to apply practices to a real-life knowledge-to action challenge in a variety of partner communities in Canada or a partner country. Working groups provide a unique opportunity for community partners, learners and mentors to collaborate in bridging the gap between knowledge and action while advancing equity. Embracing the principles of reciprocity and mutual benefit, participants actively apply and contextualize their learning to support community partners facing knowledge-to-action challenges.

Who are the community partners?

Communities are either geographically or topically connected groups (e.g., health systems team; rural community; community agency) that are interested in evidence and equity-informed responses to real-life challenges they face in their work. Often, these community partners are connected in some way to course mentors *or* have approached course coordinators with an interest in participating in this course.

They articulate a knowledge-to-action challenge, with support as needed, and collaborate with case study groups in the development of a response. Community partners are understood as any group, working in a setting where people interact with others in a public service role. From an equity science perspective, public services are instrumental in distributing power and resources in society and therefore play an important role in advancing equity. Community partners can be teams working in healthcare or health systems settings, schools or universities, not-for-profit organizations, among any other groups that see themselves as offering services to the public.

In this course, priority is given communities to be connected to knowledge-to-action challenges faced by partners in the Global South or communities navigating complex systems of inequity in Canada. Typically, communities have a long-term relationship with the mentor assigned to the case study group.

How can KTEA support community partners?

By the end of the course, communities will receive a project summary highlighting the equity implications of the KTEA challenge that they can use to inform next steps. Groups will listen for direction on the specific products (e.g., policy brief, report, social media campaign, podcast, etc.) community partners need that will directly support their capacity to advance equity, allowing for flexibility and customization. This is where KTEA offers reciprocity: learners gain rich and practical experience, and community partners receive an equity-centred and evidence-informed solution to a living problem. Overall, KTEA invites solidarity and learning together to find equity solutions that advance more equitable futures for all. One-page summaries of each project will be made publicly available.

Meeting with Community Partners

We recommend community partners meet with their case study groups virtually (or in person, if possible and if the community partner wishes) at least three times: once at the start, mid-point and end of the course. These meetings promote a collaborative approach, where learners can understand the needs and relevant equity considerations, ensure the proposed project is responsive and in good service to the partner, and create a high-quality report (or any other relevant deliverable) by the end of the course. For the intensive version of the course, we will connect groups with community partners in advance, so that their first meeting is set up on the first day of the course.

Learning Modules

Pre-Course Preparation

Learning Goal

Familiarize yourself with the course, its content and materials. Make a reading and learning plan that adapts to your own particular learning needs and goals. Set personalized KTEA learning and leadership goals.

Recommended Reading & Engagement

Look through the syllabus and welcome package: Read as much as you would like in advance!
Foundational resources on determinants of health: https://nccdh.ca/learn/sdh/
Knowledge Translation & Global Health (CAGH): https://cagh-acsm.org/en/resources/knowledge-translation (including access to an open-access, 2012 curriculum for KT)

Recommended Video

Video series on the CCGHR Principles for Equity-Centred Choices:
https://www.youtube.com/channel/UCM_D4CiO2ZRQfBVHA9FND6g

Peer Learning Groups

Learning Goal

Connect with your peer learning groups, using the scheduled session time to support your collective progress on your service-learning KTEA plan. The zoom link is available to groups during these times, and breakout rooms can be arranged—please connect with the course coordinator to ensure the zoom is open to you, should you wish to use it. We will check in daily for peer learning groups to share their progress and seek feedback and reflections from others in the course.

Module One (August 24th)

Introduction to KTEA & Foundational Concepts

Learning Goal

Provide opportunity to understand the course, clarify learning goals and interests, and establish good foundations for reading and engagement practices in the course.

Learning Objectives	Highlights
Provide students with tools for successful learning in this critically reflective environment.	**Set yourself up for a positive learning experience** You might find it helpful to create an annotated bibliography to support your learning in this course. This practice will set you up for success now and in any future work where you are expected to read, make sense of, synthesize, and interpret publications (e.g., research articles, discussion papers, reports). You might find this guide useful in setting up your own working annotated bibliography for the course.
Invite students into a practice of reflection, curiosity, and openness	**Optional Resource**: In this course, we will use critically reflective dialogue and writing. If this is new to you, here are some resources that can help

Learning Objectives	Highlights
that underpins the pedagogy of the course.	you orient yourself to the expectations and formats used to support this kind of learning. University of Waterloo guide on critical reflection: https://uwaterloo.ca/writing-and-communication-centre/critical-reflection
Introduce the course and course materials, including Canvas. Establish foundations of an engaged, collaborative learning environment.	**Content:** Course values, facilitator and coordinator, how the course will work, pedagogical approach, and how to navigate this learning environment, and introductions.

Khalatbari-Soltani, S., Jegasothy, E., Abimbola, S., & van Zwieten, A. (2026). Inequity is our biggest killer: looking upstream to tackle the burden of disease in Australia. *Medical Journal of Australia*, *224*(1), e70119. https://onlinelibrary.wiley.com/doi/abs/10.5694/mja2.70119

Marmot, M., Friel, S., Bell, R., Houweling, T. A., & Taylor, S. (2008). Closing the gap in a generation: health equity through action on the social determinants of health. *The Lancet*, *372*(9650), 1661-1669. https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(08)61690-6/abstract?cc\x3dy==

World Health Organization. (2025). World rep ort on social determinants of health equity: Executive summary. https://iris.who.int/bitstreams/751c8ee4-9ab1-46a0-9c0f-515f9274be31/download

World Health Organization. (2024). *Operational framework for monitoring social determinants of health equity*. World Health Organization. https://iris.who.int/bitstreams/ddc72764-9a74-435b-a50f-920d2ad00bed/download

Module Two (August 25, Tuesday)
Foundational Concepts, Theory & Frameworks

Learning Goal
Set strong foundations for connecting knowledge with action and begin to explore how different approaches and methods are suited to different kinds of knowledge-to-action problems.

Learning Objectives	Highlights
Compare different approaches and definitions used to describe processes and approaches for connecting knowledge with action.	Differentiate between Mode 1 (Push) and Mode 2 (Pull/Engaged/Relational) KTA Define knowledge mobilization, integrated KT and co-production Identify how sciences of process are aligned, and how they benefit from strong equity attunement

	Define equity science, and determinants of equity. Special guest speaker: Dr. Lucio Naccarella, University of Melbourne
Demonstrate how different lenses lead to understanding issues in different ways, and how different KTA problems require different kinds of responses.	Introduce different conceptualizations of health: Health as a security threat, public good, development, human right, or commodity. Explore how each of these conceptualizations of health can be found in through the COVID-19 pandemic (small groups + large-group discussion) Large group dialogue: What do you know about the relationship between research questions and research methodologies? Introduce spectrum of possible KTA responses and review different broad umbrellas; highlight focus of this course is on the processes that support connecting knowledge with action.
Introduce CCGHR Principles for Equity-Centred Research & KT	Provide background and context of the principles Share how they are being used and supportive resources

Recommended Reading & Engagement

Bisung, E., & Plamondon, K. (2023). Chapter 1. Centring equity. In E. Bisung & K. M. Plamondon (Eds.), *Equity in Global Health Research* (1st ed., Vol. 1, pp 1-14). Routledge. https://go.exlibris.link/FhW70MT4

Kothari, A., Rycroft-Malone, J., & McCutcheon, C. (2022). Chapter 1: Introduction. In I. D. Graham, J. Rycroft-Malone, A. Kothari, & C. McCutcheon (Eds.), *Research Co-Production in Healthcare* (pp. 1–13). John Wiley & Sons, Ltd. https://doi.org/10.1002/9781119757269.ch1

MacFarlane, A., & Salsberg, J. (2022). Chapter 2.1 Foundations of Research Coproduction. In I. D. Graham, J. Rycroft-Malone, A. Kothari, & C. McCutcheon (Eds.), *Research Co-Production in Healthcare* (pp. 14–33). John Wiley & Sons, Ltd. https://doi.org/10.1002/9781119757269.ch2

Plamondon, K. M., & Shahram, S. Z. (2024). Defining equity, its determinants, and the foundations of equity science. *Social Science & Medicine*, 351, 116. https://www.sciencedirect.com/science/article/pii/S0277953624003848

Additional Readings & Resources of Interest

The iKTRN offers a list of publications and has a page dedicated to the Research Co-Production in Healthcare book--all of these are excellent resources for learners in this course. Visit the site here: https://iktrn.ohri.ca/resources/publications/

Bowen, Sarah, and Ian D. Graham. From Knowledge Translation to Engaged Scholarship: Promoting Research Relevance and Utilization. *Archives of Physical Medicine and Rehabilitation*, vol. 94, no. 1 Suppl, 2013, p. S3. Open Access: https://www.sciencedirect.com/science/article/pii/S0003999312009227

Dunn, S. I., Bhati, D. K., Reszel, J., Kothari, A., McCutcheon, C., & Graham, I. D. (2023). Understanding how and under what circumstances integrated knowledge translation works for people engaged in collaborative research: meta-synthesis of IKTRN casebooks. *JBI Evidence Implementation*, *21*(3), 277-293. https://www.ovid.com/jnls/ijebh/fulltext/10.1097/xeb.0000000000000367~understanding-how-and-under-what-circumstances-integrated

Graham, I. D., Logan, J., Harrison, M. B., Straus, S. E., Tetroe, J., Caswell, W., & Robinson, N. (2006). Lost in knowledge translation: time for a map? Journal of continuing education in the health professions, 26(1), 13-24. Open Access: https://onlinelibrary.wiley.com/doi/abs/10.1002/chp.47

Nguyen T, Graham ID, Mrklas KJ, Bowen S, Cargo M, Estabrooks CA, Kothari A, Lavis J, Macaulay AC, MacLeod M, Phipps D, Ramsden VR, Renfrew MJ, Salsberg J, Wallerstein N. How does integrated knowledge translation (IKT) compare to other collaborative research approaches to generating and translating knowledge? Learning from experts in the field. Health Res Policy Syst. 2020 Mar 30;18(1):35. Open Access: https://health-policy-systems.biomedcentral.com/articles/10.1186/s12961-020-0539-6

Plamondon, K. M., & Bisung, E. (2019). The CCGHR Principles for Global Health Research: Centering equity in research, knowledge translation, and practice. *Social Science & Medicine*, *239*, 112530.

Plamondon, K. M. (2022). Equity at a time of pandemic. *Health Promotion International*, *37*(1), daab034. Open Access: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8194674/

Plamondon, K. (2026). Thinking Habits Determine Possibilities for Equity: Results of a Critically Reflective Dialogue Study. *Global Qualitative Nursing Research*, 13. https://journals.sagepub.com/doi/full/10.1177/23333936261463899

Module Three (August 25, Tuesday)
Understanding the 'knowledge' of KMb/KT

Learning Goal
Illuminate and explore the role of worldview (paradigm, lens) in how knowledge is recognized as knowledge and situate this in the context of equity and health.

Learning Objectives	Highlights
Review content from previous session, provide opportunity to clarify questions or concepts.	Review content from previous session, provide opportunity to clarify questions or concepts.
Invite reflexive consideration of how notions of 'knowledge' (what's real, how we know about it, and how we measure and monitor it or act on it) are dynamic.	Epistemology game (small group discussion + large group report out)

Explore notions of 'evidence' and what 'counts' as knowledge.	Briefly introduce hierarchies of evidence and epistemic (in)justice, touching on ways in which systems of knowledge are privileged or devalued. Discuss why it matters in KTEA work. Special guest speaker: Ms. Kim Barnes, JP Centre
Extend definitions important in this field of connecting knowledge with action	Knowledge Production Knowledge Management Knowledge Utilization Knowledge Synthesis

Recommended Reading

Burkhart, S., & Schneider, F. (2026). Whose knowledge counts for transformative change?–Operationalizing epistemic justice for transdisciplinary knowledge co-production. *Environmental Science & Policy*, *176*, 104322. https://www.sciencedirect.com/science/article/pii/S1462901126000158

Plamondon, K. M., Shahram, S., Abu, T. Z., & Hanson, L. (2024). Chapter 2. Weaving ways of knowing into pathways toward equitable futures. In E. Bisung & K. M. Plamondon (Eds.), *Equity in Global Health Research* (1st ed., Vol. 1, pp. 15–35). Routledge. https://doi.org/10.4324/9781003028130-2

Plamondon, K., Ndumbe-Eyoh, S., & Shahram, S. (2022). 2.2 Equity, Power, and Transformative Research Coproduction. In I. D. Graham, J. Rycroft-Malone, A. Kothari, & C. McCutcheon (Eds.), *Research Co-Production in Healthcare* (pp. 34–53). John Wiley & Sons, Ltd. https://doi.org/10.1002/9781119757269.ch3

Additional Readings & Resources of Interest

Bowen, Sarah. Marginalized Evidence: Effective Knowledge Translation Strategies for Low Awareness Issues. Healthcare Management Forum, vol. 19, no. 3, Elsevier Inc, 2006, pp. 38–44, doi:10.1016/S0840-4704(10)60153-6. Open Access: https://www.sciencedirect.com/science/article/pii/S0840470410601536

Kothari, Anita R., et al. Uncovering Tacit Knowledge: A Pilot Study to Broaden the Concept of Knowledge in Knowledge Translation. BMC Health Services Research, vol. 11, no. 1, BioMed Central, 2011, p. 198, doi:10.1186/1472-6963-11-198. Open Access: https://bmchealthservres.biomedcentral.com/articles/10.1186/1472-6963-11-198

Michaels, J. A. (2020). Potential for epistemic injustice in evidence-based healthcare policy and guidance. *Journal of Medical Ethics*. Open Access: https://jme.bmj.com/content/early/2020/05/26/medethics-2020-106171?versioned=true

Parkhurst, J. O., & Abeysinghe, S. (2016). What constitutes "good" evidence for public health and social policy-making? From hierarchies to appropriateness. *Social Epistemology*, *30*(5-6), 665-679. Open Access: https://www.tandfonline.com/doi/full/10.1080/02691728.2016.1172365

Fischer, H. T., & Koduah, A. (2025). Whose Knowledge Counts? Equity, Epistemic Justice, and Reforming Infectious Disease Research Culture. *Epidemics*, 100883. https://www.sciencedirect.com/science/article/pii/S1755436525000714

Fletcher, A. (2024). … And (epistemic) justice for all: a cautionary tale of knowledge inequality in participatory research. *Quality in Ageing and Older Adults*, *25*(1), 68-79. https://www.emerald.com/qaoa/article-abstract/25/1/68/1220997/And-epistemic-justice-for-all-a-cautionary-tale-of?redirectedFrom=fulltext

Recommended Video: Chimamanda Ngozi Adichi's Power of a Single Story
Caveat: There is some debate among some critical scholars in the United States focused on this speaker's position on the LGTBQ2S+ community. This ted talk remains excellent, and a good window into self-reflection on how our worldview affects what we understand about others.
Questions: What single stories about health and global health are at play in your sphere (e.g., your education or discipline, in your conversations)? What single stories about the world and global health exist in public dialogue? How do these single stories give shape to how we think about health, health problems, and what to do about them?

Module Four (August 27, Thursday)

Relationships between research, policy, practice and society

Learning Goal

Situate process of connecting knowledge with action in complex systems settings, introducing tools and strategies that can support and guide a nuanced and equity-centred analysis of both the setting and issues involved in a knowledge-to-action problem.

Learning Objectives	Highlights
Review content from previous session, provide opportunity to clarify questions or concepts.	Review content from previous session, provide opportunity to clarify questions or concepts.
Explore issues of governance, power, equity and complexity in KTA.	Define governance Define practice and policy Discuss how they sit in relationship to each other (coherence) Introduce context analysis in complex systems settings Provide an overview of some examples for how to explore different dimensions of context and systems as it relates to defining the 'system', understanding the problem, designing responses Special guest speaker: Ms. Lisa Knox, Equity Science Lab at UBC

Recommend Readings

El-Jardali, Fadi, et al. (2012). A Multi-Faceted Approach to Promote Knowledge Translation Platforms in Eastern Mediterranean Countries: Climate for Evidence-Informed Policy. *Health Research Policy And*

Systems, 10(15). Open Access: https://health-policy-systems.biomedcentral.com/articles/10.1186/1478-4505-10-15

Kania, J., Kramer, M., & Senge, P. (2018). The water of systems change. Open Access: https://policycommons.net/artifacts/1847266/the-water-of-systems-change/2593518/

Cole, M. J. (2023). Evaluative thinking. *Evaluation journal of Australasia*, *23*(2), 70-90.

Recommended Resources and Networks

EQUINET Africa: https://www.equinetafrica.org
Recommend visiting their most recent publications, including policy briefs and rapid reviews on climate change and health systems

Institute on Governance: https://iog.ca/what-is-governance/

McMaster Health Forum: Knowledge translation platforms and evidence support systems
https://www.mcmasterforum.org/evaluate-innovations/forum-lab/ktpe
https://www.mcmasterforum.org/networks/evidence-commission/domestic-evidence-support-systems

Additional Readings & Resources of Interest

Bowen, Sarah, et al. (2019). Experience of Health Leadership in Partnering With University-Based Researchers in Canada – A Call to 'Re-Imagine' Research. *International Journal of Health Policy & Management*, 8(12): 684-699. Open Access: https://www.ijhpm.com/article_3656.html

Bowen, Sarah, and Ian D. Graham. (2013). From Knowledge Translation to Engaged Scholarship: Promoting Research Relevance and Utilization. Archives of Physical Medicine and Rehabilitation, 94(1) Suppl, 2 p. S3. Open Access: https://www.sciencedirect.com/science/article/pii/S0003999312009227

Guindon, G. E., et al. (2010). Bridging the Gaps between Research, Policy and Practice in Low- and Middle-Income Countries: A Survey of Health Care Providers. *CMAJ: Canadian Medical Association Journal = Journal De L'association Medicale Canadienne*, 182(9): E362–72. Open Access: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2882467/

Holmes, B. J., et al. Mobilising Knowledge in Complex Health Systems: A Call to Action. (2017). *Evidence & Policy*, 13(3): 539–60, doi:10.1332/174426416X14712553750311. Open Access: link here

Kasonde, Joseph M., and Sandy Campbell. (2012). Creating a Knowledge Translation Platform: Nine Lessons from the Zambia Forum for Health Research. *Health Research Policy And Systems*, 10(31). Open Access: https://health-policy-systems.biomedcentral.com/articles/10.1186/1478-4505-10-31

Plamondon, Katrina M. (2021). Reimagining Researchers in Health Research; Comment on 'Experience of Health Leadership in Partnering with University-Based Researchers in Canada: A Call to "Re-Imagine" Research. International Journal of Health Policy & Management 10(2): 86-89. Open Access: https://www.ijhpm.com/article_3742.html

Plamondon, K. M., and J. Pemberton. (2019). Blending Integrated Knowledge Translation with Global Health Governance: An Approach for Advancing Action on a Wicked Problem. Health Research Policy and

Systems, 17(1Open Access: https://health-policy-systems.biomedcentral.com/articles/10.1186/s12961-019-0424-3

Module Five (August 27, Thursday)

Equity-Advancing Approaches & KTA Tools

Learning Goal

Examine a systematic approach to equity action-analysis, exploring and applying the concepts of worldview, cohesion, potential and accountability with examples. Extend this framework for equity action to the service-learning focus for peer groups.

Learning Objectives	Highlights
Review content from previous session, provide opportunity to clarify questions or concepts.	Review content from previous session, provide opportunity to clarify questions or concepts.
Explore core concepts needed to engage in systematic equity action analysis, as a structured way of connecting knowledge with action *for equity*.	Define power Define four elements of SEAA Discuss how they sit in relationship to each other Provide examples

Recommended Readings

Cameron, J., Kothari, A., & Fiolet, R. (2025). Addressing power imbalance in research: exploring power in integrated knowledge translation health research. *Research Involvement and Engagement*, *11*(1), 35.

Kirkness, V. J., & Barnhardt, R. (1991). First Nations and higher education: The four R's—Respect, relevance, reciprocity, responsibility. *Journal of American Indian Education*, 1-15. https://www.jstor.org/stable/24397980

Nixon, S. A. (2019). The coin model of privilege and critical allyship: implications for health. *BMC Public Health*, 19(1), 1-13. Open Access: https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-019-7884-9

Plamondon, K. M., Dixon, J., Brisbois, B., Pereira, R. C., Bisung, E., Elliott, S. J., ... & Shahram, S. (2023). Turning the tide on inequity through systematic equity action-analysis. *BMC Public Health*, 23(1), 890. Open Access: https://link.springer.com/article/10.1186/s12889-023-15709-5

Sriram, V., Topp, S. M., Schaaf, M., Mishra, A., Flores, W., Rajasulochana, S. R., & Scott, K. (2018). 10 best resources on power in health policy and systems in low-and middle-income countries. *Health Policy and Planning*, 33(4), 611-621. Open Access: https://academic.oup.com/heapol/article/33/4/611/4868632?login=true

Additional Readings & Resources of Interest

Plamondon, K. M. A Tool to Assess Alignment between Knowledge and Action for Health Equity. *BMC Public Health*, vol. 20, no. 1, 2020, doi:10.1186/s12889-020-8324-6. Open Access: https://link.springer.com/article/10.1186/s12889-020-8324-6

Dunn, S. I., Bhati, D. K., Reszel, J., Kothari, A., McCutcheon, C., & Graham, I. D. (2023). Understanding how and under what circumstances integrated knowledge translation works for people engaged in collaborative research: Metasynthesis of IKTRN casebooks. *JBI Evidence Implementation*, 21(3), 277–293. https://journals.lww.com/ijebh/fulltext/2023/09000/understanding_how_and_under_what_circumstances.10.aspx

Recommended Video:
What is Ethical Space? Different knowings (Willie Ermine)
https://www.youtube.com/watch?v=85PPdUE8Mb0

Module Six (August 28, Friday)
Dialogue-based engagement

Learning Goal
Introduce and build foundations for practice in dialogue-based engagement, focused on deliberative dialogue.

Learning Objectives	Highlights
Review content from previous session, provide opportunity to clarify questions or concepts.	Review content from previous session, provide opportunity to clarify questions or concepts.
Introduce practices and approaches for equity-centred engagement.	Define engagement and inclusion, explore what notions of authentic partnering actually look like and mean Introduce deliberative dialogue, relational practices Equity-centred perspective analysis and planning How to prepare for engagement: knowledge synthesis and communication; creating great questions

Assigned Readings
Boyko, J. A., Lavis, J. N., Abelson, J., Dobbins, M., & Carter, N. (2012). Deliberative dialogues as a mechanism for knowledge translation and exchange in health systems decision-making. Social science & medicine, 75(11), 1938-1945. Open Access: https://www.sciencedirect.com/science/article/pii/S0277953612005114

Jull, J. E., Davidson, L., Dungan, R., Nguyen, T., Woodward, K. P., & Graham, I. D. (2019). A review and synthesis of frameworks for engagement in health research to identify concepts of knowledge user engagement. *BMC Medical Research Methodology*, 19(1), 211. Open Access: https://bmcmedresmethodol.biomedcentral.com/articles/10.1186/s12874-019-0838-1

Video: An introduction to deliberative dialogue
https://www.youtube.com/watch?v=D3CPd_nRcX0

Additional Readings & Resources of Interest

Bowen, Sarah, et al. (2016). Beyond ' Two Cultures ': Guidance for Establishing Effective Researcher / Health System Partnerships. *International Journal of Health Policy and Management*, 6(1): 1–16. Open Access: https://www.ijhpm.com/article_3221.html

Hoekstra F, Mrklas KJ, Khan M, McKay RC, Vis-Dunbar M, Sibley KM, Nguyen T, Graham ID; SCI Guiding Principles Consensus Panel, Gainforth HL. (2020).A review of reviews on principles, strategies, outcomes and impacts of research partnerships approaches: a first step in synthesising the research partnership literature. *Health Res Policy Syst.* 18(1):51. Open Access: https://pubmed.ncbi.nlm.nih.gov/32450919/

Jull J, King A, King M, Morton-Ninomiya M, Jacklin K, Moody-Corbett P, Moore J, Graham ID. (2020). A Principled Approach to Research Conducted with Inuit, Métis and First Nations Peoples: promoting engagement inspired by the CIHR Guidelines Involving Aboriginal People. *International Indigenous Policy Journal*, 11(2):1-30. Open Access: https://ojs.lib.uwo.ca/index.php/iipj/article/view/10635/8582

Jull JE, Davidson L, Dungan R, Nguyen T, Woodward KP, Graham ID. (2019). A review and synthesis of frameworks for engagement in health research to identify concepts of knowledge user engagement. *BMC Med Res Methodol.* 19(1):211. Open Access: https://pubmed.ncbi.nlm.nih.gov/31752691/

Plamondon, Katrina, and Jennifer Hatfield. (2017). Using Dialogue-Based Methods to Create Normative Principles for Global Health Research. SAGE Research Methods Cases, vol. Part 2. https://methods.sagepub.com/case/dialogue-based-methods-create-normative-principles-global-health-research#_

Plamondon, K. M., et al. (2015). Analyzing Data Generated Through Deliberative Dialogue. *Qualitative Health Research*, 25(11): 1529-1539. https://journals.sagepub.com/doi/abs/10.1177/1049732315581603

Sibbald SL, Kang H, Graham ID. (2019). Collaborative health research partnerships: a survey of researcher and knowledge-user attitudes and perceptions. *Health Res Policy Syst.* 2019 Nov 27;17(1):92. Open Access: https://pubmed.ncbi.nlm.nih.gov/31775829/

Tugendhaft, A., Hofman, K., Danis, M., Kahn, K., Erzse, A., Twine, R., ... & Christofides, N. (2021). Deliberative engagement methods on health care priority-setting in a rural South African community. *Health Policy and Planning*, 36(8), 1279-1291. Open Access: https://academic.oup.com/heapol/article/36/8/1279/6288525

Ward, V. (2026). Why, Whose, What and How? A Framework for Knowledge Mobilisers. (2016). *Evidence & Policy*, no. June 3, p. 22. Open Access: https://research-repository.st-andrews.ac.uk/handle/10023/13469

Zych, M.M., Berta W.B., & Gagliardi A.R. (2020). Conceptualising the initiation of researcher and research user partnerships: a meta-narrative review. *Health Res Policy Syst*. 18(1):24. Open Access: https://pubmed.ncbi.nlm.nih.gov/32070367/

Module Seven & Eight (August 28, Friday)

Political Context Analysis, Interests and influencers analysis

Learning Goal

Examine context and policy analysis approaches.

Learning Objectives	Activities
Review content from previous session, provide opportunity to clarify questions or concepts.	**Content:** review from previous session (slide deck)
Introduce and provide opportunity to explore context analysis and its relevance to KTEA.	3-I approach and context mapping Interests and influencers mapping: how to plan who to reach out to, and for what purpose Why this matters for tailoring KTEA responses-examples of different kinds of KMb products

Recommended Readings

NCCHPP: Understanding policy developments and choices through the "3-I" framework: Interests, ideas and institutions. Open Access: https://www.ncchpp.ca/docs/2014_ProcPP_3iFramework_EN.pdf

Plamondon, K., Banner, D., Cary, M. A., Faulkner, M., Gainforth, H., Ghag, K., ... & Wick, U. (2023). Relational practices for meaningful inclusion in health research: Results of a deliberative dialogue study. *Health Expectations.* Open Access: https://onlinelibrary.wiley.com/doi/full/10.1111/hex.13865

Additional Readings & Resources of Interest

Thow, A. M., Erzse, A., Asiki, G., Ruhara, C. M., Ahaibwe, G., Ngoma, T., ... & Hofman, K. (2021). Study design: policy landscape analysis for sugar-sweetened beverage taxation in seven sub-Saharan African countries. *Global Health Action*, 14(1), 1856469. Open Access: https://www.tandfonline.com/doi/full/10.1080/16549716.2020.1856469

Bergen, N., Zhu, G., Yedenekal, S. A., Mamo, A., Abebe Gebretsadik, L., Morankar, S., & Labonté, R. (2020). Promoting equity in maternal, newborn and child health–how does gender factor in? Perceptions of public servants in the Ethiopian health sector. *Global Health Action*, 13(1), 1704530. Open Access: https://www.tandfonline.com/doi/full/10.1080/16549716.2019.1704530

Module Nine (September 25th)

Review, Synthesis and Action Planning

Learning Goal

Students will synthesize complex content covered in the course, engaging in critical reflection and dialogue about their learning and future application of content in their lives and careers. Students will create an action statement about what they will do differently, as a result of insights gained from this course.

Recommended Readings

Hanson, L. (2017). From reflexivity to collectivity: Challenging the benevolence narrative in global health. *Canadian Medical Education Journal*, 8(2), e1–e3. https://pmc.ncbi.nlm.nih.gov/articles/PMC5669287/

Maani, N., Abdalla, S. M., Ettman, C. K., Parsey, L., Rhule, E., Allotey, P., & Galea, S. (2023). Global health equity requires global equity. *Health Equity*, *7*(1), heq-2022. https://journals.sagepub.com/doi/full/10.1089/heq.2022.0169

Oti, S.O. & Ncayiyana, J. (2021). Decolonising global health: Where are the Southern voices? *BMJ Global Health* 6(7), 3006576. https://gh.bmj.com/content/6/7/e006576