Translating for equity impact: A community engaged approach to integrate health equity into the Translational Science Benefits Model



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EVALUATING RESEARCH IMPACT

Historically, researchers have focused on linking research to scientific outputs like publications and grants. But policymakers, the public, and institutional leadership care about the larger impact of research (e.g., lives saved and improved cost-effectiveness).

Translational Science Benefits Model

Developed in 2017, the **Translational Science Benefits Model** (TSBM) offers a new approach for demonstrating the impact of science in the broader community. The model identifies 30 tangible benefits that demonstrate research impact across four domains:







Economic





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- Clinical: adoption and implementation of new tools and procedures in clinical settings
- Community: enhancement of healthcare or community and population well-being
- **Economic**: commercial or financial improvements
- Policy: involvement with the policy process or formal adoption into policies, legislation, or governmental standards

INTEGRATING EQUITY

In the years since the development of the TSBM, there has been a growing emphasis on addressing health and social inequities. Healthy People 2030 included achieving health equity, ensuring that "everyone has a fair and just opportunity to be healthy," as an overarching goal of their initiative to improve health and well-being over the next decade.²

As researchers increasingly focus on advancing health equity, the need to adapt the TSBM to recognize and evaluate the equity impacts of research has become evident. In response to this need, the TSBM team is taking a community-engaged approach to integrate health equity into the model. Involving community members in this process will result in a model that better reflects the perspectives and priorities of those most affected by health inequities, demonstrating an inclusive, collaborative approach to health research.

The adaptation process includes three key objectives:

- Expand existing TSBM benefit definitions to include health equity impacts
- Identify and add new TSBM benefits to account for health equity benefits
- Provide guidance to researchers for planning, tracking, and demonstrating the equity impact of their work

Luke DA, Sarli CC, Suiter AM, et al. The Translational Science Benefits Model: a new framework for assessing the health and societal benefits of clinical and translational sciences. *Clin Transl Sci.* 2018;11(1):77-84. doi:10.1111/cts.12495

Gómez CA, Kleinman DV, PronkN, et al. Addressing Health Equity and Social Determinants of Health Through Healthy People 2030. *Journal of Public Health Management and Practice*, 27(Supplement 6), S249–S257. https://doi.org/10.1097/PHH.00000000001297

ADAPTING THE TRANSLATIONAL SCIENCE BENEFITS MODEL

The process of adapting the TSBM consists of three phases. First, a literature review on equity impact in health research was conducted. Next, community engagement sessions were held to gain insight from community members regarding their personal and professional experiences of health equity and research. The ongoing final phase involves integrating information from both the literature review and the community engagement sessions to refine the TSBM.

Model adaptation timeline





Literature review of health equity impacts

A literature review of over 50 articles was conducted to assess how equity impact is measured in health research. The review focused on understanding how existing TSBM benefits relate to health equity and identifying potential new benefits to include in the model.



Community engagement sessions

To ensure community members had an active role in model adaptation, the TSBM team participated in two community engagement sessions.

The first session, conducted by the Institute of Clinical and Translational Research (ICTS) at Washington University in St. Louis, was comprised of community organization leaders with professional experience related to health equity. Participants were



introduced to the TSBM and then asked to respond to three key questions: 1) What is the most significant equity impact your work has had?; 2) What equity benefits should we consider adding to the TSBM?; and 3) Are there any equity considerations embedded within the existing TSBM benefits that we should highlight?

The second session was facilitated by the Community Advisors on Research Design Strategies (CARDS) at the University of Wisconsin-Madison and included community members from historically underrepresented populations. Participants shared personal experiences related to health equity, including



positive and negative interactions with research and health care. After learning about the TSBM, participants provided input on essential benefits of health research and discussed how to ensure equitable distribution of benefits.



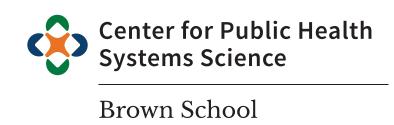
Model refinement

The final phase of model adaptation will integrate information from the literature review and insights from the community engagement sessions to enhance the TSBM's ability to identify and evaluate equity impacts of research.









LITERATURE REVIEW FINDINGS

The literature review identified equity dimensions of existing TSBM benefits in each domain, as well as 15 potential new benefits to add to the model.

Potential New TSBM Benefits

- Workforce development
- Partnerships
- Community engagement
- Power sharing
- Community capacity
- Education access & quality
- Duilt anning and
- Built environment
- Data equitySustainability

Economic stability

Affordability of care

Hiring diversity

Health impact assessment

Equitable enforcement

Community context

COMMUNITY INSIGHTS

In the engagement session facilitated by ICTS, community organization leaders discussed several equity benefits to consider adding to the TSBM, including reallocation of resources and funding, redistribution of power, increased access to services among marginalized populations, and patient-centered research and dissemination efforts. The group also provided guidance on how to expand existing benefits and those identified in the literature review to better evaluate equity impacts.

During the CARDS session, community members drew upon lived experience to identify essential equity-related health benefits, including accessible care, affordable care options, timely treatment, expanded research reach, and increased education and awareness of health issues among community leaders and policymakers.

Participants also emphasized the importance of cultivating knowledge, understanding, and trust between community members, health care providers, and researchers. One community member noted:

"Some people aren't even attempting to try (to access health care) because they don't know, they don't trust, or they just don't understand."

NEXT STEPS

The TSBM team is in the process of synthesizing literature review findings and community insights. This information will be used to adapt the TSBM to intentionally and effectively reflect the health equity impacts of research. Importantly, the refined model will be deeply informed by the knowledge and lived experience of community members.

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