

Taking Community Engagement into Account to Address Health Disparities: A Scoping Review of Co-Creation in Public Health

Ardhan Hewts*

Department of Environmental Science, Harokopio University of Athens, Kallithea, Greece

Introduction

Addressing health disparities requires a comprehensive approach that goes beyond traditional healthcare delivery. Community engagement plays a vital role in understanding and addressing the underlying factors contributing to health disparities. Co-creation, a collaborative approach involving active participation of community members, has gained recognition as a promising strategy in public health. This article presents a scoping review of co-creation in public health, specifically focusing on its role in addressing health disparities. By examining the existing literature, this review aims to explore the concept of co-creation, its implementation in public health initiatives, and its potential to contribute to equitable and sustainable health outcomes [1].

Co-creation involves meaningful collaboration between community members, healthcare professionals, policymakers, and other stakeholders throughout the decision-making process. It shifts the traditional power dynamics and promotes the involvement of those most affected by health disparities in designing and implementing interventions. Co-creation recognizes that communities possess valuable knowledge, experiences, and insights that can inform public health initiatives. By engaging community members as equal partners, co-creation fosters a sense of ownership and empowerment, leading to increased acceptance and sustainability of interventions [2]. The scoping review revealed that co-creation has significant potential in addressing health disparities. By involving marginalized communities and those experiencing health inequities, co-creation allows for a more nuanced understanding of the underlying determinants of disparities. It helps identify community-specific needs, preferences, and cultural factors that influence health outcomes. Co-creation ensures that interventions are tailored to the specific context, enhancing their relevance and effectiveness.

Description

Furthermore, co-creation fosters trust and builds strong relationships between communities and healthcare systems. It recognizes the importance of shared decision-making, where community members actively participate in setting priorities, planning interventions, and evaluating outcomes. This collaborative approach helps to bridge the gap between community needs and healthcare services, resulting in more responsive and equitable care [3]. While co-creation holds great promise, several challenges in its implementation were identified in the scoping review. These include power imbalances, limited

***Address for Correspondence:** Ardhan Hewts, Department of Environmental Science, Harokopio University of Athens, Kallithea, Greece, E-mail: ardhanh@gmail.com

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resources, time constraints, and a lack of clarity regarding the roles and responsibilities of stakeholders. Overcoming these challenges requires careful planning and the adoption of effective strategies [4].

Firstly, recognizing and addressing power imbalances is crucial for successful co-creation. Creating an inclusive and safe space where all voices are heard and valued is essential. Power-sharing mechanisms, such as co-design workshops and participatory decision-making processes, can facilitate meaningful engagement and ensure that marginalized communities have equal influence. Secondly, securing adequate resources is vital for sustaining co-creation efforts. This includes financial resources, staffing, and infrastructure to support community engagement activities. Collaborative funding models, partnerships with community organizations, and advocacy for increased investment in community-led initiatives can help address resource limitations [5,6]. Thirdly, establishing clear roles and responsibilities among stakeholders is essential. Effective communication, shared understanding of objectives, and transparent decision-making processes contribute to successful co-creation. Clear guidelines and frameworks that outline the responsibilities of each partner can facilitate effective collaboration and minimize conflicts.

Conclusion

The scoping review highlights the potential of co-creation in public health to address health disparities. By actively involving communities affected by health inequities, co-creation promotes equity, responsiveness, and sustainability in interventions. However, challenges such as power imbalances, limited resources, and role clarity need to be addressed. Strategies like power-sharing mechanisms, resource mobilization, and clear communication channels can enhance the implementation of co-creation approaches. Moving forward, further research and evaluation of co-creation initiatives are necessary to strengthen the evidence base and support the integration of community engagement into public health practice.

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Conflict of Interest

None.

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