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## POSTER ABSTRACT

### Aiming for equity in care provision

23<sup>rd</sup> International Conference on Integrated Care, Antwerp, Flanders, 22-24 May 2023

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Since the introduction of the triple aim for health quality improvement around 2008 the suggested multi-layered approach to quality improvement has gained ground. The idea is that when working for quality improvement in the health and care sector one needs to have several aims in sight at the same time. Originally the three aims singled out were: enhancing patient experience, improving population health, and reducing costs. These were then expanded to include an additional goal of improving the work life of health care providers (the quadruple aim). Now, the last addition to the idea is a new layer; namely equity (the quintuple aim).

This presentation addresses the discussion on how to work towards the newly added aim on equity. In Scandinavia and elsewhere in Europe we are moving towards more integrated care, but also more complex care economies consisting of an increasing number of private and public providers that in various ways depend also on domestic agents. Indeed, the ongoing transformations of care work holds in it several potential routes for change when it comes to equity, and it is of vital importance we keep our gaze on these issues to ensure a desired outcome.

From gender research it has been pointed out that research addressing inequality and equity in (care) work, often remain on an individual micro level, when instead we need to lift our gaze to culture and social structure to get the whole picture. To meet this challenge the concept of gender regimes can be helpful; it points to the variation in the political and organizational contexts in which care work institutions are founded and embedded. The presentation will explore whether this approach, in combination with a look towards care economy as a societal field going across domestic, public and private spheres, can allow for a conceptual discussion on how we can succeed in increasing awareness of equity and inclusion in health care improvement work.