



# Global Network for Health in All Policies

## Minutes of the Steering Committee meeting of the Global Network for Health in All Policies (GNHiAP)

October 9, 2019. Québec, Canada

Meeting attendees are listed in Annex 1 and pictures from the meeting are presented in Annex 2.

### Introduction

The goal of the Steering Committee's working meeting was to review and update the decisions made at the Network's first meeting in October 2017, in Thailand.<sup>1</sup>

The following sections contain a review of the 2017 items that were discussed and updated during the October 9, 2019 meeting. The document on governance and on the revised workplan is available on the Network's website.<sup>2</sup>

### Vision

The Network's vision, adopted in 2017, is as follows: "The HiAP [Health in All Policies] approach is strengthened with the aim of implementing the SDGs [Sustainable Development Goals] and facilitating progress on Universal Health Coverage."

The concept of universal health coverage was discussed by the members present, which led to an amended proposal aimed at more explicitly referencing action on the determinants of health that fall outside the health sector.

New wording was proposed and adopted, although it needs to be reworked to avoid repeated use of the word universal.

"Promotion of health and well-being; universal access to health and universal health coverage."

### Network membership

The precise number of current members remains to be confirmed; the total ranges between 20 and 30.

The question of introducing membership fees to finance a secretariat was ruled out. However, the desire for members to be actively involved was expressed. The following criteria for joining the Network were reiterated and specified:

- Be willing to actively participate as a member;
- Demonstrate significant interest in or possess experience with HiAP;

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<sup>1</sup> The report on the first meeting of the Global Network for Health in All Policies is available online at: [https://actionsdg.ctb.ku.edu/wp-content/uploads/2018/02/GNHiAP-Thailand-meeting-report\\_FINAL\\_for-web.pdf](https://actionsdg.ctb.ku.edu/wp-content/uploads/2018/02/GNHiAP-Thailand-meeting-report_FINAL_for-web.pdf)

<sup>2</sup> Available online at: <https://actionsdg.ctb.ku.edu/gn-hiap/>



- Be approved by the Executive Committee (ExCom). Applications for membership are made using the form available on the Network's website, with final approval resting with the ExCom.

The distribution for the members' various affiliations proposed in 2017 remains unchanged: 50% from governments; 20% from academia; 15% from civil society organizations; and 15% from United Nations agencies.

Work remains to be done to demonstrate the benefits of belonging to the Network and to ensure its stability. It was suggested that the simple and fast means offered by technology platforms be relied on more heavily than conceptual documents. The introduction video produced in Thailand for the Network's second meeting was cited as an example.<sup>3</sup>

### Governance and structure

Secretariat: The absence of a permanent structure to support the ExCom and ensure communication with members was pinpointed as a significant obstacle to the Network's efficient organization.

Québec agreed to financially support the establishment of a secretariat, allocating one person half-time for a period of one year. Support for the secretariat could be provided by the members on a rotating basis.

Structure: The governance structure adopted in 2017 was reviewed and streamlined. The decision was thus made to abolish the Steering Committee. An Executive Committee composed of 5 or 6 members will be formed and will be supported by the Secretariat.

Chairman: The position of Chairman was assigned to Dr. Horacio Arruda, National Director of Public Health and Assistant Deputy Minister for the Public Health Division of Québec's Department of Health and Social Services (Direction générale de la santé publique du ministère de la Santé et des Services sociaux du Québec).

### Workplan

The workplan adopted in 2017 was reviewed and updated. In the following table, the first column reiterates the workplan activities as adopted in 2017, and the right column presents the items discussed and the decisions made.<sup>4</sup>

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<sup>3</sup> Available online at: [https://www.youtube.com/watch?v=yvZ3ZPM1\\_wA&t=1579s](https://www.youtube.com/watch?v=yvZ3ZPM1_wA&t=1579s)

<sup>4</sup> The table includes those items in the original workplan (2017) that were discussed during the October 9, 2019 meeting. The workplan was updated on the Network's website.



Workplan activities	Follow-up and decisions
<b>HiAP advocacy</b>	
<ul style="list-style-type: none"> <li>Mapping of key events and meetings at the global and regional levels, and seeking opportunities to organize GNHiAP events on the margins of these events/meetings.</li> </ul>	<ul style="list-style-type: none"> <li>Since the last side event at the 2018 71<sup>st</sup> World Health Assembly, no events have been organized on the margins of international meetings, despite the efforts of members of the ExCom.</li> <li>A few upcoming events:               <ul style="list-style-type: none"> <li>New Zealand is organizing a second national event focused on HiAP. It is hoped that Network members will participate.</li> <li>Dr. Arruda will study the possibility of organizing meetings, as needed, on the margins of the World Health Organization’s annual meetings.</li> </ul> </li> <li>The need to establish a calendar of national and international events to share with members was reiterated. This action could be undertaken by the Network’s new Secretariat.</li> </ul>
<ul style="list-style-type: none"> <li>Reaching out to Ministers of Health and/or Presidents to gain support for the Network.</li> </ul>	<ul style="list-style-type: none"> <li>This is the responsibility of each member, but could be supported by the promotional documents available.</li> </ul>
<ul style="list-style-type: none"> <li>Developing priority-setting guidance for the facilitation of strengthening the linkages between HiAP and SDGs.</li> </ul>	<ul style="list-style-type: none"> <li>This is an ongoing need. Although the support of academia is desirable, preference must be given to reference documents related to the implementation of the HiAP approach.</li> </ul>
<ul style="list-style-type: none"> <li>Utilizing social media and big data as tools for advocacy.</li> </ul>	<ul style="list-style-type: none"> <li>This strategy must be strengthened with the help of user-friendly formats, such as videos or <i>hashtags on social media such as Twitter</i>.</li> </ul>
<b>Governance</b>	
<ul style="list-style-type: none"> <li>Expanding the network: Identification of potential new members, including international organizations from non-health sectors, non-governmental organizations, grass-roots organizations and academia.</li> </ul>	<ul style="list-style-type: none"> <li>Several strategies can be used, such as the production of a promotional video illustrating the benefits of Network membership and the recruitment of new members at meetings linked to the subject of HiAP.</li> <li>All members share this responsibility and can use a range of communication channels.</li> <li>Stakeholders at the municipal level could be contacted to obtain their perspective on the issue.</li> <li>However, the point was made that it is important to consolidate the current Network before expanding too widely. Communication between existing members must be strengthened.</li> <li>An admission form should be made available online. This form would indicate the admission criteria, the most important of which is the intention to implement a HiAP approach.</li> <li>New members would be invited to respond to the survey that was developed for use in producing the Global Status Report on HiAP. South Australia agreed to make the necessary adjustments.</li> </ul>
<ul style="list-style-type: none"> <li>Organizing annual/bi-annual strategic meeting. The host country and the main themes of the meeting will alternate, and the focus will be on technical and political aspects.</li> </ul>	<ul style="list-style-type: none"> <li>These meetings should be opportunities to advance and facilitate assimilation of the WHO reference framework, at all levels.</li> <li>It was suggested that annual meetings alternate between web conferences and in-person meetings.</li> </ul>



Workplan activities	Follow-up and decisions
<ul style="list-style-type: none"> <li>Regular teleconferences: Steering Committee once every 6 months, Executive Committee once every two months.</li> <li>Establishing a reliable and convenient channel of communication and information sharing, such as a website or a newsletter.</li> </ul>	<ul style="list-style-type: none"> <li>In the absence of permanent resources, the ExCom could not maintain the proposed pace. The frequency of meetings should be reviewed based on the needs and capacity of members of the ExCom. The Steering Committee was abolished.</li> <li>It was proposed that the decisions of the ExCom be shared with all Network members by means of an announcement sent out after meetings. This announcement would contain two or three key messages that members could then disseminate within their respective networks.</li> </ul>
<ul style="list-style-type: none"> <li>Delivering an annual GNHiAP status report during the WHA each May.</li> </ul>	<ul style="list-style-type: none"> <li>Having yearly updated status report is not feasible. The next update will not be conducted before the next two years.</li> </ul>
Capacity building	
<ul style="list-style-type: none"> <li>Mapping and analyzing existing training programs and materials.</li> </ul>	<ul style="list-style-type: none"> <li>This work has been completed and the results are about to be disseminated to members.</li> <li>It was suggested that contact be established with the heads of university programs in public health and medicine with the aim of promoting the integration of HiAP into the health promotion training curriculum.</li> <li>The point was made that current training programs are only offered in English, which limits their accessibility. It was proposed that short introductions to tools or programs mentioned on the Network's website be written in French and in Spanish. Support for writing the Spanish versions could potentially be provided by the Pan-American Health Organization (PAHO).</li> </ul>
<ul style="list-style-type: none"> <li>Creating and maintaining a database of WHO HiAP training alumni, and sharing this with the Network.</li> </ul>	<ul style="list-style-type: none"> <li>The database is available on a sister website maintained by the WHO, but it needs updating. The link to the database is functional on the Network's website.<sup>5</sup></li> </ul>
<ul style="list-style-type: none"> <li>Creating standard training materials which can be adapted to various levels and to different stakeholder audiences.</li> </ul>	<ul style="list-style-type: none"> <li>The site contains information about this and it was proposed that health promotion training material whose principles of action correspond to those of HiAP be included.</li> </ul>
<ul style="list-style-type: none"> <li>Creating mentorship and peer-learning opportunities and frameworks for theory and practice.</li> </ul>	<ul style="list-style-type: none"> <li>It was suggested that Network and ExCom meetings serve to create opportunities for mentoring and peer learning.</li> </ul>

<sup>5</sup> See the « LEARN/TRAIN » section of the Network's website : <https://actionsdg.ctb.ku.edu/gn-hiap/>



<ul style="list-style-type: none"> <li>Establishing and monitoring quality standards of HiAP training.</li> </ul>	<ul style="list-style-type: none"> <li><b>The WHO does not have the capacity to perform this task. It will instead promote best practices in this area.</b></li> </ul>
<b>Operational guidance</b>	
<ul style="list-style-type: none"> <li>Establishing a website for HiAP tools and materials, accessible to all network members, within the first 6 months.</li> </ul>	<ul style="list-style-type: none"> <li>The website is functional and will be enhanced throughout the coming years.</li> <li>It was suggested that mentoring and peer learning be encouraged.</li> <li>The Secretariat would have the task of consolidating and updating the various existing tools, based on members' proposals.</li> </ul>
<b>Global status report</b>	
<p><u>First year:</u></p> <ul style="list-style-type: none"> <li>First report and proof of the concept of HiAP.</li> </ul> <p><u>Second year</u></p> <ul style="list-style-type: none"> <li>Improving the quality of reporting</li> <li>Follow-up analysis based on the global status of HiAP baseline.</li> <li>Analyzing of best practice and HiAP benchmarks.</li> </ul> <p><u>Third year</u></p> <ul style="list-style-type: none"> <li>Global evaluation of HiAP practices</li> <li>Achieving buy-in from international agencies.</li> </ul>	<ul style="list-style-type: none"> <li>The report, based on the responses of 41 respondents to a survey on the subject, was officially launched during the second Network meeting. This project, led by the South Australian Department for Health and Wellbeing, entailed a tremendous amount of work and a significant contribution of financial and human resources.</li> <li>In the immediate term, the actions to be carried out are: <ul style="list-style-type: none"> <li>Inform all members of the report's presence on the Network's website;</li> <li>Promote the concept and the results linked to the practice's level of maturity;</li> <li>Develop a glossary including variations in terminology;</li> <li>Develop a strategy for disseminating the report. The WHO has taken charge of this aspect and plans to share its strategy with the WHO's various networks.</li> </ul> </li> <li>Dr. Arruda will transmit a letter to members informing them of the report's publication and encouraging them to share it widely.</li> <li>There was some discussion of translation of the report into Spanish by PAHO. [A subsequent discussion was held indicating a first attempt should be made to translate the questionnaire for engagement of some key PAHO countries.]</li> </ul>
<b>Linkages to monitoring Sustainable Development Goals</b>	
<ul style="list-style-type: none"> <li>Linking to National Voluntary Reporting Systems for the SDGs</li> </ul>	<p>The network does not have the capacity to monitor the achievement of Sustainable Development Goals. Instead, it was proposed that a communication tool illustrating the linkages between the HiAP approach and the achievement of SDG be developed.<sup>6</sup> Catherine Weatherup will forward a link to a report on this subject produced in Wales.</p>
<ul style="list-style-type: none"> <li>Supporting the creation of a research fund describing health gains and co-benefits from interventions on health determinants (in particular integrated /complex interventions).</li> </ul>	<ul style="list-style-type: none"> <li>Instead, it was suggested that the Network obtain an assurance of support for research on HiAP. The Network could also work to make known research gaps related to the practice of HiAP.</li> <li>It was suggested that a subgroup of Network members engaged in research collaborate on producing a research proposal on the Network's behalf.</li> </ul>

<sup>6</sup> Refer to the document prepared by the WHO available here: <https://www.who.int/docs/default-source/documents/global-action-plan-brochure.pdf>



## Annex 1 – List of attendees

Horacio Arruda (Québec)  
Gerry Eijkemans (PAHO)  
Julian Fisher (United States)  
Heli Hätönen (Finland)  
Isaac Minadi (Burundi)  
Leonidas Misago (Burundi)  
Dorji Phub (Bhutan)  
Sylvie Poirier (Québec)  
Wesley Queen (United States)  
Timo Ståhl (Finland)  
Anna Stevenson (New Zealand)  
Nicole Valentine (WHO)  
Catherine Weatherup (Netherlands)

### Skype

Nanoot Mathurapote (Thailand)  
Carmel Williams (South Australia)

### Phone

Liane Comeau [International Union for Health Promotion and Education (IUHPE)]

### Rapporteurs

Rosalie Bérubé-Lalancette (Québec)  
Alexandre Morin (Québec)  
Natalia Romero (Québec)  
Amélie Samson (Québec)

### Logistics

Alexis Brisson-Jacques (Québec)  
Sophie Bonneville (Québec)



## Annexe 2 – Pictures



Horacio Arruda



Sylvie Poirier



Nicole Valentine



Timo Ståhl



Heli Hätönen



Catherine Weatherup





Gerry Eijkemans



Anna Stevenson



Julian Fisher



Isaac Minadi



Leonidas Misago



Dorji Phub





Sophie Bonneville



Natalia Romero



Amélie Samson



Rosalie Bérubé-Lalancette



Alexis Brisson-Jacques



Alexandre Morin