*Health in All Policies Workshop*

*the case of air pollution, urban health and sustainability*

FACILITORS ANNOTATED AGENDA

*Main aim of the workshop:*

# To provide an overview of the social determinants of health (SDH) and HiAP literature, as well as case studies of effective policies and action, in the context of the 2030 Sustainable Development Agenda and urban health challenges, focusing on air pollution, and to identify the needed skills and educational implications.

*Key learning outcomes*

*Core thematic questions*

# “How can governmental (local, state) health sectors use the Health in All Policies approach to address air pollution and to improve urban health and health equity?”

# “What are the roles of public health champions and what are the strategies used in promoting health in all policies and what skills are needed?”

# “What are the implications for education and training?”

*What examples shows the connection between the HiAP approach, air pollution, urban health and sustainability (including equity)?*

To be discussed in the Leadership role of Health sesstion 2.3:

The California Health in All Policies Task Force created a multi-agency working group to address challenges that arising when transit-oriented development (TOD), an important strategy for promoting active transportation (and health), social cohesion, and environmental sustainability. The multi-agency working group included housing, transportation, land use, and air quality agencies and met for three years, exploring issues together and providing collective input to guidance documents issued by the participating agencies.

# Running agenda with annotations for session input of chairs

# Day 1 –SANDRA WHITEHEAD CHAIR

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| 8:30-10:30 | Session 1.1. Introduction to SDH, Sustainability and Health in All Policies |
| Seated in front with Chair | *Nicole Valentine (WHO), Laura Magana (ASPPH), Aleksandra Kuznanovic (WHO), Julian Fisher (Hannover Medical School), Kira Fortune (PAHO)* |
| Structure | Welcome 1) Welcome and short intro from each of organizers (including those not yet sitting in the front)- 5 min***Who they are; which organization they represent; why they wanted to organize the course?***Lecture: Workshop structure and learning objectives***Session 1.1 first powerpoint – 5 min***Participant introductions instructions: - 15 min ***Please turn to the person on your left and introduce yourself and say:******Where you work*** ***Motivation for attending course******What pre-exercise you chose and why******Finish off with a quick round to the table, introducing your partner.*** Lecture: Key concepts on determinants and HiAP – 20 min Lecture: Recommendations of the Commission on SDH – 5 min Video: The Tale of Sunrise City for NCD Free- 3 minGroup activity: Main challenges and solutions for addressing SDH in urban setting – handout Questions and feedbackGroup activity - 25 minLecture: SDH policy champions and life long learning – 40 minHandouts: Need to print 2 diag so hand out during session |
| Handouts/Refer to Folders note | Overall Learning ObjectivesIntersectoral actionEconomics of SDH - Annex B (List of CSDH recommendations)*SDH policy champions and life long learning [do not have in folders]*Requirements of Environmental Health Examples |
| Learning objectives | * Explain the social determinants of health (SDH) framework and the definition of the HiAP approach and related core concepts
* Identify several urban determinants of health challenges and solutions
* Be familiar with the concept of a SDH policy champion
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| Note for chair | Ensure smooth transition as many speakers involved |
| 10:30-11:00 | BREAK  |
| 11:00-12:30  | Session 1.2. Evidence on Determinants of Health with a focus on Air Pollution  |
| Seated in front with Chair | *Marcelo Korc (PAHO) and possibly Jonathan Patz (to see with him (and M.) if he wants to comment on air pollution regulation)* |
| Structure | Video: Life expectancy “200 Countries, 200 Years, 4 Minutes” – 5 minLecture: Determinants of health - dynamics associated with air pollution: globally, in the Americas, and in the US – 20 minQuestions and discussion – 15 min**Group activity**: Discussion on challenges and health dynamics associated with air pollution and report back in plenary – 40 minVideo - Clean air, healthy future – 5 minFinal questions and feedback – 5 min  |
| Handouts/Refer to Folders note | Group activity – InstructionsList of challengesQuestions |
| Learning objectives | * Describe global life expectancy trends and the estimation of burden of disease attributable to air pollution
* Describe the health impacts attributable to air pollution
* Identify major social and environmental challenges associated with air pollution and explain some of the causal relationships
* Recognize the different sectors and stakeholder that could be involved in and affected by efforts to deal with air pollution and the role of regulation
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| Note for chair | May pose a question to Jonathan Patz about US regulation of air pollution – to discuss with him and Marcelo. Reiterate we will come back to topic of solutions to air pollution and the broader urban health agenda in first session on Day 2 with Jonathan Patz  |
| 12:30-13:30 | BREAK |
| 13:30-15:00 | Session 1.3: Health in All Policies implementation and case studies  |
| Seated in front with Chair | *Anneta Arno (DC Health), Lianne Dillon (California Health in All Policies Task Force), Nicole Valentine (WHO)* |
| 13:30-15:00 | Lecture: Health in All Policies: knowledge and practice – 25 min Panel: Discussing the practice of Health in All Policies- the case of California, Louisville Kentucky and Washington DC - 40 minQuestions and discussion – 10 min |
| Handouts | Comparing case studies |
| 15:00-15:30 | IA1. Lecture (ppt): Individualised action introduced*Julian Fisher (Hannover Medical School), Sandra Whitehead (NEHA), Nicole Valentine (WHO)*Handouts: Need to print 2 diagIndividual action plans (day 1)IA1 - Handout IA1 – Competencies  |
| Learning objectives | * Recognize the HiAP approach and different models used
* Describe Health in All Policies implementation using international and US examples
* Reflect on the use of co-benefits in Health in All Policies and actions to address SDH in urban health
* Make linkages between the implementation of HiAP and actions to address air pollution and to improve urban health
* Recognize important aspects of how the practice of HiAP needs to be reflected in public health skills and education and in your individual action plan
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| Note for chair | Before starting –special warm welcome to guest faculty - AnnetaMay reflect on how the practice and the education, skills come together –chair is part of the action plan session so can summarize with findings / report-back or Q and A from that session. Indicate that we will have the photo and ask Anneta to stay for photo |
| 15:30-16:00 | BREAK AND PHOTO |
| 16:00-18:00 | Session 1. 4. Public Health Communication and Campaigns – Breathelife  |
| Note for chair | After welcoming Elaine- let Elaine manage the session and you can sign-off for the day. Remind participants to do overnight reading in particular cases**TO REENFORCE LEARNING CASE STUDIES (SESSION 1.3)**California (if not done in pre-reading)Norway South Australia**FOR THE NEXT DAY NEGOTIATION (FOR SESSION 2.4)**1. Drager N *et al.* (2000) ***Negotiating Health Development: A Guide for Practitioners***. Geneva, Conflict Management Group and WHO (pages 15-29) <http://www.who.int/trade/resource/negotiating/en/>
 |
| Seated with Chair | *Elaine Fletcher (WHO),Aleksandra Kuznanovic (WHO)* |
| Structure | Timing not yet sure - hand over to Elaine as groupwork to take place across 2 rooms. Lecture – Effective public health campaigns for better health  - The  basics on SOCO, target audiences, key messages & channels/tools for delivery  – (20 minutes )Test exercise  & discussion – Writing/delivering a Key Message  (20  minutes)Introduction to Interactive Group Exercise  –  Build your own campaign (10 minutes) Group activity – Preparing a public health campaign (45 minutes)Report-back and discussion – (25 minutes)   |
| Learning objectives | * Describe why stakeholder analysis is important for communication
* Explain the purpose of a public health campaign in the context of policy making
* Summarize characteristics of effective and influential public health campaign
* Describe common ways to frame information on public health campaigns
* Develop and present a concept of a public health campaign in the form of Breathelife
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# Day 2 Laura Magana - CHAIR

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| 8:20- 8:30 | RECAP FROM DAY 1 (Nicole)  |
| 8:30-10:00 | Session 2.1. Urban Health and Air Pollution  |
| Seated in front with Chair | Jonathan Patz |
| Structure | Format and timing of this slot not known yet - see with Jonathan on MondayLecture: Solutions in urban settings  |
| HANDOUTS | Not known yet if there will be handouts- there are a few reading printed – see readings. |
| Learning objectives | * Identify key policies and sectors beyond the health sector that are important for addressing air pollution, urban health, equity and sustainability
* Understand key linkages between policies addressing climate change, health and air pollution ¨
* Understand the relevance of addressing air pollution for child health, equity and noncommunicable diseases
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| NOTE FOR CHAIR | Jonathan may want to ask the Chair to reflect on a challenge for urban health from Mexico – chair discuss with Jonathan  |
| 10:00-10:30 | BREAK  |
| 10:30-12:00 | Sesion 2.2. The Role of Government in HiAP |
| Seated in front with Chair | *Kira Fortune*  |
| Structure | Format and timing of this slot not known yet - see with Kira on MondayLecture: The role of government in the HiAP approach Group activity: Conditions that promote or hinder intersectoral collaboration Lecture: Structures and mechanisms for intersectoral collaboration Group activity: Case studies of HiAP intersectoral action from the AmericasQuestions and feedback  |
| Learning objectives | * Describe the role of government in the HiAP approach with examples from the broader region of the Americas
* Explain some of the barriers to closer intersectoral collaboration and reflect on the role of city urban governments
* Describe conditions conducive to the HiAP approach including institutional aspects supporting work across sectors
* List and appraise different structures and mechanisms for intersectoral collaboration and HiAP
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| 12:00-12:45 | IA1. HiAP Skills and education (linked to individualised action plan)Handout: Individual action plans day 2-3 |
| NOTE FOR CHAIR |  |
| 12:45-13:45 | BREAK |

**DAY 2 – ELIZABETH WEIST CHAIR**

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| 13:45- 15:10 | Session 2.3. The leadership role of the health sector and the role of non-governmental stakeholders |
| SITTING UP FRONT WITH CHAIR | *Lianne Dillon (California Health in All Policies Task Force)* |
| Structure | Introduction – 5 minLecture: Scenario from the Californian experience – 10 minDiscussion: Health Sector Leadership - Qualities to support HiAP – 10 minPrinciples of stakeholder engagement – 55 minQuestions and feedback – 10 min |
| HANDOUTS | Group handouts for 6 groups |
| Learning objectives | * Explain the leadership role of health sector in HiAP
* List challenges that the health sector faces in promoting HiAP
* Explain the benefits and challenges of non-government stakeholder engagement
* List principles for effective and accountable stakeholder consultation
* Identify formal and informal mechanisms for non-government stakeholder involvement in HiAP
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| NOTE FOR CHAIR |  |
| 15:10-15:40 | BREAK |
| 15:40-17:30 | Session 2.4: Policy Negotiation  |
| SITTING UP FRONT WITH CHAIR | *Nicole Valentine, Lianne Dillon (California Health in All Policies Task Force)* |
| Structure | Lecture: Negotiating for health - 10 minVideos – 10 min*Video: CommGap, Negotiation (5 mins)* [*https://www.youtube.com/watch?v=1FeM6kp9Q80*](https://www.youtube.com/watch?v=1FeM6kp9Q80)*What gets people to make decisions? (part of)* [*https://www.ted.com/talks/per\_espen\_stoknes\_how\_to\_transform\_apocalypse\_fatigue\_into\_action\_on\_global\_warming*](https://www.ted.com/talks/per_espen_stoknes_how_to_transform_apocalypse_fatigue_into_action_on_global_warming)Group activity: Negotiation role play - 60 minGroup feedback – 25-30 min |
| Learning objectives | * List the major stages of the negotiation process
* Describe several approaches to policy negotiation
* Explain the characteristics of cooperative or value-added negotiating
* Apply knowledge of negotiation to a role play
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| 17:25-17:30 | WRAP-UP  |
| NOTE TO CHAIR  | **ANNOUNCE READING OVERNIGHT DAY2 FOR THE NEXT DAY SESSION** 1. \*Baum et al. **Evaluation of Health in All Policies: concept, theory and application** (Reading List 2 ) (Print) <https://academic.oup.com/heapro/article/29/suppl_1/i130/645630>

<https://www.sciencedirect.com/science/article/pii/S0959652615000098>Possible social dinner – to discss?Early morning Certificates |

# Day 3 NICOLE VALENTINE CHAIR

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| 8:00-8:15 | RECAP FROM DAY 1, 2 *Kira Fortune (PAHO) / Nicole Valentine (WHO)* |
| 8:15-9:45 | Session 3. 1. Evaluating Progress in Health in All Policies |
| UP FRONT WITH CHAIR | *Eric Friedman (Georgetown Law), Lianne Dillon (California Health in All Policies Task Force), Marcelo Korc (PAHO), Elaine Fletcher (WHO)* |
| Structure | Group discussion: Reasons for M&E and health indicators Lecture: Evaluating progress in Health in All Policies (Nicole)- 20 minHealth impact assessment, human rights (Eric) – 10 minIndicators for transformative education (Julian) – 5 minPanel discussion – 20 minDiscussion - 20 min Individual action plans – 20 min  |
| HANDOUT | Indicators group activity |
| Learning objectives | * List reasons for monitoring and evaluation
* Recognize different types of monitoring and evaluation for Health in All Policies and intersectoral work more generally
* Summarize a few indicactors from the Sustainable Development Goals relevant to urban health and air pollution
* Explain the use of health impact assessment
* Apply evaluation concepts to the individual action plan
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| 9:45-10:15 | BREAK  |
| 10:15-11:35 | IA3. Individual action plans discussion and presentation – 1 hour20 minutes work on individualised action plan in order to present in plenary – problem statement and changes you want to see Sum up - 5 min Test – 15 minutes |
| 11:35-11:55 | Session 3.2. Final workshop evaluation Liz hands out certificates and gives continuing accreditation certificatesLiz hands out handout - evaluation |
| 11:55-12:00 | WRAP-UP AND FAREWELL |