



ALLIANCE FOR HEALTH PROMOTION

Report

4th

Global Health Promotion Forum

In collaboration with the WHO Social Determinants of Health Unit and the Geneva University Institute of Global Health

12 November 2014, Biotech Campus, Geneva

INNOVATION AND NEW APPROACHES FOR HEALTH PROMOTION

Acknowledgements

The Alliance Editorial Team, Mrs. Valérie Burrus-Furphy and Mrs. Gabriella Sozanski prepared this report, together with the collective efforts of the Board of the Alliance who contributed their expertise.

The Alliance thanks its collaborating partners, the WHO Department of Public Health, Environmental and Social Determinants of Health, in particular Dr Eugenio Villar, Coordinator and, the Institute of Global Health of the University of Geneva, in particular Dr Sandrine Motamed, Senior Lecturer for their support throughout the preparation and duration of the Fourth Global Health Promotion Forum.

Introduction	1
Conclusion.....	2
Opening and welcome addresses	3
Session one: Health Promotion at The Workplace - Training and Education	3
The Kitale Workshops Model - a case study by the Alliance for Health Promotion .	3
Health and Wellness Promotion in the Work Environment and Education	4
Experience of HUG and Health Promoting Hospitals	4
Session two: The Economic and Psychosocial Benefits of Health Promotion	5
Ebola in West Africa: Minimizing human and economic impacts exacerbated by inequality.....	5
Health Promotion and the ‘First 1000 Days’	6
The Psychosocial Benefits of Health Promotion	6
Session three: Environmental and Social Determinants for Health Promotion	7
Housing and Health Promotion.....	7
Case study - Co-benefits of Health Promotion and Green Economy.....	8
Promoting Health While Mitigating Climate Change	8
Session four: Social Links and Health Promotion	9
Gross National Happiness and Health Policy in Bhutan	9
Quartiers Solidaires - Case Study.....	10
Social Determinants in Every-day Life.....	10
Closing session.....	11
About the Alliance for Health Promotion - A4HP.....	12

Introduction

The Alliance was pleased to collaborate with the Social Determinants of Health Unit of the World Health Organization and the Institute of Global Health of the University of Geneva for the fourth Global Forum on Health Promotion.

The 4th Global Forum provided an important platform for key stakeholders (primarily senior officials in government and intergovernmental agencies and representatives from academia and civil society) to address the current challenges of health promotion and set the agenda for research, advocacy and action. It was an opportunity for all those involved in promoting healthier lives to share and learn from one another whilst building consensus on best practices. New and innovative approaches based on emerging research as well as the experiences of grassroots project implementers were showcased.

This Report includes summaries of the presentations given by the following chairs and speakers:

- Mr Bernard KADASIA, President of the Alliance for Health Promotion
- Dr Maria NEIRA, Director, Department of Public Health, Environmental and Social Determinants of Health, World Health Organization
- Dr Sandrine MOTAMED, Senior Lecturer, Institute of Global Health, University of Geneva
- Mrs Christiane WISKOW, Health Services Specialist, Sectorial Activities Department, International Labour Office, ILO
- Mrs Berhane RAS-WORK, Board Member, Alliance for Health Promotion
- Dr Eva ELSANGAK and Dr Hussein ELSANGAK, Life University, Georgia, USA
- Mrs Nicole ROSSET, Deputy Secretary General, HUG (Geneva University Hospital)
- Dr Manoj KURIAN, Adjunct Faculty, School of Public Health, Kent State University
- Mr Daniel KULL, Humanitarian-Development Attaché, Senior Disaster Risk Management Specialist, World Bank Group, Geneva Office
- Dr Mesfin Teklu TESSEMA, Partnership Leader, Health and Nutrition, World Vision International, Geneva Office
- Mr Brighton GWEZERA, Regional Advocacy Advisor, Regional Psychosocial Support Initiative, REPSSI, South Africa
- Dr Eugenio VILLAR, WHO Coordinator, Social Determinants of Health
- Dr Nathalie RÖBBEL, Consultant, WHO Social Determinants of Health
- Mr Jini SEBAKUNZI, East African Program Manager Regions of Climate Action, R20
- Dr. Jonathan PATZ, Professor and Director of the Global Health Institute at

the University of Wisconsin in Madison, USA

- His Excellency Mr Daw PENJO, Ambassador Extraordinary and Plenipotentiary, Permanent Mission of the Kingdom of Bhutan in Geneva
- Mrs Marion ZWYGART, Responsible for Methodology., Foundation Pro Senectute, Canton of Vaud, Switzerland
- Mr Jean-Pierre GIRARD, Board Member, Health Nexus, Canada

The program, the list of registered participants, the speakers' profiles and the presentations are published on the Alliance for Health Promotion (A4HP) website at <http://www.alliance4healthpromotion.org/>

Conclusion

The prevailing message from the fourth Global Forum on Health Promotion is that the time is ripe for synergies between sectors. There are many opportunities to be seized for collaborative efforts between governments, intergovernmental agencies, academia and civil society in multiple sectors all with the aim of improving people's lives and contributing to developing societies and economies.

Innovative thinking and advances in technologies are the cornerstones of achieving lasting impacts within these new opportunities.

Opening and welcome addresses

Mr Bernard Kadasia, President of the Alliance for Health Promotion chaired the Forum and welcomed participants. Dr Maria Neira, Director WHO Department of Public Health, Environmental and Social Determinants of Health gave the opening remarks. Dr Neira highlighted the importance of seeing connections and making the most of opportunities in the current health policy landscape. When resources are so scarce basic health promotion becomes much more important. As Dr Neira acknowledged, many agree that prevention is better than cure but unfortunately this is very rarely implemented. Dr Sandrine Motamed, Senior Lecturer at the Institute of Global Health, University of Geneva built on the theme of opportunity and connections by suggesting that the Forum was a unique setting for policy officials, academia and civil society to come together and learn from each other's experiences.

Session one: Health Promotion at The Workplace - Training and Education

Chair of the session: Christiane WISKOW, Health Services Specialist, Sectorial Activities Department, International Labor Office, ILO

The first session of the Forum focused on health promotion at the workplace. **Mrs Wiskow** summarized the importance of the basic human right that is to have access to a safe and healthy workplace. Although international treaties mention the right to the enjoyment of just and favorable work environments, occupational deaths are far too common with 6300 employees dying every day in the workplace. In addition there are a further 313 million non-fatal work related accidents that lead to ill health a year.

Hazardous workplaces have a heavy economic impact causing a loss of productive hours and medical expenses billed to employers. Both employers and employees can enjoy the benefits of implementing health promotion alongside occupational safeguarding.

The Kitale Workshops Model - a case study by the Alliance for Health Promotion - Berhane RAS-WORK

Mrs Berhane Ras-Work gave an account of the Kitale Workshops Model developed by the Alliance for Health Promotion. The Kitale outreach program started in 2012 with awareness training on global public health agendas. It has since been developed to include local capacity building and ownership of the scheme.

Workshops are held in the work place where people are trained and educated on the importance of leveraging the opportunity for health promotion in conjunction with treatment clinics.

The shift from a top-down approach to one where local ownership presides goes a long way to bridging gaps between sectors and levels of public health all whilst strengthening global efforts by synergizing efforts and activities.

Mrs Ras-Work highlighted the importance of bringing global policy to the community and vice-versa through identifying the needs of a community, training and growing awareness. This innovative way of bridging the gap between global policy and local reality has proven to be sustainable and is now ready for scale up with a planned workshop in India in 2015.

Health and Wellness Promotion in the Work Environment and Education - Eva and Hussein ELSANGAK, Life University, Georgia, USA

Eva and Hussein Elsangak provided the audience with an in depth understanding of the health and wellness policies of Life University in Georgia. Life University is the largest school for the chiropractic profession in the world. Their educational and clinical philosophy is based on the notion that the body is self organizing self healing and self maintaining and that health is multidimensional, encompassing the optimal physical, emotional, intellectual, social, environmental and spiritual aspects of life.

The implementation of a wellness portfolio has a direct impact on the health and wellbeing of the staff and students at Life University through the serving of organic foods in their refectory, having a non-smoking campus that has spaces designed for communal gatherings and Gold Leadership in Energy and Environmental Design (LEED) certified buildings.

The innovative way Life University has implemented their wellness portfolio has reaped many rewards with many in the community, including an older persons' outreach program, attending initial chiropractic sessions for pain but continuing with therapy for health maintenance and wellness effects.

Experience of HUG and Health Promoting Hospitals - Nicole ROSSET, Deputy Secretary General HUG (Geneva University Hospital)

Nicole Rosset presented on Switzerland's Health Promoting Hospitals (HPH) Network. The HPH Network has changed the culture of hospital care towards interdisciplinary working, with active involvement of patients and partners in their own health as its objective. Their mandate is to incorporate standards and indicators for health promotion in hospital and build an evidence base of evaluated health promotion activities in the health care setting.

One might ask 'why introduce health promotion in a hospital setting when hospitals are built for treating disease?' However, hospitals have a very real interest in health promotion as they are uniquely placed to influence practice due to the large number of people that access and provide services. The reality is they are creating best practice, improving the health of users and staff and developing healthy environments within their communities. Health is based on quality of life beyond the curative dimension.

As one of the largest employers in Geneva the University Hospital has approximately 400 of its staff taking maternity leave a year. This has a heavy impact on teams as remaining staff try to fill the gaps. The HUG had a consultation for pregnant women, promoting antenatal health and ways of adapting working conditions to protect the health of the pregnant woman and her unborn child thus enabling the staff member to stay at work for as long as possible. The HUG has also implemented feeding rooms so that mothers can return to professional activity and limit-prolonged absences from the workplace without compromising their choice of care for their newborn child.

The hospitals within the network have an opportunity to contribute actively to public health objectives which, given the increasing prevalence of chronic disease, is important.

Session two: The Economic and Psychosocial Benefits of Health Promotion

Chair of the session: Dr Manoj Kurian, Adjunct Faculty, School of Public Health, Kent State University

Dr Manoj Kurian chaired the second session of the Forum focusing on the economic and psychosocial benefits of health promotion. Dr Kurian asked the Forum to consider why health promotion is not at the top of policy makers' agendas, the crux being the lack of financial resources and the length of terms in political office. When resources are limited, policy makers prioritize and thus proving and measuring benefits becomes the cornerstone of agenda setting.

Ebola in West Africa: Minimizing human and economic impacts exacerbated by inequality – Daniel KULL, Humanitarian-Development Attaché, Senior Disaster Risk Management Specialist, World Bank Group, Geneva Office

Daniel Kull, of the World Bank Group delivered an eye-opening report on the potential catastrophic impacts of the Ebola outbreak in Africa. It is evident that the primary cost of the Ebola outbreak is human loss and suffering but the potential losses of Gross Domestic Product in the three worst affected countries (Guinea, Liberia and Sierra Leone) in 2015, is up to 11.7%.

Outbreaks can change peoples' behavior, leading some to disengage with economic activity thus further worsening poverty and undoing the gains made by developmental projects. As the President of the World Bank stated "the fight against Ebola is a fight against inequality". The knowledge and infrastructure for treatment and containment exists but only for middle and high-income countries.

Due to the unprecedented scale of the outbreak the World Bank Group has implemented new funding mechanisms that are more flexible and use the fastest and most efficient channels, usually UN agencies, to support the outbreak response plans and strengthen essential health services. This represents a shift in policy, as the mandate of the World Bank Group is to fund governments.

Health Promotion and the ‘First 1000 Days’ – Dr Mesfin Teklu TESSEMA, Partnership Leader, Health and Nutrition, World Vision International, Geneva Office

Dr Tessema described the first 1000 days of life as the window of opportunity to shape healthier and more prosperous futures, thus reducing inequalities in health and social wellbeing whilst at the same time reducing costs in both the health and societal setting.

By implementing “Time Targeted Counselling” (TTC) World Vision aims to provide an alternative to generic health promotion messaging that has limited impact on behaviour, especially where there are personal, cultural, financial and geographic barriers to adopting healthy practices.

What is meant by TTC? The timing of your health promotion has an impact on the process of change. For example if you speak to a pregnant woman about antenatal care she will be better able to implement your advice than a woman who is not pregnant at the time. Furthermore by targeting the decision makers in a family unit, addressing the people who need the advice the most when they need it the most, you are ensuring that individual circumstances are taken into account. The holistic approach of the counselling also enables support workers to identify barriers and negotiate feasible change.

Dr Tessema also spoke about World Vision’s One Goal project that uses sport to ignite interest in early life nutrition. World Vision and its partners are leveraging the build-up to the World Cup in Qatar in 2022 to boost investment in the first five years of child development with the motto ‘Building strong foundations for healthy, active lives’.

The Psychosocial Benefits of Health Promotion – Brighton GWEZERA, Regional Advocacy Advisor, Regional Psychosocial Support Initiative, REPSSI, South Africa

Brighton Gwezera of REPSSI, a regional African non-profit organization that provides technical support and development in psychosocial support described the psychosocial benefits of health promotion to the Forum by looking at a case study of programs supporting the psychosocial welfare of children living with HIV.

REPSSI’s approach to building material and human resources to implement PPS into health policy is based on the WHO definition of health and therefore advocates for holistic engagement. The community is not only seen as a means to disseminate information but also crucial to intervention implementation.

Having assessed the needs and problems of an individual to better understand the context the role of healthcare workers is to provide counselling, support positive living and give nutritional advice. All of which leads to better adherence to antiretroviral therapy which has a lasting impact on the lives of those affected.

It should be mentioned that healthcare workers must also be supported in their function as they are subject to many pressures and emotions. Indeed for lasting improved health both the client and support worker must have their psychosocial needs met.

Session three: Environmental and Social Determinants for Health Promotion

Chair of the session: Dr Eugenio VILLAR, WHO Coordinator of the Social Determinants Team, Department of Public Health, Environmental and Social Determinants of Health

Dr Eugenio Villar chaired the third session of the Forum focusing on the environmental and social determinants for health promotion.

Housing and Health Promotion - Dr Nathalie RÖBBEL, Consultant, WHO Social Determinants of Health

Dr Röbbel focused on the role of adequate housing on health, and the opportunity for health inequalities to be addressed whilst implementing healthier and more sustainable housing policy.

Dr Röbbel showed that poor housing conditions can lead to a wide range of diseases, ranging from diarrheal diseases due to inadequate sanitation, to asthma due to dampness. One single housing related risk factor can impact health on several different ways. In line with this, one targeted intervention to reduce health risk can show multiple benefits. Interventions for healthy housing therefore represent key opportunities for health promotion as well as addressing inequality. Better access to water, sanitation and hygiene, for example, reduces gastro-intestinal diseases but also frees time for women who usually have the task of fetching water. The net result from this single intervention is an overall reduction in poverty as girls within the household are then able to spend more time on education and thus improve career opportunities.

Housing is a key area where mitigation of climate change does lead to health co-benefits. For instance, better insulation has an impact on respiratory health reducing missed days at work or school. Biomass cookers are better for the environment but also better for the women using them.

All of these innovations need to be scaled up. However it is unlikely that this will be achieved if sectors work in silos. Furthermore, it is impossible to achieve healthy housing conditions unless you tackle urban planning at the same time. This is where the development of a strong evidence base is crucial to support the development of guidelines and recommendations that can be translated into key interventions.

Case study - Co-benefits of Health Promotion and Green Economy - Jini SEBAKUNZI, East African Program Manager Regions of Climate Action, R20

Mr Jini Sebakunzi spoke about the NGO R20, which has the goal of producing local economic, and environmental benefits in the form of reduced energy consumption and the co-benefits of health promotion and green economy.

In the first part of his presentation Mr Sebakunzi explained that R20's mission is to connect stakeholders, technology and finance to implement bottom-up led projects that target and support sustainable development. There are synergies between the aims of the Alliance for Health Promotion and R20 and therefore a partnership was created in 2013. A concept note for a project delivering solar power to rural Kitale in Kenya has been drafted. The pilot project aims to reach 100,000 vulnerable people to leverage clean energy sources for increased access to health services.

The second part of Mr Sebakunzi's presentation was dedicated to R20's Burundi solar bakery project. This case study clearly demonstrated the relationship between clean energy, health and community empowerment. Women who had been widowed or were living with HIV started a bakery using wood fueled ovens. This proved to be unsustainable as the price of wood inflated to a prohibitive cost due to deforestation within the region and the bakery was closed. This meant that the women became isolated and without income. R20 raised funds for solar ovens so the bakery could be reopened with improved working conditions due to the smokeless environment. Other benefits of the project include its sustainability due to the abundant nature of sun energy as well as generating savings for the beneficiaries that can then be reinvested in other entrepreneurial ventures all whilst helping the environment.

Promoting health while mitigating climate change - Dr. Jonathan PATZ, Professor and Director of the Global Health Institute at the University of Wisconsin in Madison, USA

Dr Patz spoke about the opportunity for health promotion to come to the fore whilst climate change is on the global agenda. The United States of America Surgeon General stated "America does not have a healthcare system but a sick care system". Health promotion goes beyond the health sector. It is impossible to have healthy people on a sick planet.

Climate change has an effect on health because of many different aspects, some of which include increases in vector-borne diseases, decreases in water resources and air pollution. For example in 2003, 70,000 people died during an eleven-day heat wave. As the probability of mega heat waves will increase by a factor of 5 to 10 times in the next forty years addressing climate change could save many tens of thousands of people's health and lives.

Furthermore there is evidence that there is a cost benefit to implementing more sustainable agriculture and carbon policies. Westhoek (2014) states that if meat consumption was halved, green house gases could be reduced by 25–40% and intake of saturated fat could fall by 40%. This has a net result of vastly reduced costs to the health services due to health gains.

Another example of co-benefits is urban planning that provides safe opportunities to walk and cycle and use mass transit leading to decreases in air pollution and increases in physical activity and better lung health.

The many co-benefits of greener policies and health demonstrate a real opportunity for the two sectors to work together to produce new and innovative policies to further encourage the health of the planet and those who live on it.

Session four: Social Links and Health Promotion

Chair of the session: Dr Sandrine MOTAMED, Senior Lecturer, Institute of Global Health, University of Geneva

Dr Sandrine Motamed chaired the last session of the day, which explored the relationship between social links and health promotion. Dr Motamed led with the surprising statistic that in Switzerland socially isolated people have a two to five fold increased risk of dying prematurely. Social support or social capital is hugely important to both physical and mental health with support coming from a range of different sources such as family, service providers and even pets.

Gross National Happiness and Health Policy in Bhutan – His Excellency Mr Daw PENJO, Ambassador Extraordinary and Plenipotentiary, Permanent Mission of the Kingdom of Bhutan in Geneva

The Forum had the honor of welcoming His Excellency **Mr Daw Penjo**, who gave an insightful speech into The Kingdom of Bhutan's Gross National Happiness (GNH) policy.

His Excellency first clarified that GNH had yet to be achieved in the Kingdom of Bhutan but that the country is committed to GNH as its core to development. GNH signifies development with values, where material and spiritual development happen side by side to reinforce one another. GNH is anchored in the notion that people have needs that go beyond economic prosperity. Wellness and the happiness of the people is the basis for development in the Kingdom of Bhutan.

Based on the four pillars of sustainable and equitable socioeconomic development, conservation of the environment, preservation and promotion of culture and good governance, the Kingdom of Bhutan implements high value low environmental impact policies.

An example of this is their tourist policy where strict rules on visitor numbers are implemented so that the unique culture can be preserved over monetary gains. Other policies such as the constitutional need for 60% of the landmass to be covered by forest also have an impact on the health and happiness of the Bhutanese.

His Excellency concluded his presentation by saying that if we ask the Bhutanese what makes them happy, they will answer 'no physical illness and no mental worries'.

Quartiers Solidaires - case study - Marion ZWYGART, Responsible for Methodology, Foundation Pro Senectute, Canton of Vaud, Switzerland

Mrs Zwygart gave an overview of Quartiers Solidaires a project started twelve years ago in the Canton of Vaud, Switzerland. The Aim of the Project "Quartier solidaire" is to create, renew, develop and maintain social ties to improve the quality of life and inclusion of seniors in a village or a neighborhood. It encourages people, especially older people, to influence their environment by organizing their own projects according to their needs, their resources and their desires. As people aged over 65 years old will represent more than 20% of the population in 2030 and those over 80 more than 15%, it is a project that could be the cornerstone of community empowerment in years to come.

There are 17 Quartiers Solidaires operating on different levels of scale, from small neighborhoods to cities, mostly by Lake Geneva. The project puts the older person at the center of everything it does. The methodology is grounded in action research and as such lots of time is devoted to reflection.

Through civic engagement, older people become authors and actors of projects focused on the needs of their community and building relationships. After an initial period dedicated to analysis and diagnosis, projects are put in place that foster community engagement and cohesiveness. The objective of these project interventions is that while the projects and activities may disappear over time, the community survives.

An audit last year found that older people involved in Quartiers Solidaires felt empowerment and a strong sense of belonging and that they once again had social meaning within their communities. It is clear that Quartiers Solidaires goes a long way to fight loneliness and increase the quality of life for those communities the projects serve.

Social determinants in every-day life - Jean-Pierre GIRARD, Board Member, Health Nexus, Canada

Jean-Pierre Girard presented the work of Health Nexus, which is a Canadian leader in health promotion. Health Nexus is a bilingual organization that supports individuals, organizations and communities to strengthen their capacity to promote health. Their work is grounded in the Ottawa Charter for Health Promotion and they view health broadly.

In 2011 Health Nexus partnered with the 3M Company to present the Health Leadership Award, a national prize honoring the outstanding range of leaders who have a significant impact on the health and well being of their community. These leaders understand that health starts where we live, learn, work and play.

Jocelyne Bernier's (the 2013 winner) work was showcased in a video. Her work in Point St Charles has spanned over thirty years. During that time she has raised the level of health and community spirit within the area by addressing poverty through her work at the clinic in Point St Charles and since 2001 has been coordinator of the research chair in community approaches and health inequalities department at the University of Montreal. The department's work is to produce knowledge that will later be transformed into practice.

The Health Leadership Award provides a great opportunity to share new and innovative ideas as well as empowering communities. Furthermore as there are many candidates for the prize there is a growing number of health leaders on file that could potentially all work collaboratively. The Award has inspired many people and there is now a growing idea base for future innovations.

Closing session

Mr Bernard Kadasia, President of the Alliance for Health Promotion, gave the closing remarks of the Forum. He thanked all those who attended and reminded the Forum that although it seemed that everyone was on the same page there was still much to be done and that there was an unused opportunity to work more with other sectors beyond what is traditionally seen as the health sector.

He praised the health promotion community for the evidence that has been gathered over time and said that this evidence base was crucial to improving the quality and effectiveness of health promotion interventions and to advocacy.

About the Alliance for Health Promotion - A4HP

Founded in 1997, the Alliance for Health Promotion is an open, multi-sectorial partnership of NGOs, civil society and other stakeholders committed to health promotion. It was formed to provide a stronger voice from the local health promotion community to the global health arena and vice versa. The Alliance organizes annually an NGO Briefing during the World Health Assembly in May, a Health Promotion Forum in November, a lunchtime consultation at the WHO Executive Board in January and a Regional Health Promotion Workshop in Kenya in August.

The Alliance aspires to see individuals and communities empowered by ownership of knowledge and means in a supportive environment to fully enjoy a healthy life.

The Alliance mission is to strengthen global efforts to improve health, to bridge the gap between global policies and local realities and knowledge, and to align and facilitate synergies and coherence on health promotion efforts in different sectors.

Member organizations represented on the Board:

African Womens' Organisation in Vienna

International AIDS Society, IAS

International Pharmaceutical Federation FIP

International Health Co-operative Organisation, IHCO

Associated Country Women of the World, ACWW

International Movement for Fraternal Union among Races and Peoples, UFER

Global Alliance on Women's Health, GAWH

International Council on Social Welfare, ICSW

International Pharmaceutical Students Federation, IPSF

International Federation of Medical Students' Associations, IFMSA

Life University

Solar Cookers International, SCI

World Federation for Mental Health, WFMH

Address:

Alliance for Health Promotion

Grand-Montfleury 48

CH-1290 Versoix,

Geneva

Website: <http://www.alliance4healthpromotion.org>

E-mail: secretariat@alliance4healthpromotion.org