

Emerging Health Policy Research Conference 2011

Abstract Submission

Presenters Details

Name of Author(s) – asterisk the presenting author:

Anne Marie Thow*, Stephen Jan, Stephen Leeder

Presenter's institution/organisation, address, email, and telephone:

Menzies Centre for Health Policy
Victor Coppleson Bldg (D02)
University of Sydney NSW 2006

annemarie.thow@sydney.edu.au

0422 568 334

Short Biography of presenter (maximum 50 words):

Anne Marie is an associate lecturer in health policy. She recently completed her PhD on the use of trade and tax policy to improve diets.

Presentation Details

Presentation Title (up to 10 Words):

A conceptual framework to improve cross-sectoral policy making for nutrition

Keywords: (up to 5 to assist organisers in streaming papers):

Nutrition, policy, cross-sectoral

Research Details (250 word limit)

Introduction/Background:

Diet-related chronic diseases such as diabetes and cardiovascular disease are now among the leading causes of death and disability globally. Interventions to improve diets will require policy interventions from sectors beyond health, in order to improve the environment in which consumers make choices about food, as well as targeted behavioural interventions. However, recommendations for such cross-sectoral policy interventions have not been widely implemented, often due to competing sectoral objectives.

Research Question:

How could the use of cross sectoral policy interventions for nutrition be improved, particularly relation to fiscal and trade interventions?

Methodology:

We reviewed attempts to use cross-sectoral policy to improve nutrition. Using policy theory, we then adapted a conceptual framework to describe the added complexity of cross-sectoral policy making.

Findings:

The challenges to cross sectoral policy making for nutrition include power differentials between sectors, competing sectoral agendas, and different policy processes across sectors. In order to implement interventions, public health nutrition policy makers must navigate the global and local political context, develop proposals with feasible policy content, successfully collaborate with actors from other sectors, and effectively negotiate processes across sectors. Cross sectoral policy making could be improved by taking into account these factors in policy analysis and policy proposals.

Policy Implications:

We have used these findings to develop a checklist for decision making that can be used by health policy makers to inform policy analysis and policy proposals in sectors outside of health.

N.B. All presenters will be asked to include a final slide in their presentations that summarises the policy recommendations and/or implications that can be drawn from the research presented.

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Abstract Submission

Presenters Details

Name of Author: *Doron Pollatchek

Presenter's institution/organisation, address, email, and telephone:

Doron Pollatchek
Ph.D. Candidate, MPH

Department of Health Systems
Management
Faculty of Health Sciences
Ben-Gurion University of the Negev
Beer Sheba, Israel

&

School of Medicine
Faculty of Health
Deakin University
Geelong, VIC 3217
d.pollacek@deakin.edu.au
03- 52272630

Short Biography of presenter:

Doron's professional experience includes both academic and professional activities towards prevention of obesity among children, smoking prevention among youth, health equity, and 'Healthy Cities'. Doron holds a MPH, is currently a Ph.D. Candidate at Ben-Gurion University in Israel, and a visiting scholar at the Faculty of Health, Deakin University, Australia.

Presentation Details

Presentation Title:

(Developing) Indicators for POLITICAL WILL/COMMITMENT within the Healthy City framework

Keywords:

Political Will/Commitment; Health policy; Politics; Healthy Cities; Municipal authorities

Research Details

Introduction/Background:

There is an established recognition of Political Will/Commitment as both a determinant of health at the population level and a determinant of health policy and health policy development. Followed by its importance, political commitment to health has been recognised as a basic strategic component in the Healthy City framework, led by the World Health Organisation (WHO). A Healthy City is considered by the WHO as one that continually develops public policies towards improvement of quality of life of its inhabitants. This proposed study aims to develop new and innovative process and outcome indicators of political commitment to health (and environment) within the Healthy City framework and municipal authorities.

Research Question:

1. What is the multi-dimensional nature of Political Commitment to health?
2. How can Political commitment to health be measured?

Methodology:

This study uses quantitative and qualitative methods, including document analysis, semi structured-questionnaires and in-depth interviews with mayors and other stakeholders in approximately 15 cities.

Findings:

Multidimensional models for political commitment to health are currently being developed. Based on initial (data) analysis, it has been determined that organizational, managerial and socio-political aspects serve to be components of political commitment to health.

Policy Implications:

Both the models and indicators are anticipated to be used by stakeholders and policy makers in both local governments/municipalities and national governments. This aims to further the understanding of barriers and incentives for the development and implementation of viable public health policies within the Healthy City framework, and local governments in general.

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Abstract Submission

Authors: Sharon Friel and *Laurel Barosh, Australian National University, Canberra, ACT

Presenter: National Center for Epidemiology and Population Health, Australian National University, Canberra, ACT. laurel.barosh@anu.edu.au +61 2 6125 7840

Laurel completed her MPH at San Diego State University where she worked on issues including food security, non-communicable disease, and infectious disease. Laurel also worked on the analysis of global nutrition policies at WHO. She is currently a researcher at the National Center for Epidemiology and Population Health at Australian National University.

Title: Climate change, urban food security, and health inequities in Greater Western Sydney

Keywords: climate change, food security, health inequity, urban, sustainability

While there is attention in the international literature to the relationships between climate change, food systems and food security, there is relatively little analysis of the relationship with urban food security in Australia.

This study will quantify the economic and spatial inequalities in urban food security within the context of environmental pressures. A healthy and sustainable food basket will be developed. The availability, price, and quality of foods in a “Healthy and Sustainable Diet” basket will be assessed in a range of food provisioning systems in Greater Western Sydney including urban agriculture, supermarkets and corner shops. Results will be compared by food provisioning category and neighbourhood socioeconomic status (SES). Food budget standards will be developed, thereby assessing the affordability of the food basket in different SES households as well as different SES neighbourhoods. Socio-spatial inequities in physical access to a health and sustainable diet will also be mapped across GWS.

This study will provide an evidence base for decision makers to make healthy and sustainable foods more readily available, accessible, and affordable in Greater Western Sydney. It will also provide an equity and sustainability focused urban food systems framework that can be adapted in cities worldwide.

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Abstract Submission

Melanie Lowe
The University of Melbourne

6 McKean St
Fitzroy North VIC 3068
Ph: (03) 94891617
Email: m.lowe@pgrad.unimelb.edu.au

Biography: Melanie Lowe has been practicing as a physiotherapist for a number of years and has recently completed a Master of Public Health degree, with a research component examining policies with potential co-benefits for reducing obesity rates and greenhouse gas emissions in Australia.

Obesity and climate change mitigation in Australia: Policies with co-benefits

Key words: obesity; climate change; co-benefits; policies; health equity

ABSTRACT

Background: Obesity and climate change are two of the greatest public health challenges facing Australia. Whilst these two issues may at first appear to be unrelated, there is a growing recognition that they are actually closely connected, having some shared causes and potential policy solutions. However, to date few scholars have analysed these connections in depth.

Research Question: Which shared causes of obesity and climate change present opportunities for structural change, and what policies could be used in Australia to both equitably reduce obesity rates and contribute to mitigating climate change?

Methodology: Informed by the political economy of health theoretical framework, this paper draws on the existing literature on the shared causes and solutions in order to critically analyse policies with potential co-benefits for climate change and obesity in Australia.

Findings: Policies with co-benefits for obesity and climate change fall within three broad categories - those to decrease the use of emissions-intensive, effort-saving technologies, particularly cars; those to improve diets and reduce emissions from the food system; and macro-level economic policies to de-emphasise economic growth and reduce the over-consumption which results in obesity and greenhouse gas emissions.

Policy Implications: Given the complex causes of both problems, a broad range of complementary interventions are required. Such an approach could have significant health and environmental benefits. By integrating public health and environmental agendas, these policies may hold the key to achieving effective action on climate change and obesity in Australia.

Emerging Health Policy Research Conference 2011 - Abstract Submission

Presenter details:

Phillip Baker, PhD Candidate

National Centre for Epidemiology and Population Health,
Australian National University

Email: Phillip.baker@anu.edu.au. Phone: 0435 410 794. Twitter: PhilBakerNZ

Bio:

Phillip is a PhD candidate at ANU and co-chair of www.ncdaction.org. His research focuses on the interface of political science and preventative health policy, with particular interest in obesity, tobacco, alcohol and advocacy.

Title:

Issue ascendance and policy making for a complex global health problem: obesity as a case in point

Keywords:

Obesity, policy-science, social construction, issue ascendance, global health

Introduction/Background:

Obesity is a complex, some would say wicked policy problem that achieved global social and political recognition (issue ascendance) at the turn of this century. Since then a global policy community has emerged, driving changes across multiple national and regional policy domains.

Research Question:

In this presentation I ask: how did obesity ascend on to the international policy agenda? Further: Who are the individuals and organisations mobilised around the issue? What politically salient ideas do the actors use to portray the problem and its solutions? What are the enabling features of their political and institutional context? How do the inherent issue characteristics of obesity shape the above?

Methodology:

A case study approach was applied to policy-making processes at the World Health Organization between 1996 and 2010. Data sources including key informant interviews with policy elites, documents, and media articles, were analysed using qualitative software.

Findings:

Obesity emerged onto the international agenda in the late 1990's as a policy community formed around several key policy events. Powerful ideas used by the community, together with global media outreach and linkages to other significant policy communities were important to ongoing issue ascendance, despite periods of

substantial opposition. The time period has seen shifts in the global political context and institutional factors that have both aided and abetted obesity-related policies.

Policy Implications:

Understanding why and how public health issues attain or do not attain issue ascendance can offer insights into agenda-setting and policy-making processes. It can also bolster strategic advocacy efforts.