

WS-MON-001 DES QUARTIERS DURABLES POUR PROMOUVOIR LA SANTÉ

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Description générale: Cet atelier présente le projet national suisse «Quartiers durables», mené par les offices fédéraux de l'énergie et du développement territorial, en collaboration avec des collectivités publiques locales.

La qualité de vie, conditionnée notamment par des déterminants de la santé physique et psychique, est au coeur du développement territorial à différentes échelles. C'est en particulier dans les quartiers, lieux de vie par excellence, que la dimension sociale tout autant que celles environnementale et économique doivent être prises en compte. Pour aider les acteurs concernés à répondre aux exigences du développement durable et donc d'une bonne qualité de vie urbaine, un outil d'évaluation et d'aide à la décision a été développé. Il contribue à mieux intégrer, à cette échelle spécifique, les aspects de la santé dans l'aménagement, l'organisation et la vie du quartier. Afin de bénéficier au plus grand nombre, il sera, fin 2010, utilisable gratuitement via Internet mais précédemment à cette large diffusion, sa pertinence et la capacité des acteurs à se l'approprier sont testés in situ, sur quatre projets de quartiers pilotes.

Pour les participants, cet atelier est donc une opportunité de découvrir le projet, d'avoir un aperçu de la pratique l'outil et de bénéficier d'un retour d'expérience par un quartier pilote.

Concept: 1. Présentation du projet (15')

2. Introduction à l'outil (30')

3. Retour d'expériences (15')

4. Débat ouvert (30')

Axes privilégiés :

- Vision transversale du développement durable et qualité de vie des usagers ;

- Nouvelles perspectives sur les liens entre promotion de la santé, développement durable et environnement urbain ;

- Les quartiers pilotes : démarche bottom-up d'évaluation

Objectifs de l'enseignement: 1ère partie : présentation du montage institutionnel particulier du projet (collaboration verticale et collaboration intersectorielle).

2ème partie : Aperçu pratique de l'utilisation concrète de l'outil, en particulier les critères concernant la santé.

3ème et 4ème partie : Discussion sur les apports de l'outil pour l'optimisation d'un projet de quartier dans une perspective de durabilité et de promotion de la santé.

Résultats attendus: Enrichissement de la « boîte à outils » des participants pour le développement durable de l'environnement construit grâce à l'introduction pratique à l'outil (capacité d'appropriation)

Enrichissement des connaissances des participants sur l'intégration des déterminants sociaux et de santé, dans les projets d'aménagement, et de leurs compétences professionnelles pour le développement durable de l'environnement construit (empowerment).

Réflexion sur les moyens de tendre, via la promotion de la santé et la qualité du cadre de vie, à une meilleure maîtrise des processus d'urbanisation et un usage plus rationnel du sol.

WS-MON-001b BUILDING AN INTERNATIONAL COLLABORATION ON PARTICIPATORY HEALTH RESEARCH

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General description: This interactive workshop aims to explore the issues involved in strengthening the position of Participatory Action Research in research institutions and policy making structures. The principles underpinning PR share many of the values of health promotion and as a research approach could contribute to social empowerment and ecological sustainability. As an approach to research it has gained in popularity but continues to be marginalised within mainstream health research in many countries.

Rational: Participatory Health Research (PHR) is increasingly drawing the attention of communities, funders, decision-makers, and academics worldwide as an important approach to health promotion research. There is a growing need to define the specific contribution of PHR to the advancement of knowledge on health promotion interventions for addressing health inequalities and sustainability issues, as compared to other more established approaches and to bring together the findings from the research which has been conducted. In order to achieve this end, the International Collaboration on Participatory Health Research has been founded by the presenters. The Collaboration seeks to strengthen the position of PHR in research institutions and policy-making structures. In this workshop the participants will learn about the emerging structure of the Collaboration, become informed about the results of the first working meeting (due to take place in March 2010). The workshop will provide a forum to discuss ideas both for becoming involved in the work of the Collaboration and in taking its work forward.

Learning objectives: To build knowledge through participatory processes of the following :

Ways in which involve different groups in the International Collaboration

What work has been achieved so far

Explore the goals and objectives of the Collaboration

Raise interest in becoming part of the collaboration

Generate ideas for addressing the goals of the collaboration

Expected results: Greater understanding of the goals and objectives of the Collaboration

Contribution to the development of its work

Raised awareness of developments in different contexts

Wider group of people involved in the collaboration

WS-MON-003 WIE KÖNNEN WIR DIE IUHPE ZU EINER WIRKUNGSVOLLEN PROFESSIONELLEN FACHORGANISATION FÜR ÖFFENTLICHE GESUNDHEITSFÖRDERUNG IM DEUTSCHSPRACHIGEN RAUM EUROPAS ENTWICKELN?

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General description: Dieser Workshop richtet sich an deutschsprachige Mitglieder der IUHPE und an Tagungs-TeilnehmerInnen, die an einer Mitarbeit in einer deutschsprachigen Sektion der IUHPE in Europa interessiert sind.

Da der gemeinsame Sprachgebrauch der IUHPE als einer globalen Fachorganisation zunächst auf Englisch, Französisch und Spanisch konzentriert ist, ist die Mitgliedschaft in anderen Sprachregionen häufig erheblich geringer entwickelt.

Dies gilt z.B. gegenwärtig auch für Österreich, Deutschland und die deutschsprachige Schweiz. Wir wollen die Weltkonferenz zum Anlass nehmen, um mit interessierten TeilnehmerInnen über die Bildung einer deutschsprachigen Sektion in der IUHPE /EURO zu sprechen und mögliche Formen der Zusammenarbeit im Rahmen der IUHPE im Anschluss an die Weltkonferenz erörtern und verabreden.

Eingeladen sind alle TeilnehmerInnen, die an einem weiterführenden fachlichen Informations- und Erfahrungsaustausch zur Gesundheitsförderung im deutschsprachigen Raum im Rahmen der IUHPE interessiert sind und die sich im Rahmen dieses Zusammentreffens an der Suche nach anregenden und tragfähigen Kooperationsformen zur Abwechslung auch einmal in deutscher Sprache beteiligen wollen.

Rational: Da die Sprache auch in fachlicher Hinsicht eine prägende Bedeutung hat und die Verständigung in der alltäglichen Sprache häufig deutlich leichter fällt als in Zweit- oder Dritt-Sprachen, macht es Sinn, auch in einer internationalen Organisation Raum zu geben für einen fachlichen Austausch in den jeweiligen Alltagssprachen.

Im Rahmen der IUHPE in Europa kann eine deutschsprachige Sektion der IUHPE auch eine Möglichkeit schaffen, deutlich mehr Kolleginnen und Kollegen als bisher für eine aktive Mitgliedschaft zu gewinnen, da neben der Sprache auch ähnliche sozial- und gesundheitspolitische Traditionen Anregungen vermitteln können.

Für die fachliche Entwicklung in der Gesundheitsförderung in Österreich, Deutschland und der deutschsprachigen Schweiz hat dies eine erhebliche Bedeutung, da es in allen drei Ländern bisher keine öffentlich wirksame Vertretung professioneller Interessen durch Gesundheitsförderungs-SpezialistInnen gibt. Durch die Bildung einer deutschsprachigen Sektion der IUHPE mit Unterstützung des Fonds Gesundes Österreich, der Bundeszentrale für gesundheitliche Aufklärung und der Gesundheitsförderung Schweiz könnte sich dies ändern.

Die Möglichkeiten einer derartigen Kooperation wollen wir mit den TeilnehmerInnen der Weltkonferenz ausloten, um diese als Grundlegung für weiterführende Aktivitäten zu nutzen.

Learning objectives: - Die Strukturen und Arbeitsformen der IUHPE im globalen und im europäischen Rahmen kennenlernen.

- Die Möglichkeiten kennenlernen, die sich aus einer persönlichen oder institutionellen Mitgliedschaft in der IUHPE für die berufliche Tätigkeit in der Gesundheitsförderung ergeben.

- Die Bedeutung einer gemeinsamen wirkungsvollen Vertretung professioneller Interessen für die Entwicklung der Gesundheitsförderung in Österreich, Deutschland und der Schweiz erkennen.

- Formen unaufwändiger Mitglieder-Kommunikation und gemeinsamer Aktivitäten im Rahmen einer deutschsprachigen Sektion der IUHPE/EURO entwickeln und verabreden.

- Möglichkeiten der Zusammenarbeit mit den jeweiligen nationalen Agenturen der Gesundheitsförderung in Österreich, Deutschland und der Schweiz kennen- und nutzen lernen.

Expected results: Es wird die Bildung einer deutschsprachigen Sektion der IUHPE/EURO und eine aktive Mitgliederwerbung für die Entwicklung einer wirkungsvollen Vertretung fachlicher Interessen für die Gesundheitsförderung im deutschsprachigen Raum Europas angestrebt.

Verabredungen zu weiterführenden Kommunikationen und Aktivitäten werden auf der Grundlage der Interessen, Anregungen und Bereitschaften mit den Beteiligten dieser Veranstaltung getroffen.

WS-MON-005 LA GRATUITÉ DES SOINS EN AFRIQUE DE L'OUEST : AMÉLIORER L'ÉQUITÉ D'ACCÈS AUX SOINS

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Description générale: Après avoir généralisé le paiement direct des soins, les gouvernements africains et leurs partenaires se sont rendus compte que ce mode de paiement provoquait une barrière financière à l'accès aux soins et engendrait l'absence d'équité. Puisque seules les personnes capables de payer ont aujourd'hui accès aux systèmes de santé, des solutions doivent être trouvées pour améliorer l'équité d'accès aux soins.

Objectifs: Ce symposium a pour objectif de présenter les résultats de différentes interventions actuellement mises en œuvre dans trois pays en Afrique de l'Ouest pour améliorer l'équité d'accès aux systèmes de santé concernant certaines prestations particulières.

WS-MON-006 LINKING ADMINISTRATIVE LEVELS IN THE IMPLEMENTATION AND INSTITUTIONALIZATION OF HIA: A COMPARATIVE ANALYSIS OF FEDERAL COUNTRIES

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General description: The implementation of Health Impact Assessment (HIA) as a policy-making tool is spreading globally. It has now far exceeded the realm of the Anglo-Saxons countries who had initiated the practice. The dissemination of HIA may take various forms, and varies if state governance is highly centralized or decentralized.

In parallel, the institutionalization of the HIA practices is also evolving at high speed. At the early stages, approaches were experimental. These have now led the way to approaches that raised the issue of HIA embedded in the evaluation mechanisms used at the governmental level. Moreover, the manners in which the government will integrate it as a tool to take into account health issues in all public policies differ from a country to another.

Rational: This workshop is intended to discuss issues at the interface between these two observations. Based on concrete experiences in federal countries (Canada, Australia and Switzerland), it proposes to compare the ways in which HIA was disseminated, starting from the origin of its development, and moving to another governmental level. Also, it intends to discuss, the way HIA is used in the political and administrative contexts at each government level.

In particular, it will address and discuss the following topics:

1. Progress and difficulties in institutionalizing HIA
2. Presence / absence of a most effective level of political-administrative organisation to develop HIA
3. Methods and results of transferring the model of institutionalization between political-administrative levels
4. The quality of the interactions between political-administrative levels and their impacts on the consideration of health in all policies and its links to sustainable development.

Learning objectives: Understand main issues regarding the institutionalization of HIA at various governmental levels and the dissemination of the practice from one level to another.

Expected results: 1. Participant will be aware of the main factors that enable and that impede the institutionalization and dissemination of the practice of HIA at governmental levels.

2. Participants will be able to identify areas for further action in the promotion of the institutionalization of HIA in their own context.

WS-MON-007 TRADITIONAL-MINDFUL HEALTH-RELATED IDEAS OF ASIA INTO MAINSTREAM OF HEALTH PROMOTION AND EDUCATION

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General description: The First Asia-Pacific Health Promotion and Education (APHPE) conference in IUHPE-NPWP (Northern Part of Western Pacific) was successfully held in Japan in 2009, and now, coming APHPE conferences are expected to be held in NPWP countries continually. Although all NPWP countries have their own mindful awareness and resources of traditional health-related ideas, most of these awareness-ideas are not yet linked to the mainstream of health promotion and education (HP-HE). The present symposium offer a good chance of start networking mindful ideas in NPWP countries.

Rational: As a new movement of public health, idea of health promotion is already accepted and implemented in Asian countries. As the global movement, health promotion is dominated by Western philosophies of evidence based health sciences as well as social sciences. However, health promotion is expected to mobilize societies as well as individuals fully considering diversities of cultures and societies. In order to understand the everyday life of people living in NPWP countries, key concept is mindfulness, a calm awareness of one's body functions, feelings, environments, content of consciousness, or consciousness itself. Recently, historical mindful ideas rooted in everyday life in Asia, such as tai chi, Zen-meditation, incense, herb-use, etc. are re-evaluated in the field of neuroscience as well as educational science. Now, mindful awareness of daily life is considered as the promising source of health and well-being.

Learning objectives: In NPWP countries, HP-HE specialists are usually not fully aware of the meaning of mindfulness in daily life, because mindful dimensions are not so valued in theories and practices of HP-HE which they learned. In the symposium, participants are at first encouraged to sense and remind their mindful dimensions of cognition by experiencing participatory techniques of experiential learning. Then, discussants will share their mindful and traditional ideas of health (and medicine), and possible contribution to each of coming-future APHPE conferences.

- 1) Case of Mongolia
- 2) Case of Taiwan
- 3) Case of Hong Kong and Macao
- 4) Case of Korea
- 5) Case of Mainland China
- 6) Case of Japan
- 7) Mindful directions of coming APHPE conferences

Expected results: Throughout workshop, participants and discussants cross-pollinate ideas, and formulate insights into varieties as well as the common value of mindful-traditional ideas thought NPWP countries. The present workshop offers a foundation to empower traditional-mindful ideas of Asia into mainstream of HP-HE. In coming-successive APHPE conferences, each host country's mindful-traditional dimensions of daily life and related consciousness will be further excavated, shared and linked as the diversified and meaningful resource of HP-HE not only in Asia but also world wide.

WS-MON-008 DEVELOPING EQUITY ORIENTED HIA: FROM RISK FACTORS TO ROOT CAUSES

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General description: Health Impact Assessment that addresses health equity is an innovative approach to the critical assessment and evaluation of the impact of policies, programs, or projects on the health of a population, with a particular focus on existing or exacerbated health inequities. However, the development, implementation and uptake of equity oriented HIA has been impeded by conceptual, methodological, and political challenges. In order to advance equity oriented HIA in practice, this workshop will explore challenges and opportunities identified through several international workshops, pilot applications of a range of equity-oriented HIA, and global collaboration led by the World Health Organization.

Rational: Given the increasing awareness of the influence of the social determinants of health, fuelled by the report from the WHO Commission on the Social Determinants of Health, equity oriented HIA provides one approach to evaluate and influence structural policies, treaties, programs, and projects that may on one hand generate or intensify health inequities or on the other, offer a way to reduce health inequities. This workshop will utilize multiple perspectives to inform an insightful dialogue on the advancement of equity oriented HIA and its application in practice.

Learning objectives: Three perspectives regarding the conceptualization and implementation of equity oriented HIA will guide knowledge generation in this workshop. Dr. Jackson and Dr. Cook will build on an international workshop and Canadian pilot tests to explore development needs associated with equity oriented HIA, including a strategic plan for an advanced equity oriented HIA tool, the integration of equity oriented HIA in governmental strategic planning, meaningful evaluation approaches for equity oriented HIA, and a framework for international capacity building for equity oriented HIA. Dr. Scott-Samuel will utilize findings from two international workshops and his HIA expertise to propose a greater integration of root causes and global impacts of health inequities into an advanced equity oriented HIA tool. Dr. Sadana and Dr. Lee will share opportunities identified by the WHO Collaborating Centre Network on Health Equity to work in conjunction with governments and other organizations to advance the application of equity oriented HIA and document how these enhance equity oriented policies and actions.

Expected results: Participants will have an opportunity to explore challenges and opportunities regarding equity oriented HIA conceptualization, implementation, evaluation, and partnership. The workshop will be designed as an interactive conversation, intended to gather input from participants regarding the development and application of an advanced equity oriented HIA tool. As such, participants will have the opportunity to learn about equity oriented HIA in its current iterations as well as debate its future in health promotion. Insight generated at this workshop will be utilized to inform the development and implementation of an advanced equity oriented HIA tool.

WS-MON-009 CASE STUDIES IN GLOBAL SCHOOL HEALTH PROMOTION: EXPERIENCES FROM VARIOUS COUNTRIES

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General description: This workshop builds on a review of implementation research, and shows how schools in various countries have built capacity for health promotion by implementing a whole-school concept. Linking research to practice, we analyzed the factors that implementation research has identified and which schools used around the world. The most frequently utilized strategies include: vision and concept, dedicated time and resources, stakeholder ownership and participation, team training and ongoing coaching, cross-sector collaboration, champions and leaders at all levels, data-driven planning and decision-making. In some countries health-promoting schools were an engine for social development of the communities.

We will address how schools have planned and implemented a health-promoting schools approach that includes these strategies. Authors will give examples from their respective countries and will be available for discussions in small groups.

Rational: This workshop links implementation research with practical examples from around the world and shows how health-promoting schools have joined forces for health, equity and sustainable development.

Learning objectives: Participants will be able to describe how schools around the world have implemented strategies that research has shown to be critical factors for implementation of policies and programs.

Expected results: Participants will be inspired to take steps to initiate or improve implementation of health-promoting schools in the countries or communities where they live or work.

WS-MON-010 DETERMINE – PRACTICAL MEASURES TO TAKE FORWARD THE WHO CSDH RECOMMENDATIONS IN THE EU

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General description: Health inequalities between different socioeconomic groups persist throughout Europe. This workshop will highlight the outcomes of DETERMINE, a European initiative that supports practical steps to take forward the recommendations of the WHO Commission on the Social Determinants of Health (CSDH).

DETERMINE is a 3 year project (2007-2010) co-funded by the European Commission and co-coordinated by EuroHealthNet, which brings together a high level Consortium from 26 countries. Its objective is to support and enable policy makers and practitioners in all policy sectors to place a higher priority on health and health inequalities when developing policy.

Rational: DETERMINE results show that effective action on health inequalities and the social determinants of health is taking place throughout Europe, but that these responses are uneven and non-systematic. Trends indicating widening inequalities in many countries and a worsening macro-economic climate make this debate, and further action, essential.

Learning objectives: Workshop participants will learn about practical actions undertaken by DETERMINE partners to advance their work on social determinants of health, and reflect on how they can apply and build on these outcomes to maintain the momentum of action in this area.

To meet these objectives, the workshop will be structured as follows:

I. Introduction & description of activities -3 short presentations (30 mins)

The session will be introduced by a short film about DETERMINE. This will be followed by two brief presentations describing key strands of work undertaken by DETERMINE partners on: 1) policies and actions, economic perspectives and good practices from Europe; 2) Building Capacities. The 3rd presentation will focus on the way forward.

II. Participation Café style dialogue (45 mins)

Using a café style format, key questions will be posed to drive debate around the strands described in the presentations Policy, Economics, Capacity and Advocacy.

- What are the important messages to communicate about addressing health inequalities?
- What is preventing widespread, urgent and systematic prioritised responses to health inequalities?
- What can be done to engage sectors outside the health sector in fulfilling their responsibility?
- What kind of support is required to maintain the momentum for action within the public health and health promotion community and beyond?

III. Conclusions (15 mins)

Expected results: This workshop will lead to greater awareness amongst participants about what policies, programmes, and practical tools and mechanisms are being applied in the EU to address the SDH and health inequalities. It will also provide an insight into what further knowledge and tools are needed to mainstream health equity. Key points from each café style conversation will be collated, posted on www.health-inequalities.eu and fed into relevant forums like EuroHealthNet's Equity Channel.NET.

WS-MON-011 ENJEUX ET COMPLEXITÉ DE PASSER D'UNE VISION CLINIQUE À UNE PERSPECTIVE DE DÉVELOPPEMENT COMMUNAUTAIRE LOCAL: LES EXEMPLES DU BÉNIN, DU BRÉSIL, DU QUÉBEC ET DU MALI

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Description générale: Dans la foulée de la Charte d'Ottawa de la promotion de la santé, de la Déclaration de Jakarta pour la promotion de la santé, ainsi que la Charte de Bangkok de la promotion de la santé dans un monde globalisé, les gouvernements ont souscrit à un processus débouchant sur l'amélioration de la santé à travers la responsabilité sociale et la participation des citoyens. Ils ont adopté des politiques et des stratégies qui renforcent le système de prestation de soins de santé et de prévention fondés sur une approche populationnelle « près de la population » via les unités de santé familiales ou les Centres locaux de services communautaires). Ils redéfinissent et mettent en œuvre les activités axées sur les collectivités en faisant appel à de nombreux organismes et divers acteurs notamment aux agents communautaires ou acteurs relais, ou aux ONG dont le mandat est celui d'être issus de la communauté et d'être près de sa population.

Concept: A travers quatre situations, celle du Bénin, et du Brésil avec les agents communautaires de santé, celle du Mali avec ces acteurs relais et celle du Québec avec ses ONG, l'atelier soulève les enjeux et la complexité de la participation communautaire en lien avec la santé. Confiés à un rôle de prestataires de soins de santé, et conscients des limites actuelles de leurs actions pour mobiliser la communauté, les acteurs relais/ONG/agents communautaires de santé sont maintenant porteurs d'une nouvelle conscience pour aider les communautés à passer du chômage au développement local. L'atelier discutera la possibilité d'avoir les conditions favorables pour ces acteurs relais pour devenir de bons agents de changement de développement communautaire local.

Objectifs de l'enseignement: L'atelier réflexion désire interroger le rôle (de contrôle ou de soutien) des gouvernements dans le développement communautaire, l'investissement financier de l'état dans cette pratique, l'imputabilité de ses acteurs en regard de l'état, les différents mécanismes de participation et la place réelle occupée par ces organismes et ces agents.

Résultats attendus: 1- Critiquer plus globalement les enjeux et les complexités inhérentes au développement communautaire en santé.

2-Être stimulé pour la création des nouvelles solutions applicables à leurs milieux d'origine dans une perspective de la collaboration intersectoriel.

3-Redimensionner les réseaux de contacts professionnels pour des projets futurs.

WS-MON-012 APPLYING AGE-FRIENDLY PRINCIPLES TO ACHIEVE SUPPORTIVE ENVIRONMENTS FOR HEALTH

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General description: This workshop will provide an opportunity for participants to consider and discuss how promoting age-friendly environments can positively influence population health and how the tools that have been developed to enable communities to become age-friendly could be adapted within their own context.

The workshop will consist of a half-hour presentation with two speakers outlining the initiative and the tools available. This will be followed by table discussions, using a World Café format, where participants move among three tables.

Rational: The Public Health Agency of Canada (PHAC) is a leader in the use of the World Health Organization's (WHO) age-friendly cities guidelines. Canada has adapted these guidelines for rural and remote communities and is actively encouraging innovative community engagement initiatives across the country.

Both PHAC and WHO have recognized (and worked closely to promote) the positive impact of age-friendly communities on the health and well-being of older citizens. Seniors and their organizations, governments at all levels, the business community and service providers have created unique and effective partnerships. The success with implementation of Age-Friendly community initiatives in Canada has been through collaborative effort, often with non-traditional partners.

PHAC continues to provide essential leadership in its collaborative efforts. Work continues on the development of resources to measure and evaluate the impact of age-friendly efforts; to create implementation tools; and to consider opportunities that will contribute to the long-term sustainability of age-friendly community efforts. In addition, PHAC is working to strengthen the evidence base on the impact of age-friendly communities on specific health issues, such as mental health, physical health, and mobility in the context of built and social environments.

Learning objectives: In this workshop, participants will:

1. Learn how age-friendly guidelines can be used as a tool to build bridges between health promotion, urbanisation and societal development, that will benefit all parties;
2. Gain a better understanding of the importance of strong alliances and the engagement of non-traditional partners; and
3. Share innovative ideas and strategies regarding the application of age-friendly concepts.

Expected results: Participants will obtain a strong understanding of the positive influence of age-friendly environments on population health. Participants will also be better equipped to adapt the age-friendly model within their own communities.