

REFERENCE FRAMEWORK FOR INFLUENCING PUBLIC POLICIES AT THE MONTRÉAL DRSP

Équipe Politiques publiques et partenariats stratégiques



The Reference framework for influencing public policies at the Montréal DRSP

was produced by the Direction régionale de santé publique of the Centre-Sud-de-l'Île-de-Montréal CIUSSS.

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The reference framework is intended for use by internal teams at the Montréal DRSP (Montréal's regional public health department).

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Public policies, government and public health

The public policies pursued by government authorities structure the various aspects of collective life, particularly in the social, political and economic spheres. These policies embody different visions of the role of the government and its interventions with respect to society and the individuals who compose it.¹ In general terms, a public policy refers to:

*a statement produced by a public authority that defines one or more problems affecting the population or one or more groups within it, and that also defines (to varying degrees) a response to that problem in terms of objectives, actions and actors.*²

More specifically, public policies refer to recurring attempts by the government or other actors³ (municipal council, agglomeration council, borough council, associated city, etc.) to regulate public affairs, with the aim of controlling decisions made during the emergence, formulation and implementation these same policies.⁴

These policies significantly influence the distribution and normative framework⁵ of the social determinants of population health, such as income, housing, education, work, transportation, urban planning, etc.⁶ As a result, public policies have a major impact on individual health and on the social and health inequalities that arise between population groups.⁷ Undoubtedly, public health falls within the realm of "public affairs" governed by public policy. The management of the COVID-19 pandemic was a good illustration of this phenomenon.

Given their intent to act upstream on health determinants and to tackle social inequalities of health, it is incumbent on public health authorities to support decision makers in adopting healthy public policies.⁸ In Québec, as in Canada,⁹ public authorities have formally entrenched this responsibility in legislation and in various government action plans.¹⁰ The Minister of Health and Social Services, the national public health director, and the regional directors have explicit legal responsibilities¹¹ and take appropriate action at the national and regional levels.

¹ Stéphanie Paquin, Luc Bernier, Guy Lachapelle et al. *L'analyse des politiques publiques*, Les Presses de l'Université de Montréal, 2010. Gouvernement du Québec, Secrétariat du Conseil du Trésor. *Guide d'élaboration des politiques publiques*, June 2019.

² NCCHPP, A Public Policy Competency Framework for Public Health Actors, November 2015.

³ The DRSP's efforts to influence public policies are focused on those enacted by public authorities.

⁴ Vincent Lemieux. *L'étude des politiques publiques*. 3e édition, Québec: Presses de l'Université Laval, 2009.

⁵ Laws, regulations, policies, social norms.

⁶ WHO. *Ottawa Charter for Health Promotion*, Geneva, WHO, 1986.

⁷ WHO. *Closing the gap in a generation: health equity through action on the social determinants of health*, 2008.

⁸ WHO. Commission on Social Determinants of Health (2008).

⁹ Public Health Agency of Canada. See, in particular, *A Vision to Transform Canada's Public Health System – Chief Public Health Officer's Report on the State of Public Health in Canada 2021*, December 2021, pp.60-64.

¹⁰ Politique de la santé et du bien-être (1992-2002), Priorités nationales de santé publique (1997-2002), PNSP 2003-2012 and 2008 update and PNSP 2015-2025.

¹¹ *An Act to make the health and social services system more effective*, ss 22, 92-101. *Public Health Act*, ss 53-54.

Influencing public policies at the DRSP

The actions of the DRSP (the regional public health department) aimed at influencing public policy are legitimized and framed by legal guidelines ensuring its actions are consistent with its public health functions (surveillance, protection, prevention and promotion). Thus, under the *Public Health Act*, regional directors of public health are empowered to “promote health and the adoption of public social policies capable of fostering the enhancement of the health and welfare of the population among the various resources whose decisions or actions may have an impact on the health of the general population or of certain groups.”¹²

In keeping with its legal responsibilities and mission, the Montréal DRSP's major structuring plans (Plan stratégique, Plan d'action régional intégré de santé publique) propose numerous actions aimed at influencing public policies that affect the various determinants and services that fall within the DRSP's sphere. The vast majority of these interventions involve making representations to decision makers, while others are aimed at developing alliances with key actors, or producing briefs, position papers, and tools.

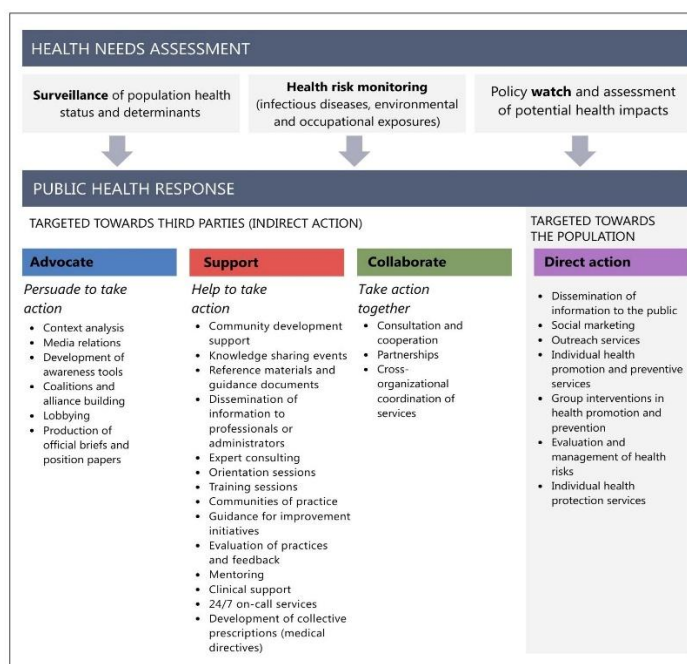


Figure 1: Typology of interventions, Litvak, E., Dufour, R., Leblanc, É., Kaiser, D., Mercure, S.A., Nguyen, C. T. & Thibeault, L. (in press). Making Sense of What Exactly Public Health Does: A Typology of Public Health Interventions. Detailed definitions. Canadian Journal of Public Health

Considering that the strategic levers for acting on health determinants fall under the responsibility of intersectoral partners acting at different levels of government, influence on public policies is essentially exerted indirectly through mobilization, support or collaboration (see details in Appendix 4: Typology of interventions).¹³

To act on public policies, it is important to correctly position the role of public health and its modes of interaction with government bodies, and also to properly understand government intervention in a given area and the various factors that influence its actions. While public health authorities have the scientific expertise needed to inform political decision makers, the field of political science offers various frameworks for analyzing¹⁴ the context and power relationships in which public policy decisions are made: “Allowing for context [...] enables a consideration of issues of power in all its dimensions. If it is nothing else, the study of politics (and hence political science) is the study of power.” Action on public health policies therefore results from the complementarity of scientific and political expertise.

¹² *Public Health Act*, s 53.

¹³ Richard Lessard, Renée Dufour, *La santé publique - Stratégies d'influence et acceptabilité sociale*, Les Presses de l'Université de Montréal, 2023, p. 16.

¹⁴ Patrick Fafard, Adèle Cassola, Evelyne de Leeuw, *Integrating Science and Politics for Public Health*, Palgrave Studies in Public Health Policy Research, Palgrave Macmillan Cham, 2022.

¹⁵ Patrick Fafard, *Evidence and Healthy Public Policy: Insights from Health and Political Sciences*, NCHPP, May 2008.

In attempting to influence public policies, the DRSP generally acts as an expert advisor on population health to various political authorities. The DRSP must base its interventions aimed at influencing public policy on its scientific expertise, derived from the analysis of evidence and surveillance data, its objective viewpoint, its neutrality and its independence. These principles enable the DRSP to establish the legitimacy of its advisory role in the political arena. It must at all times avoid the pitfalls of unfounded opinion, impressions, or of supporting organizations with perceptible political leanings. Its credibility as a government actor (neutrality) and advisor (objectivity) is at stake. The DRSP can address decision makers, but this only matters if decision makers give credence to what it says. This credibility is gained, strengthened or eroded by virtue of the nature and quality of the DRSP's interventions.

The utility of the reference framework

There are already a number of guides and reference frameworks for public health bodies, designed to improve understanding of public policy and support efforts to influence policies.¹⁶ To complement existing guides, the present reference framework proposes a precise and concrete approach, with guidelines for the development and implementation of specific actions aimed at influencing public policies.

The framework aims to:

- 1) Promote the achievement of established public health objectives and instill a shared vision across the organization with respect to influencing public policy;
- 2) Strengthen the ability of teams to take forceful action;
- 3) Formalize the organization's procedures related to the movement of public health files through the public sphere.¹⁷

At the operational level, content teams are responsible for developing and implementing activities aimed at influencing public policies. The framework proposes a pragmatic approach that aims to:

- 1) Help teams position their public health issues within their political environment;
- 2) Evaluate the relevance of an influencing intervention and the most appropriate means of implementing it;
- 3) Provide content teams with the tools they need for their public policy interventions.

The process

The reference framework proposes a three-stage approach that can support teams in achieving their aim of influencing public policies.

In the following sections, a summary table presents, for each of the three stages of analysis, a brief description of the elements to be considered, as well as questions designed to stimulate team reflection and help orient actions. Although presented sequentially, the framework's stages may be considered concomitantly.

1. ***The public health problem and the political environment:*** this section is a prerequisite for any public policy intervention the DRSP intends to carry out. The aim is to define and characterize the public health problem and position it within its political environment.

¹⁶ This framework complements the *Outil d'adaptation du positionnement organisationnel à des dossiers spécifiques* (a tool for adapting organizational positioning to specific public health issues) produced by the Service de Gestion des savoirs in 2022.

¹⁷ Refer to the proposed typical pathway of a public policy influencing intervention, included in Appendix 2.

2. **Opportunity, analysis of relevance and choice of the best influencing strategy:** the aim here is to determine whether acting on a specific public health problem justifiably requires taking a position so as to influence public policy, and if so, what influencing strategy to adopt. Central to the approach, this section incorporates the **Briefing note on relevance**, a tool that will stimulate collective reflection on opportunity, relevance and choice of strategy. This rate should be determined by any team wishing to implement an intervention aimed at influencing public policies.
3. **Dissemination and evaluation of the intervention:** the form of communication and the target audience(s) for the intervention need to be determined, while the effectiveness and results of the intervention need to be evaluated. Therefore, it is necessary to follow up on these.

Two synthesis tools have been developed in parallel to provide more practical support for teams.

- **Questions to ask prior to implementing a public policy influencing strategy** This document proposes a series of questions to be examined *prior to implementation*. It is designed to prompt reflection about the information and resources likely to be required, as well as about the nature of the opportunity. The aim is to determine whether the preconditions are right for implementing a partial or complete influencing strategy.
- **Reference framework checklist**
This practical checklist presents in summary form the three main stages of the approach described above. It is intended as a practical tool designed to facilitate the work of teams, who can refer to it directly after reading the full reference framework.

Finally, assuming that the choice of strategy requires the writing of an argumentative text, the framework proposes a few guidelines for structuring the text and developing the argumentation.

4. **Writing an argumentative text:** that uses structured argumentation to adequately present arguments describing and offering solutions to public health problems in a manner suited to the context and the target audience, with the aim of convincing other actors.

Support from the PPS team

The public policy and strategic partnerships team (*Politiques publiques et partenariats stratégiques* or PPS) supports senior management and the various sectors in their efforts to influence public policy to improve population health and achieve public health objectives. The team's approach is guided by the following values:

Collaboration	Work collaboratively and collegially with teams
Enhancement	Help promote the work of teams
Anticipation	Anticipate issues, opportunities, reactions, etc.
Responsiveness	Respond rapidly to team requests and needs
Flexibility	Adapt to team needs, contexts and expectations
Rigorousness	Maintain high quality standards with respect to external positioning

The team's services are structured around three axes: management priorities, sectoral support and organizational capacity building.



To assist the organization with its influencing activities, the public policy team provides support in the areas of legal and institutional affairs, internal and external liaison, strategic communications and partnership development.

Depending on organizational priorities, the PPPS team can also provide support during the different stages of the public policy influencing process described in this framework. During this process, the role of the PPPS team is to support the thematic teams, who are the content experts. To ensure consistency among the various levels involved in internal action, validation and approval stages are required at various points in the public policy influencing process. To this end, we recommend that you refer to the [typical pathway of a public policy influencing intervention, found in the framework's appendix](#).

Stages of the process

1. The public health problem and the political environment

This first step is the prerequisite for any public policy intervention to be carried out by the DRSP. It consists firstly of defining the public health problem in order to characterize it as clearly as possible, and secondly of positioning it within its political environment, in order to gain an accurate, global understanding of the elements that structure it. In essence, this is a monitoring, analysis and synthesis exercise designed to establish the links between social and structural determinants and the population's health status.

The determinants covered by the regional action plan (*Plan d'action régional intégré* or PARI) serve as indicators of the current situation and position the whole issue within its context and its political environment.

Steps	Elements to consider	Orienting questions
1.1. Defining the public health problem		
1.1.1 Literature search (collection, processing, synthesis and dissemination)	Research the current state of knowledge on a given subject to document the public health problem. <ul style="list-style-type: none"> - Literature review and ongoing data collection (surveillance data, grey and scientific literature, etc.) - Ongoing strategic and scientific scan - Field experience (partners, CISSS/CIUSSS, etc.) - Updating of data and literature - Critical synthesis 	<ul style="list-style-type: none"> - Is the literature review complete and up-to-date? - Are the data used the most recent? - Are data sources credible and recognized by peers? - What are the key concepts, the logic model? Indicators? - What are the main research findings?
1.1.2. Defining the public health problem	Identify the health problem and demonstrate why this health problem constitutes a public health problem . An emphasis on social inequalities in health (SIH) is expected. <ul style="list-style-type: none"> - Epidemiological reality linked to a health determinant - Relative scope/significance (intensity, extent, severity, disparities, comparison, etc.) - Public health objective(s) enabling the identified problem to be solved - Solution(s) leading to achievement of the public health objective(s) 	<ul style="list-style-type: none"> - Why does the identified health problem constitute a public health problem? <ul style="list-style-type: none"> - Which health determinant is affected? - What is the impact on SIH? - Is it a problem associated with illness, disability or mortality? - Is it possible to prevent it? - Which populations are affected? - What is the magnitude of the identified problem for Montréal? - How does Montréal compare with the rest of Québec or with other major cities? - Are other determinants affected?

	- DRSP's legal mandates related to the problem	- Does the DRSP have any legal mandates that relate to the problem identified and are there levers for action related to the recommended solution?
1.2. Political environment of the public health problem		
1.2.1. Strategic scan	Actively scan the political, economic and social environment to keep abreast of emerging issues, anticipate developments and provide appropriate information in a timely manner. <ul style="list-style-type: none"> - Media scan - Political scan (regional, national, federal) - Scientific scan - Opinion, polls - Reports from advisory bodies (e.g.: CNESST, Protecteur du citoyen, Vérificateur général, BAPE, consulting firms, etc.) 	<ul style="list-style-type: none"> - How is the identified public health problem being covered in the media? - Where does public opinion stand on this public health problem? Are any polls available? - Is a bill that could have an impact on the identified public health problem or one of its determinants going to be included on an upcoming government agenda? - Is a public policy related to the identified public health problem or one of its determinants currently under review?

1.2.2. Political contexts	Identify the different political contexts likely to influence the evolution of the identified public health problem. <ul style="list-style-type: none"> - Governments and political institutions at the various levels involved - Laws and regulations, policies, orientations and action plans - Public policy development cycle - Budget allocation mechanisms - Consultation mechanisms 	<ul style="list-style-type: none"> - Which level(s) of government is/are concerned by the identified public health problem or one of its determinants? - What laws, regulations, etc. govern the identified public health problem or one of its determinants? - What stage of the public policy process is currently underway? (1. Agenda setting; 2. formulation; 3. decision making; 4. implementation; 5. evaluation)¹⁸ - Do other jurisdictions face a similar public health problem? If so, what are their levers for action? What can we learn from these experiences?
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¹⁸ Stéphanie Paquin, Luc Bernier & Guy Lachapelle et al. Op. cit. Secrétariat du Conseil du Trésor, *Guide d'élaboration des politiques publiques*, Secrétariat du Conseil du Trésor, June 2019, p. 9.

	- Experiences of other comparable jurisdictions (other public health organizations, cities, regions, provinces, countries)	
1.2.3. Mapping of actors ¹⁹	<p>Identify and characterize the main actors concerned by the public health issue, in order to position the organization in its ecosystem and thus form a judgement as to the most appropriate interventions based on the position of the other stakeholders.</p> <ul style="list-style-type: none"> - Identify: subject area (youth, occupational health, etc.), sector (community, institutional, philanthropic, etc.), decision making levels (local, regional, national, etc.), etc. - Characterize: highlight dynamics and power relationships (roles and responsibilities, potential for influence, strengths, weaknesses, levers, etc.). Focus on relationships between the actors involved - Outline the different positions held on the identified public health problem 	<ul style="list-style-type: none"> - Which strategic partners are concerned by the identified public health problem, and which could potentially become so? - What are the positions of the various stakeholders with regard to the problem raised? - What relationships do the various actors have with each other?
1.2.4. Analysis of the public policy's content	<p>Where appropriate, analyze the content of the public policy whose change is desired.</p> <ul style="list-style-type: none"> - The analysis can be carried out prior to the adoption of a public policy to provide information to the actors concerned - The analysis can also be carried out when the public policy is already in effect, in order to assess its various parameters with a view to improvement, renewal, etc. 	<ul style="list-style-type: none"> - Does the public policy achieve the original public health objective? - Has the public policy produced unintended effects (positive or negative)? - Has the public policy proven to be equitable (avoiding inequalities among different groups)? - What are the benefits for the government or other actors? - Does the policy comply with legislation? Existing administrative mechanisms? Available resources? - Is it acceptable to all the actors concerned, including the target population (from the definition of the problem to its adoption, implementation and accountability mechanisms)?

¹⁹ For this section of the process, the *Outil d'adaptation du positionnement organisationnel à des dossiers spécifiques* offers an interesting grid and guidance.

2. Opportunity, analysis of relevance and choice of the best influencing strategy

Based on the public health problem identified and its political environment, the aim here is to **analyze the relevance** of an influencing intervention and determine whether or not acting on the health problem justifiably requires taking a position so as to influence public policies. The analysis must make it clear why intervening at the public policy level is an appropriate strategy, as compared to others, and consider possible negative externalities. For its part, the **feasibility analysis** assesses the organization's capacity (expertise, resources, governance, etc.) to develop and implement an effective influencing strategy, and helps establish realistic expectations and determine an appropriate means of intervention. Once an opportunity has been identified, it may be a good idea to immediately analyze organizational capacity, before embarking on a lengthy analysis of relevance.

The elements in this section are summed up in the briefing note on relevance, which must be completed by the teams so the orientation and opportunity for the proposed influencing intervention can be validated by the decision-making hierarchy.

Steps	Elements to consider	Orienting questions
2.1 Analysis of relevance		
2.1.1 Strategic analysis of the opportunity	Identify the opportunity and demonstrate that the context is favourable to an influencing intervention. <ul style="list-style-type: none"> - Indicate the source of the opportunity (current events, partner request, public consultation, unpublished PH data, pressing issue, etc.) - Describe the content of the public policy in question and its stage of development - Identify the actors involved and the positions of the various stakeholders in this specific context - Demonstrate that the analysis of the public health problem is complete (rigorous, up-to-date data) - Demonstrate that the influencing intervention is justified by the significance of the public health issues linked to this public policy 	<ul style="list-style-type: none"> - What has created the opportunity? - Are the available literature and data sufficiently solid and error-free to support intervention with complete credibility? - Is the public health problem significant enough in this specific context to justify an influencing intervention? - Is the DRSP's intervention justified, given the positions of other stakeholders and the context?
2.1.2 Position of the organization and its	Present the organization's position with respect to the public health problem identified and the targeted public health objective.	<ul style="list-style-type: none"> - In the past, how has the organization engaged with the identified public health problem?

legitimacy ²⁰		
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	<ul style="list-style-type: none"> - Briefly survey the organization's historical position with respect to this issue. If applicable, present the position of other public health institutions (local, regional, national, international) who support the organization's intervention - call to mind the DRSP's legal mandates that are related to the public health problem, as well as the levers at its disposal for addressing the problem. Demonstrate that the organization has the legitimacy to intervene in this public health problem. 	<ul style="list-style-type: none"> - Does the organization have a clear and unequivocal position regarding the identified public health problem in this specific context? - What are the legal mandates of the DRSP associated with the problem in question? By virtue of which mandate can the DRSP intervene?
2.1.3. Level of priority	Determine the level of priority the organization wishes to assign to the problem (high, medium, low) based on the opportunity, and also on the priorities established during strategic planning and in the PARI	<ul style="list-style-type: none"> - Is this public health issue included in the PARI? - Does the PARI's service offer include influencing actions targeting this determinant? - Is this a senior management priority?
2.1.4. Strategic objective	<p>Present the strategic objective(s) pursued by the organization in relation to the identified public health problem.</p> <ul style="list-style-type: none"> - Specify the strategic objective pursued. The strategic objective differs from the public health objective and focuses on the policy change the intervention aims to bring about (e.g.: to influence the adoption of amendments to a bill concerning the labelling of alcoholic products, to draw the attention of another department to the lack of available data on a specific issue) - Determine whether the public health objective will be achieved by means of the strategic objective. This is the desired benefit of taking a position 	<ul style="list-style-type: none"> - Will the strategic objective enable the organization to provide a solution to the public health problem? - What is the desired change? What is the expected benefit of taking a position? - Who are we trying to influence, and to what end?
2.1.5 Analysis of different influencing options and	Propose and compare different influencing strategies . Identify the various potential influencing strategies (supporting, mobilizing, collaborating, influencing, proposing alone or with others, prompting discussion among partners/the media, etc.)	<ul style="list-style-type: none"> - What are the alternatives in terms of influencing strategies?

choice of strategy		
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²⁰ Refer to the *Outil d'adaptation du positionnement organisationnel à des dossiers spécifiques*.

	<ul style="list-style-type: none"> - List the advantages and disadvantages associated with each option (risks, benefits) - Explain why an intervention aimed at influencing public policy is the most appropriate option. Evaluate other options. - Clarify the relationship between the options and the targeted strategic objective, as well as the relationship to the opportunity <p>Choose the strategy and the recommended means of intervention for achieving the previously established strategic objective(s)</p> <ul style="list-style-type: none"> - Specify the appropriate means to use based on the chosen influencing strategy (brief, position paper, press release, sharing of new data and best practices, letter, etc.) - Specify the target audience, governing body or audience for the Influencing strategy²¹ 	<ul style="list-style-type: none"> - Is intervention at the public policy level the most effective option? - Does a public stance necessarily have to be taken? - What does the DRSP have to say that hasn't already been said? What is the added value? - Toward which actors should our efforts be directed? - Do we wish to address decision makers directly or indirectly (through other actors)? - Do we wish to gauge/mobilize the support of other organizations? - Do we want other organizations to speak out publicly on the subject?
<p>2.1.6. Recommendations and potential for achievement</p>	<p>Specify the recommendations associated with the public health objective sought, and determine their potential to be achieved.</p> <ul style="list-style-type: none"> - Identify the main messages to be delivered (the argumentation) - Identify recommendations aimed at resolving the public health problem raised and link them to the main messages - Assess the potential for achieving what is being recommended. The aim here is for specific, relevant actions to allow the organization to achieve a concrete goal, via explicit, realistic and applicable recommendations (not broad principles, but concrete measures that help solve the public health problem identified). Wherever possible, the recommendations are aligned with the levers available to the targeted audience 	<ul style="list-style-type: none"> - What does the organization recommend to solve the public health problem identified? - Do the recommendations have a concrete potential of being achieved?

²¹ Refer to the CCSMTL dissemination plan.

2.2. Feasibility analysis		
2.2.1. Impacts of the intervention	<p>Assess the potential impacts of the intervention (advantages, risks, benefits) for both the organization and for stakeholders. These impacts may relate to the focus of the intervention (e.g., a bill), to the mobilization of partners, to public opinion, or to the organization's credibility.</p> <ul style="list-style-type: none"> - Identify the risks associated with intervention (political co-optation, credibility, legal action, etc.) as well as the risks of not seizing the opportunity (negative health impacts, marginalization of public health expertise, etc.) - Identify the concrete benefits expected if the strategic objective is achieved (e.g., amendment to a bill) and the (negative) consequences if the same objective is not achieved - Where necessary, identify ethical issues relating to the intervention and call on the CIUSSS ethicists 	<ul style="list-style-type: none"> - What impacts is it hoped the intervention will have? - What are the blind spots that could pose potential or actual risks to the organization? - Are there any ethical issues associated with the proposed intervention?
2.2.2. Resources	<p>Determine what internal resources are needed to carry out the intervention (expertise, availability, governance, etc.). If necessary, identify the external resources required.</p> <ul style="list-style-type: none"> - Evaluate the quantity of resources to be allotted based on to the potential for achieving the strategic and public health objectives - Assess the nature of the expertise required and the organization's capacity to intervene (time, contacts, etc.) - Specify the roles and responsibilities of the various persons involved and, if necessary, the governance structure of the intervention - Identify necessary collaborations 	<ul style="list-style-type: none"> - Do we have the required expertise or the capacity to generate it? - Do we have the capacity to carry out the intervention? - Are the roles and responsibilities of the professionals and the various teams well defined, as well as the procedures surrounding the intervention's progress?

2.2.3. Timeline and deliverables	<ul style="list-style-type: none"> - Specify a timeline for completion, based on available resources and the political agenda (public consultation dates, national awareness day, etc.) - Break down interventions into a few specific deliverables included in a work plan (stages completed and remaining) 	<ul style="list-style-type: none"> - Do we know the dates/milestones that could mark our progress?
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3. Dissemination and evaluation of the intervention

Depending on the chosen influencing strategy, the intervention will target one or more specific audiences. Thus, the deliverables that emerge will generally depend on the dissemination strategy, and may include PowerPoints, letters, executive summaries, briefs, position papers, etc. Public health's traditional role as an expert and broker of evidence-based knowledge on health issues, and its legal mandates to inform the population and foster intersectoral partnerships, are certainly the most relevant factors guiding this reflection. Finally, as with any intervention, it's essential to reflect back on its progress and impact, so as to be able to better plan what follows.

Steps	Elements to consider	Orienting questions
3.1 Dissemination		
3.1.1 Communications - to be validated with the communications team ²²	<ul style="list-style-type: none"> - Identify communication challenges and objectives related to the various target audiences - Implement a communication strategy before, during and after a position is taken - Define the message you want to disseminate. Identify the two or three most important messages to strategically convey 	
3.1.2 Follow-up	Allows the influencing strategy to be sustained beyond a single intervention. <ul style="list-style-type: none"> - Carry out an internal debriefing on the influencing intervention - Evaluate the effectiveness of the intervention - Follow up with relevant stakeholders - Follow up on the implementation of recommendations 	<ul style="list-style-type: none"> - Did the intervention have the desired impact? - Has the public health objective been achieved, or have we made progress or taken a step backwards? - Was the strategic objective realistic?

²² The dissemination plan may be produced ahead of the production of deliverables and the argumentation. The CCSMTL's *Plan de diffusion* provides for the adaptation of strategies,

messages and deliverables to each target audience. The dissemination plan can be drafted at the same time as the argumentative structure.

		<ul style="list-style-type: none">- Are there any other steps?- What can be learned from this intervention?
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Writing an argumentative text (optional)

Whatever the influencing strategy and the means of intervention chosen, an influencing intervention involves political analysis and the development of targeted advocacy aimed at swaying public decision makers and other stakeholders; this advocacy must go beyond public health argumentation (presenting epidemiological data related to one or more health determinants). In short, the aim is to establish an argumentative structure that articulates public health arguments and proposes solutions in an appropriate manner, based on the context and the target audience, with the aim of convincing the relevant actors to activate levers outside the realm of public health.

Writing an argumentative text (optional)		
Structure	<p>The argumentative text has a structure which, without being rigid, allows logical reasoning to unfold.</p> <ul style="list-style-type: none">- Introduction<ul style="list-style-type: none">○ Presentation of the public health problem and the public health problem (clarification of the link between the public health problem and a public policy)○ Thesis statement (identify how influencing the public policy will impact the public health objective)○ Exposition of the main arguments (demonstrating the thesis)- Development: Formulation of the argumentation using a logical, reasoned structure based on the arguments being advanced. Supports the thesis expressing how to respond to the public health problem raised. The relationship between the argumentation and the recommendations should leave no room for doubt.- Conclusion: Restating of the original thesis and the supporting arguments; summary of recommendations. A call to action or the expression of a desire to collaborate can be relevant openings toward further action.	

<p>Argumentation</p>	<p>The framing of a public health problem, and the objective linked to it must be supported by argumentation focused on decision making and action. The recommendations are the logical response to the argumentation put forth.</p> <p>Before writing, you need to draft a preliminary outline that logically organizes the elements of the arguments and their demonstration. This outline makes it possible to verify beforehand the coherence of the argumentative strategy and avoid the pitfalls of (a confusing structure, incomplete argumentation, repetition, etc.).</p>	
	<ul style="list-style-type: none"> - The argument: Constitutes the core of what is being asserted. It serves to justify the thesis and convince the reader. It is based on high-quality research and the most up-to-date evidence. - The evidence: Has the potential to influence and improve policy. The significance of the evidence must be made explicit; avoid simply summarizing data. It is based on this evidence that the recommendations will be made for the most appropriate way of addressing the problem raised. - The arrangement of arguments: Creates a purposeful and balanced text. It is essential to logically organize the various propositions, and connect them to each other, such that they serve to progress toward a goal: demonstrating the validity of the thesis. - Argumentative approaches: Delineate the rationale, position the reader within the argumentative framework and convince the target audience. Argumentative approaches include using: legitimacy (the DRSP's legal mandates), scientific reasoning (evidence), an example (or counter-example), comparisons, causal relationships, facts, an analogy, a definition, a refutation (or counter-argument), experiential evidence, etc. - Neutrality: Qualify the argument. The author should remain impartial; use impersonal formulations ("it is said that," "there exists," etc.) and avoid subjective expressions ("I think that," "we believe that," etc.). The vocabulary used must therefore be denotative and objective. 	

Glossary

To ensure a common understanding of the reference framework, it is important to clarify the definitions of the main concepts it contains. Most of the concepts used in public health and political science have several meanings, with usage depending on the author, and each of these terms could be the subject of a semantic and theoretical debate. The presentation of these concepts is intended to provide a common vocabulary and in no way seeks to establish a single definition. Rather, the goal is to offer guidelines to support public health action by the various teams.

Actors

Individuals or collectives whose rationale for mobilization, coalition formation or confrontation contributes to the processes of framing public problems, decision making or taking action. (Laurie Bousquet et al., *Dictionnaire des politiques publiques (5th Edition)*, Les Presses de Sciences Po, 2019.)

Framing

“Framing” is a metaphor that essentially explains how an actor can define a public problem or how a policy is perceived.

Governance

Governance is the set of collective rules and processes, whether formalized or not, through which designated actors participate in decision making concerning public action and its implementation. (Lacroix, I. & Saint-Arnaud, P.-O., *La gouvernance: tenter une définition*, Cahiers de recherche en politique appliquée, IV(3), 2012.)

Government

The concept of government can have two meanings. In French, it refers to the notion of executive power in a political system. In English, the term refers to political power and public administration, comparable to the notion of public authorities.

Health determinants

Health determinants are all the factors that influence the health status of the population, without necessarily being direct causes of particular problems or diseases. Health determinants are associated with individual and collective behaviours, living conditions and environments. There exist disparities in the distribution of these determinants among different social levels, resulting in health inequalities. This social gradient of health is linked to an unequal distribution of power, resources, goods and services. (INSPQ, online)

Healthy public policy (HPP)

“Healthy public policy improves the conditions under which people live: secure, safe, adequate and sustainable livelihoods, lifestyles, and environments, including, housing, education, nutrition, information exchange, child care, transportation, and necessary community and personal social and health services.” (Milio, 2001, p. 622)

HiAP - Health in All Policies

“Health in All Policies (HiAP) is an intersectoral approach to systematically addressing the social determinants of health at all levels of government. HiAP aims to help decision makers in all sectors and at all levels of decision making integrate considerations of health, equity and wellbeing into their policies.” (NCCHPP)

Influence

Ability to convince someone else that an action should be taken.

Influencing strategy

The gathering, organizing and communicating of evidence in order to convince decision makers or orient the political environment to align with one's objectives.

Mapping

Generating a social map of the actors concerned by a public policy and characterizing the actors based on political factors (power, influence, resources, relationships, etc.)

Objective

The goal of influencing is not the public health goal. The former goal corresponds to the desired result of your influencing intervention. It should identify the individual or population targeted, the institution (location) where change is desired, the specific result the intervention is expected to bring about, and the timeframe during which the objective can be achieved (e.g.:

By January 1, the municipal council will have adopted a bylaw on...).

Opportunity

Events or changes in the environment that could help or hinder the DRSP's efforts to influence public policies.

Partners

Partners are those with whom the DRSP collaborates in order to fulfill its mandates or to pursue its ultimate objectives (*Outil d'adaptation du positionnement organisationnel à des dossiers spécifiques*, DRSP).

Political Science

Political science is the study of the nature, foundations, exercise, objectives and effects of power in society (William Robson, 1955).

Positioning

Positioning is a marketing concept that designates how an organization wishes to be positioned in people's minds (colleagues, partners, the general public, etc.), i.e., how the organization wants to be perceived by people. Internal positioning consists of clarifying public health's role with regard to a specific issue, as opposed to the roles of other stakeholders, and demonstrating PH's added value. This also allows for the identification of actions that need to be adjusted so that PH can fully assume its role.

Public health problem

The main characteristics of the problem one wishes to target for intervention. The public health problem includes the nature and the scope of the situation, the consequences related to the situation, the population groups affected and the determinants and factors that contribute to the situation (O'Neill, 2011).

Promotion

"The process of enabling people to increase control over, and to improve, their health" (Ottawa Charter, 1986).

Public authority

An authority invested with public power and governmental legitimacy that has the legitimate authority to impose normative guidelines for action (Pal, Leslie A. *Beyond Policy Analysis. Public Issue Management in Turbulent Times*, 2001)

Public health

Public health is a field of knowledge and practice that aims to improve the health of the population through interventions carried out upstream of curative care. (Lessard, R., La santé publique, Stratégies d'influence et acceptabilité sociale, PUM, 2023, p. 20)

Action on the determinants of health and well-being at the level of the population and the systems that govern it (Priorités nationales de santé publique, 1997)

Public policy

"Whatever governments choose to do or not to do" (Dye, 1978)

A public policy is "a statement produced by a public authority that defines one or more problems affecting the population or one or more groups within it, and that also furnishes (to varying degrees) a response to that problem in terms of objectives, actions and actors." (NCCHPP, *A Public Policy Competency Framework for Public Health Actors*, 2015, p. 3)

Public policy process

Public policies can be understood in terms of a "cycle," which encompasses the different stages in their development: emergence, formulation, decision making, implementation and evaluation.

Scan

Scanning is a continuous, largely iterative activity, which involves actively monitoring the environment for trends and enabling relevant information to be provided in a timely manner. Scanning is said to be “strategic” when several perspectives (political, economic or social) on the same subject are compiled, cross referenced and interpreted so as to remain abreast of developments in that subject area.

This makes it possible to anticipate opportunities to exercise influence, with the aim of informing either operational or strategic decision making.

Stakeholders

All the internal and external publics (employees, clients, suppliers, other persons, other organizations, governments, pressure groups or citizens, unions, etc.) that may be directly or indirectly affected by an organization's activities (*Outil d'adaptation du positionnement organisationnel à des dossiers spécifiques, DRSP*).

Window of opportunity

This concept, proposed by John Kingdon, depicts public policy windows as fleeting opportunities, during which different streams (problems, policy and politics) may be aligned, so as to generate policy change. (De Maillard, J., Kübler, D. *Analyser les politiques publiques*, Presses universitaires de Grenoble, 2nd Edition, 2015, p. 248)

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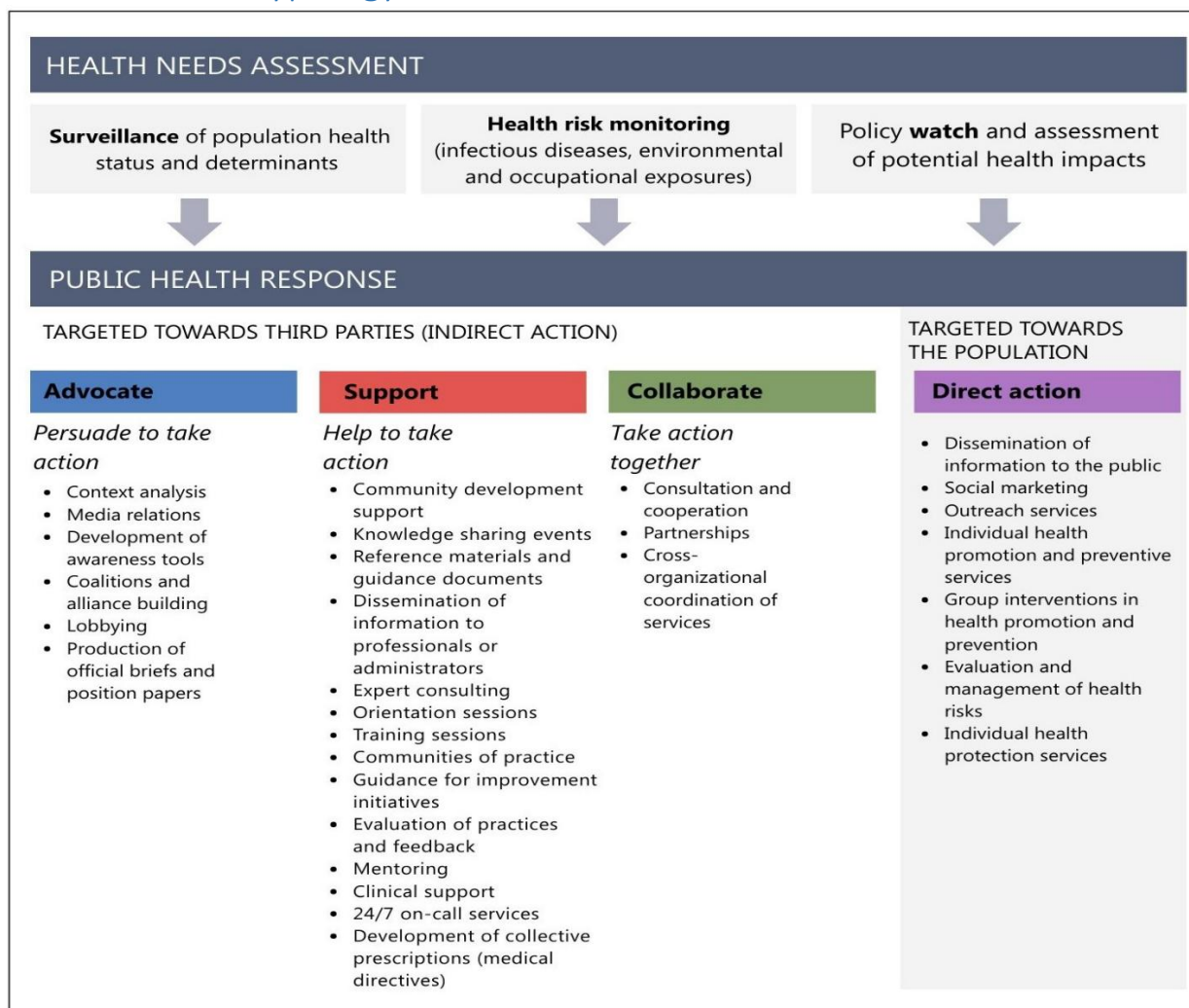
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APPENDIX 1– Typology of interventions



“PERSUADE TO TAKE ACTION” OR MOBILIZE THIRD PARTIES²³

Context analysis: An essential component of all interventions in the “Mobilization” category (corresponds to the advocate column in the table), which consists in analyzing the environment, stakeholders and issues specific to a situation of interest to public health, in order to develop a mobilization strategy and identify the most appropriate means of influence.

Media relations: Actions leading to the transmission of messages to different target audiences via traditional media or social networks, with the aim of influencing public opinion and, ultimately, decision makers.

Production of awareness-raising tools: Design, production and distribution of tools (e.g., printed and electronic publications, videos) to inform and raise awareness among decision makers, other stakeholders or target audiences of research findings, surveillance data or health impact assessments.

Development of coalitions and alliances: Actions leading to the creation and maintenance of networks of actors sharing common values, with the aim of acting synergistically on a public health issue. Alliances are generally temporary and involve a limited number of strongly committed actors.

²³ Litvak, E., Dufour, R., Leblanc, É., Kaiser, D., Mercure, S.A., Nguyen, C. T. & Thibeault, L. (in press) Making Sense of What Exactly Public Health Does: A Typology of Public Health Interventions. Detailed definitions. Canadian Journal of Public Health.

Coalitions are generally longer-lasting, involve several actors and call for more formalized processes.

Making public representations and representations to decision makers: Actions aimed at influencing decision-makers to modify their priorities, objectives or policies so as to include health improvement or health equity considerations.

This can take the form of representations in public forums, or private exchanges with individuals holding levers of action.

Production of briefs and position papers: Design and production of public documents in which public health actors, on their own initiative or at the request of a partner, take a position on an issue based on all relevant scientific knowledge. The purpose of an opinion paper is to inform the public of a scientific opinion regarding the implications for population health of an issue, project, program or policy.

Position papers are produced in the context of public consultations and aim to influence decision makers.

APPENDIX 2- Typical pathway of a public policy influencing intervention

Typical pathway of a public policy influencing intervention

