Centre de collaboration nationale
sur les politiques publiques et la santé

National Collaborating Centre
for Healthy Public Policy

RÉSEAU CANADIEN SUR LA SANTÉ
DANS TOUTES LES POLITIQUES

CANADIAN NETWORK FOR HEALTH
IN ALL POLICIES

Workshop - Public Policy Competencies for Implementing Health in All Policies (HiAP)

AGENDA

February 6, 2025
From 12:00 p.m. – 2:30 p.m. EST
Language: English
Zoom: You can find the Zoom session link in your registration confirmation email.

Workshop objectives:

- Explore key public policy competencies essential for advancing healthy public policies within a HiAP framework.
- Learn how public health teams have applied these competencies to support HiAP in practice.
- Identify specific competencies essential for implementing HiAP approaches, illustrated through real-life case studies.
- Promote reflection on how public policy competencies can be mobilized for HiAP, helping participants critically assess their current practices and challenges.

12:00 - 12:10	**Welcome and opening of the workshop** *Marianne Jaques, Scientific Lead, NCCHPP, CNHiAP Chair* **Workshop objectives and agenda** *Janet Dawson*
12:10 - 12:25	**Introduction: Public Policy Competencies for Public Health** *Val Morrison and Carole Clavier*

Val Morrison will present the findings of a 2021 scoping review by the NCCHPP on public policy competency frameworks, introducing a thematic categorization of competencies developed through this research. Carole Clavier will then contextualize these categories within HiAP practice, fostering reflection on how public health professionals can use public policy competencies to navigate and influence the policy process for HiAP implementation.

Recommended reading: Kamwa Ngne, A. & Morrison, V. (2021). *Public Policy Competencies for Public Health: A Review of the Literature*. National Collaborating Centre for Healthy Public Policy.
Supporting webinar: Public Policy Competencies for Public Health.
https://ccnpps-ncchpp.ca/webinar-public-policy-competencies-for-public-health/

12:25 - 1:05	**Competencies in practice**

Three CNHiAP members will share their experiences, reflecting on the public policy competencies they applied in their projects and initiatives. They will explore how these competencies contributed to advancing Health in All Policies (HiAP) objectives, illustrating their impact on implementation with concrete examples of tangible skills. This session aims to bridge the discussion on policy competencies with real-world public health practice, providing practical insights into their application.

Collaboratively "Drawing Elephants" to Build Healthy Communities
Gillian Connelly and Inge Roosendaal, Ottawa Public Health

Ottawa Public Health (OPH) collaborated with the City of Ottawa to deeply integrate health into built environment planning policy. This presentation will review healthy public policy core competencies including "influence", "collaboration", and "policy context", which have enabled collective innovation in planning and public health.

Dominant Narrative and its Role in Healthy Public Policy
Réka Gustafson, Island Health

This presentation will discuss ways to integrate dominant narrative analysis in order to shift the discourse on psychoactive substances policies via the delivery of a CMHO report.

Building and Mobilizing System Competencies for HPP: Insights from a Case Study on Municipal Water System Fluoridation in Nova Scotia
Kari Barkhouse, Nova Scotia Health

The healthy public policy core competencies framework will be applied to a recent example of HPP work in action within Nova Scotia. This case study will tell the story of how public health applied healthy public policy core competencies to work as a program to: understand the policy context, build and strengthen local and provincial partnerships, develop communication tools, and provide strategic leadership to influence policy decisions.

1:05 - 1:15	**Health break**

1:15 - 1:45	***Competencies in practice: small group discussion***
	Facilitation: Working group members/NCCHPP team

After the presentations, participants will form small groups to discuss the role of these competencies in HiAP implementation. They will reflect on how these skills align with their own practices, share experiences of when, how, and with whom

they have applied them, and assess which competencies are most and least used. This session will allow participants to discuss the cases in more detail and will promote critical reflection on how public policy competencies can be mobilized for HiAP implementation.

1:45 - 2:20	**Competencies in practice: large group discussion**

Facilitation: Janet Dawson and Carole Clavier

Groups will present their key discussion points and conclusions to all participants, followed by a final large-group discussion. This session aims to engage participants in collective reflection on which competencies are essential for facilitating HiAP implementation and explore strategies for public health professionals and teams to develop or strengthen these capacities.

2:20 - 2:30	**Final thoughts and next steps**

Janet Dawson

Closing of the workshop
Natalia Botero, Scientific Advisor, NCCHPP, CNHiAP Coordinator

CASE CONTEXT

Collaboratively "Drawing Elephants" to Build Healthy Communities
Gillian Connelly and Inge Roosendaal, Ottawa Public Health (OPH)

Municipal planning policy offers key opportunities for the public health sector to inform the built environment as a social determinant of health. OPH is a semi-autonomous Board of Health embedded in the City of Ottawa's municipal structure, enabling opportunities for meaningful municipal engagement. This session's case study explores OPH's collaboration with the City of Ottawa planners to integrate health into the City of Ottawa's new [Official Plan](#) (OP). This was a co-creation model, with OPH staff co-located into the Official Plan writing team to enable ongoing health impact assessments to inform the deliberation of trade-offs from the outset of the very complex process. OPH provided expertise in health impact assessments, ensuring these perspectives informed the development of the many OP policies. OPH participated as City representatives during community consultation, in addition to providing technical expertise in developing policy.

The new OP outlines a comprehensive land use policy framework to guide growth and development in the city to the year 2046. The plan includes policies that address housing, transportation, green spaces, and urban design, all informed to enhance health and well-being outcomes. The OP also includes a standalone series of policy statements on "Healthy and Inclusive Communities". It outlines specific strategies and objectives to create environments that promote health, reduce disparities and support social inclusion. Additionally, health

considerations are deeply integrated throughout the various polices in the plan, facilitating a holistic approach to urban development (infographic overview).

A key planning framework integrated in the OP that will advance health and well-being is the 15-minute neighbourhood, which will support providing residents with access to their daily needs close to home. Next steps include supporting the City to implement the Official Plan through policies and plans it directs, including new Zoning by-law, master plans, secondary plans, urban design and transportation guidelines, and development review applications.

This presentation will focus in on the "softer" skills, including influencing decision making, collaborating across sectors, and understanding the policy context as key core competencies that have enabled this work.

Dominant Narrative and its Role in Healthy Public Policy
Réka Gustafson, Island Health

By exploring a range of psychoactive substances, from the illegal and unregulated to the legal, promoted, and celebrated, this 2024 Island Health CMHO report hopes to show that the way we talk about and approach substances is largely rooted in history and perception, rather than evidence. While substance use is a part of the human experience, the way we use substances and how substance use affects our health is also influenced by our biology, social circumstances, experiences of trauma, and public policies.

The report intends to contribute to our collective understanding and support conversations and changes in communities that lead to better health. It reviews data on consumption of substances and health outcomes in the context of current and historical policies and regulations, as well as dominant social narratives and norms. How we talk about issues matters. We reflect and reinforce individual and societal beliefs about a topic by the words we use and the stories we choose to tell. Collective stories are woven into what experts call dominant public narratives that influence how society (including decision makers) views the world and what is believed to be common sense, and that often predetermine what solutions are considered. There is a long and complex history of policies related to psychoactive substances in Canada. An understanding of this history helps contribute to the collective understanding of the current context and how to work with communities to address the health harms experienced today. This report considers data in the context of the history of policies on psychoactive substances in Canada and how the various public narratives around substance use influenced policies and approaches related to substance use.

To consult an infographic overview and to download the full report visit https://cmho-report-2024.islandhealth.ca/

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Building and Mobilizing System Competencies for HPP: Insights from a Case Study on Municipal Water System Fluoridation in Nova Scotia

Kari Barkhouse, Nova Scotia Health

All of Nova Scotia is incorporated into municipalities. There are three types of municipalities: regional municipalities (4), towns (25), and county or district municipalities (20). Fluoridation of municipal drinking water remains a critical population-level intervention to prevent dental caries. In 2022, approximately 49% of the province's population was served by fluoridated water. In September 2024, a decision was made to remove fluoride from one town's water supply based on an engineer's report. The town had fluoridated water since 1975 and fluoridation of municipal drinking water in Nova Scotia began in the 1970s. The decision by the town to remove fluoride from the water was not communicated to public health, relevant government departments, nearby communities served by the water supply and residents. Public health learned of the decision in October 2024 through the dental community and subsequently reached out to inquire about any threats to water fluoridation in our largest municipality. It was learnt that fluoride was currently interrupted in that municipality at various times since 2020 at both water supply plants serving two cities due to aging infrastructure.

This case study will tell the story of how public health applied healthy public policy core competencies to work as a program to:

- understand the policy context
- build and strengthen local and provincial partnerships
- develop communication tools
- provide strategic leadership to influence policy decisions.