

DEVELOPMENT AND IMPLEMENTATION OF HEALTHY PUBLIC POLICIES

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SIX CASE STUDIES

1. Urban air pollution
 2. TB in the local community
 3. Harm reduction for chronic alcoholic homeless people
 4. Gambling
 5. Depression among rural seniors
 6. Fetal alcohol syndrome
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QUESTIONS/TASKS FOR SMALL GROUPS

1. Review and further develop (as needed/desired) the case study
2. Identify the relevant
 - a. health promotion “**underpinnings**” i.e.:
 - i. Health promotion relevant values, goals & ethics
 - ii. Health promotion relevant theories, beliefs & assumptions
 - iii. Health promotion relevant evidence
 - b. understanding of the **environmental context**:
 - i. The environmental factors related to the nature and origins of the health-related issue
 - ii. The environmental factors related to the response to the health-related issue— that is, constraints and opportunities imposed by the **broader environment** and the **organizational structure** within which the response is operating
3. Identify specific **factors** that should be addressed in developing a healthy public policy response to the issues associated with the case study?
4. Identify which **stakeholder groups** should be involved
5. Suggest **actions and strategies** to address the factors identified in #3 above
 - a. Suggest specific **policies**
 - b. Suggest specific **advocacy initiatives**
 - c. Suggest other actions and strategies that would **support** these policies
6. Identify the major **challenges** that these policies might face in their development and/or implementation? How might these challenges be addressed?

CASE STUDY WORKSHEET: RECOMMENDATIONS RE. HEALTHY PUBLIC POLICY AND ADVOCACY

Case study issue: _____; Setting: _____

Recommendations Re. Healthy Public Policy & Advocacy	Group's Responses
What are the relevant HP "underpinnings" (i.e., goals, values/ethics, theories/beliefs, evidence) and understanding of the environment with respect to the case study?	
What specific factors that should be addressed	
What specific policies would be appropriate in addressing this issue	
What specific advocacy initiatives would be appropriate in addressing this issue	
What actions and strategies would support these policies	
What stakeholder groups should be involved in developing and implementing these policies etc.—and how they should be involved	
What major challenges might these policies face in their development and/or implementation? How might these challenges be addressed?	

CASE STUDY #1

ISSUE: AIR POLLUTION

Setting: a major Canadian urban area

Context:

1. there has been a significant increase in the level of air pollution in the entire urban metropolitan area
2. recent years have seen what appear to be trends towards drier and hotter summers
3. there has been a significant increase in the morbidity and mortality rate associated with respiratory problems in the city and surrounding urban area
4. 15% of children under two years who were admitted to hospitals with respiratory problems were there because of the levels of ozone and sulphates in the air
5. the transportation sector (cars, trucks, etc.) is responsible for about 80% of the nitrogen oxides and 60% of the sulphur dioxide released in the city
6. traffic congestion has been increasing in recent years to the point where, several times a year, there has been total traffic grid-lock in the city centre
7. 70% of these working in the city commute by car on a daily basis; 50% of automobile commuters travel an average of 75 kilometres per day (per round trip); more than 60% of public transit vehicles are powered by internal combustion engines
8. the public transit system has been struggling to maintain old stock; no significant new innovative public transit alternatives have been implemented within the past 15 years
9. the automobile industry (and associated industries) is the 2nd largest local employer

CASE STUDY #2

ISSUE: TUBERCULOSIS IN THE LOCAL COMMUNITY

Setting: a community health centre

Context:

1. there has been a significant increase in the number of cases of TB reported in the local community
2. there has been a significant increase in the number of treatment-resistant cases of TB reported in the local community
3. there has been a significant increase in the number of immigrants coming into the local community
4. there has been a significant increase in homeless people in the local community
5. there has been a significant increase in the proportion of the population living below the poverty line
6. some doctors are reported to be reluctant treat homeless or other marginalized people as patients

CASE STUDY #3

ISSUE: HARM REDUCTION FOR CHRONIC ALCOHOLIC HOMELESS PEOPLE

Setting: a shelter for homeless men in an urban setting

Context:

1. there has been a significant increase in the number of homeless men with chronic alcohol abuse problems
2. these men experience many very serious chronic problems related to their physical and mental health—for example, TB, diabetes, schizophrenia, etc.
3. these men also experience acute episodes associated with their drinking and related problems
4. these men usually lack documentation required to receive health care in mainstream medical care facilities
5. their behaviour, presenting symptoms, or mere prejudice often makes it is very difficult to obtain assistance for such men (or women) at mainstream medical care facilities
6. all existing homeless shelters currently prohibit drinking on their premises
7. many homeless men will therefore drink excessively prior to attempting to enroll in homeless shelters
8. homeless shelters usually turn away or expel those who excessively intoxicated
9. a local homeless shelter for men is proposing to open a “harm reduction” (i.e., “wet”) unit for chronic alcohol homeless men; this would provide residents with a controlled amount of alcohol on a daily basis, would provide medical care through its infirmary and by working in close cooperation with a neighbouring inner-city hospital, and would provide longer-term care for residents whose poor health is beyond remission
10. the local community is strongly opposed to the opening of this facility
11. it is difficult to recruit medical and social service personnel with the motivation and expertise to staff such a facility

CASE STUDY #4

ISSUE: GAMBLING

Setting: a provincial government

Context:

1. the provincial government is re-examining its gambling policies in the province
2. gambling has been a source of tension between provincial governments and First Nation groups
3. in recent years, provincial governments policies have legalized a variety of forms of gambling in an attempt to control unregulated and/or illegal gambling, and as an additional source of government revenue
4. legalized gambling has developed as an "industry" operated by private companies/organizations from which the governments obtain a significant proportion of their tax revenues (e.g., 5% of total revenues)
5. the provincial government wants to continue to increase its revenue from legalized gambling, and is concerned about losing potential revenues to neighbouring U.S. states
6. evidence suggests that gambling is resulting in significant social problems, at least among some parts of the population

CASE STUDY #5

ISSUE: DEPRESSION AMONG RURAL SENIORS

Setting: a local mental health association that serves a large rural district, as well as several medium and small-sized towns

Context:

1. there has been a significant increase in the number of seniors in the region & living alone
2. there has been a significant migration of seniors from farms and other rural settings to the local towns
3. there has been a significant migration of young people out of the region
4. there has been a decrease of government funding available to local communities
5. there has been a decrease in the amount of in-hospital treatment
6. there has been an increase in the number of people taking early retirement (i.e., prior to 60 years of age)
7. there has been an increase in the number of retirees who do not have full pensions
8. there has been an increase in the number of retirees whose pensions are not indexed to the cost-of-living
9. there has been a significant downturn in the financial market (affecting investments in mutual funds, etc.)
10. two of the smaller local hospitals were closed two years ago
11. there has been a significant increase in the number churches that have closed
12. there has been a reduction in public transportation to smaller communities
13. there has been a reduction in the number of local grocery stores

CASE STUDY #6

ISSUE: FETAL ALCOHOL SYNDROME

Setting: a local municipal government

Context:

1. research evidence indicates that a mother's alcohol consumption has an impact on the development of the fetus
2. the nature and implications of this research evidence is debated in the academic community
3. the local public health unit has taken the lead in developing and implementing a comprehensive strategy to reduce risks associated with the development of the fetus, and to promote the health of newborns
4. it has been proposed that the municipal government pass legislation to require all licensed establishments to post notices warning women about the effects of drinking if they are pregnant, or if they might become pregnant
5. the local hospitality industry have been supporting a media program that promotes the health benefits of wine
6. the local chapter of the Canadian Mental Health Association has expressed concern about the high risk of previously unrecognized "fetal alcohol effects" in the local community
7. women's groups have expressed concern that the proposed municipal legislation will (1) target women to the exclusion of men, and (2) potentially cause more problems by raising the level of anxiety among women in general, and among pregnant women in particular
8. a local right-to-life group has expressed concern that the proposed legislation might result in an increase of (therapeutic) abortions