



# ARC WM Hosts Our First Public Health Summit



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## Introduction

Public Health has come into everyone's consciousness in new and unexpected ways in 2020. COVID-19 has made us all aware of how fragile our health as a population can be and how interdependent we are on each other's health and wellbeing. More than that, it has made us aware of the importance of thinking about everyone's health - old and young, key workers, health workers, care home workers, and others - and it has brought us face to face with issues of health inequalities.

ARC WM has a dedicated [Public Health theme](#) led by Profs Aileen Clarke and Kate Jolly. On Thursday 26<sup>th</sup> November 2020, the theme hosted its first *Public Health Summit* online. This event brought together more than 60 stakeholders from across the West Midlands who have a shared passion for improving the public health of people living in our communities.

The aims of the summit were to:

- i. Learn more about COVID-19 and Public Health: risks, inequalities, responses and renewals.
- ii. Link ARC WM members and those involved in Public Health in the West Midlands to exchange current issues and priorities and to identify opportunities and synergies for future working.

## Format of the Day

The day started with four presentations followed by five breakout sessions. These were followed by a plenary and a Q&A session.

Initially Prof Richard Lilford and Prof Kate Jolly gave an outline of ARC WM - its structure and set-up, overarching aims, how the Public Health theme fits with the other themes, as well as detailing some of the work being carried out in the theme. Our website ([arc-wm.nihr.ac.uk](http://arc-wm.nihr.ac.uk)) gives more information.

**H**arry Rutter, who is a Professor of Public Health from the University of Bath and member of the government's SAGE committee, gave a keynote presentation on COVID-19 and Public Health.

His message reinforced the messages we have come to understand better as a result of the pandemic. He described how our approaches to the environment, health inequalities, and non-communicable disease have meant that our various populations did not come in to the pandemic on a level playing field. He explained how we need to think about 'rebooting' the workplace to make it healthier and safer for people, and discussed the flaws in the individual behaviour change model for improving health. He described the concept of the commercial determinants of health and explained how behaviour change needs to come from companies, politicians and those who can help to improve the context of our daily lives and choices.

**J**ustin Varney, Director of Public Health for Birmingham, gave a keynote presentation on the local context. He talked about the immediacy of the COVID-19 response and what the next steps might be for improving health, including understanding the role of food in our health and how we can improve the levels for healthy eating - time, access to better food and autonomy. Justin also talked about the importance of mental health. He spoke about the upcoming *2022 Commonwealth Games*, which will be held in Birmingham, and how flagship events can encourage a momentum for health change - for example, Birmingham will be making intense efforts to encourage active transport for the games. Justin finished by talking about how to build a city without inequality. He talked about identities and meaningful change in how our communities are understood and supported for health change in Birmingham, and of how COVID-19 has reinforced and strengthened Birmingham's approach to minority health and inequalities.

Our five breakout sessions covered current Public Health priorities and issues:

- Public Health priorities.
- Behavioural interventions and COVID-19.
- Workplace well-being.
- The TRACE project, which aims to understand how health system reform affects population health.
- Coventry City of Culture ([see also our previous blog](#)).

As well as the members of the summit, each breakout session had an expert facilitator, a Public Involvement Contributor, and a Public Health specialist in training.

Key messages from our breakout sessions included:

**1** In the **priorities** session, the importance of engagement and partnership working, listening to the voices of communities of interest (working mums, LGBT+ communities, people with long-term conditions, and faith communities are just a few examples), and of different ethnicities and population groups were highlighted. Participants discussed the importance of partnership working to solve many of these challenges, co-producing solutions with the communities involved and ensuring that the way we describe the communities transcends just being based on geographical location.

**2** In the **behavioural interventions** session, there was a philosophical discussion! Fairness and liberty were discussed in relation to the tailoring of messages to encourage vaccine uptake. It was agreed that messages were complex and that practical vaccine access was also going to be important. Some of the ideas discussed included: looking more carefully at people's actual concerns when developing

targeted messaging; using behavioural science to keep the message clear, simple and coordinated; and the importance of community engagement in addressing fears around speed of vaccine development and vaccine safety.

**3** In the **workplace wellbeing** session the '*Thrive at Work*' toolkit was discussed, alongside how to improve health and positive wellbeing at work, with ideas for an asset-based approach for employers to map what's out there and what's needed. The delegates also discussed the importance of broad outcome measures that capture what is important to both employers and employees, as well as cost-effectiveness of the interventions.

**4** In the **TRACE** session, evaluation and measures for understanding the impacts of health system reform were discussed. We talked about metrics for integrated health systems and how to evaluate major changes to the way we organise our population health services and systems. Delegates discussed the complexity of creating a specific "*integration index*".

**5** The **Coventry City of Culture** break-out session discussed the multifaceted economic, health and social impacts of the City of Culture and echoed Justin Varney's concept of building on major events to highlight our population health needs and issues. Delegates also discussed the impact of COVID-19 on health inequality challenges, especially since the areas with high deprivation have also been those with the largest COVID-19 outbreaks and lower engagement with formal cultural activities.

In the feedback and plenary session, we discussed key overarching messages of the day. Three themes emerged for our response to COVID-19 and for our future synergies, thinking and collaborations. The three themes can be summarised as the three 'Es':

### **Engagement:** the necessity for engaging properly and fully with our complex multifaceted populations

Achieving 'buy in' is hard to co-producing health: there are no quick fixes or magic bullets and it requires significant investment of time and resource. However, we cannot progress until we have those established links and connections. It is only through working with communities that we can understand what their public health needs and priorities are, and when, where and how public health interventions should be delivered. Most importantly, we need to move from short-term relationships with communities to longer-lasting relationships, built on foundations of mutual trust and reciprocity.

**Equity:** Across the day the concept of equity came up a lot. We discussed the necessity for understanding how our health is patterned and how we can understand and reverse some of that negative patterning due to our work, where we live, and the commercial pressures on us.

### **Evaluation:** the requirement to evaluate what we do is vital

Evaluation enables us to understand the public health interventions and activities that don't work so well - and to share, celebrate and use the ones that do!!!

## Conclusions

The event was a resounding success. There were over 60 attendees, including Directors of Public Health, researchers, academics, trainees, public contributors, and NHS staff from all across the West Midlands and beyond. Not only does the Public Health theme now have a wealth of ideas to take forward, it also has a community of stakeholders and friends who attended on the day and who expressed a willingness to be involved in the ARC WM Public Health community. In these times of lockdown, it was important for us to come together. We received some fantastic feedback, but we think one of our Public Contributors, Tony, encapsulated the value of the event:

*"I think what I took away most, apart from some excellent individual points, was the feeling of partnership which the event engendered.*

*This co-mingling of the professional and the personal is obviously the way forward for us, alongside exchanging views and knowledge in a respectful and inclusive manner."*

