

**Report to the Future Melbourne Committee**

Agenda item 7.1

**Post travel report – Councillor Dr Olivia Ball  
Partnership for Healthy Cities Summit, London****16 May 2023****Presenter:** Councillor Dr Olivia Ball**Purpose and background**

1. To report on the travel undertaken by Councillor Dr Olivia Ball to London to attend the Partnership for Healthy Cities (PHC) Summit on non-communicable disease (NCD) and injury prevention between 14 and 16 March 2023. The summit was co-hosted by the World Health Organization, Bloomberg Philanthropies, Vital Strategies and London Mayor, Sadiq Khan.
2. Non-communicable diseases – including heart disease, cancer, diabetes and chronic respiratory diseases – and injuries are responsible for 80% of all deaths globally. With the majority of the world's population now living in urban settings, cities and their leaders have a vital role in fighting NCDs and injuries and reducing preventable deaths with evidence-based interventions.
3. The Partnership for Healthy Cities was founded in 2017 and helps fund projects in its 70-city global network that pursue stronger public health policies and data collection in a number of areas, including tobacco control, food policy, road safety, air pollution and overdose prevention.
4. When the Lord Mayor was unable to attend the Summit, the invitation was extended to Councillor Dr Ball to represent the City of Melbourne (CoM) in her capacity as lead of the Health, Wellbeing and Belonging portfolio.
5. PHC covered the cost of airfares, accommodation and some incidental expenses.

**Key issues**

6. Councillor Dr Ball's program of commitments included keynotes, presentations, panels, meetings and roundtable discussions with elected and technical leads from other cities in the PHC network.
7. Included as Attachment 2 is an overview of activities, observations and opportunities identified during Councillor Dr Ball's visit.
8. CoM's Acting Team Leader, Health Projects also attended the PHC Summit.
9. Lessons from the summit will inform CoM's ongoing work delivering policy and strategic commitments including:
  - 9.1. Food City: The City of Melbourne Food Policy (an action of Major Initiative 40)
  - 9.2. Smoke-free Melbourne Policy
  - 9.3. Municipal Public Health and Wellbeing Plan 2021-25
10. In addition, dialogue will continue between council officers and Partnership Managers from Vital Strategies as well as other cities in the PHC network.

**Recommendation**

11. That the Future Melbourne Committee notes the report by Councillor Dr Olivia Ball on her observations and insights arising from her attendance at the PHC Summit in London, between 14 and 16 March 2023, at a cost to Council of \$68.92.

**Attachments:**

1. Supporting Attachment (Page 2 of 16)
2. Overview of observations and outcomes (Page 3 of 16)

## Supporting attachment

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### Finance

1. The majority of Councillor Dr Ball's travel costs were met by the PHC, which funded airfares, accommodation and some incidental costs. CoM funded a small portion of incidental costs, which totalled \$68.92.

### Conflict of interest

2. No member of Council staff, or other person engaged under a contract, involved in advising on or preparing this report has declared a material or general conflict of interest in relation to the matter of the report.

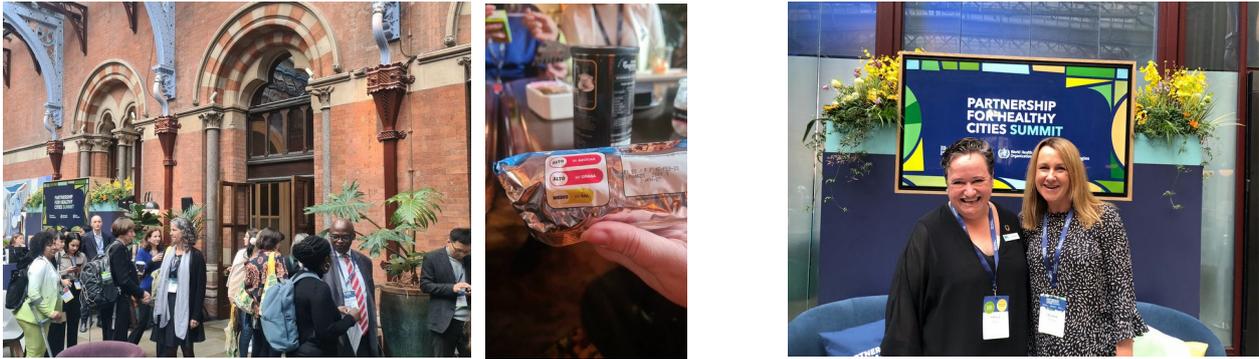
### Relation to Council policy

3. The Executive Officer Councillor Liaison has confirmed that the travel costs accord with the requirements of the travel guidelines outlined in the Council Expenses Policy.
4. The strategies, policies, projects and programs explored during the summit have potential relevance to work in a number of areas, including:
  - 4.1. community wellbeing
  - 4.2. recreation
  - 4.3. planning
  - 4.4. climate change and city resilience
  - 4.5. transport
  - 4.6. libraries

### Environmental sustainability

5. The carbon emissions resulting from air travel to London were offset with the purchase of credits.





Councillor Dr Ball and Joanne Young at the PHC Summit and examples of nutritional labelling

### The public health landscape in London



Top public health challenges facing London include:

- air pollution
- obesity (childhood obesity having increased during the COVID pandemic)
- mental health (particularly ages 0-19 years)
- HIV prevention (London aims to eliminate HIV transmissions by 2030)
- systemic racism in its health and care services.

Sadiq Khan, Mayor of London (left), who suffered asthma as a child, has prioritised reducing London’s air pollution, where 1 in 9 people suffer a health condition related to air pollution. London has more air quality monitors than any other city.

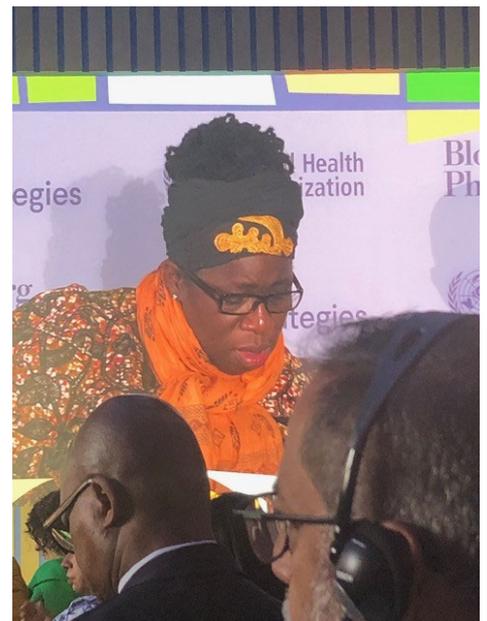
Mayor Kahn has partnered with bereaved parent and clean air advocate [Rosamund Adoo-Kissi-Debrah, CBE](#) (below), whose daughter who died of asthma at the age of nine.

Rosamund noted there were no deaths from asthma during London’s pandemic lockdowns, and asthma deaths resumed shortly after traffic returned.

However, a range of transport policies have significantly improved air quality in London. Says Khan:

“Toxic air is a matter of life and death, causing around 4,000 premature deaths every year in London, and leading to asthma in the young and dementia in the elderly.

“I have made it a top priority as Mayor to tackle London’s air pollution and the climate crisis. The ULEZ [ultra low emission zone] has cut transport-related air pollution by 44% in central London and carbon emissions by 6%.”<sup>1</sup>



1 Mayor of London, ‘Mayor announces plans to improve London air quality’ (8 February 2023) <<https://www.london.gov.uk/>>.

## Climate change, air quality and public health

London's iconic double-decker buses are now fully electric (pictured), a vital strategy in the Mayor's drive to improve air quality as diesel fumes are a health hazard.

There is kerbside public electric vehicle (EV) charging infrastructure throughout the city as another air quality measure. As well as providing public (user-pays) charging points, private e-vehicles are:

- exempt from ULEZ fees (if vehicles do not meet emissions standards, drivers must pay GBP12.50/day to drive inside the Ultra-Low Emissions Zone in central London)
- exempt from London's congestion charge
- exempt from vehicle excise duty
- entitled to discounted parking permits (both residents & businesses).



Local councils invite [requests from the public](#) as to where charging stations should be located.<sup>2</sup>

Electric vehicle charging stations on London streets



London's [self-service bicycle hire scheme](#) includes both push bikes and e-bikes. Fees start at GBP1.65 for 30 minutes. Transport for London also partners with Lime to provide e-bikes & e-scooters.



Bicycle hire and e-scooters on London streets

<sup>2</sup> <<https://www.londoncouncils.gov.uk/our-key-themes/transport/electric-vehicle-charging/suggest-location-ev-charge-point>>.

## A more inclusive London: The importance of citizen engagement in public health

Public health physician Prof. Kevin Fenton (Regional Director, Officer for Health Improvement and Disparities, London, Regional Director of Public Health, NHS London, Statutory Health Advisor to the Mayor of London, GLA and London Assembly) exhorted local governments to build on what they learnt in the pandemic: the importance of embedding prevention and health equality in all public health policies and practices. London engages the community in gathering and analysing health data and designing solutions, e.g. designing survey questions. ‘Letting go to go deeper.’

London innovations include the use of digital health platforms. For example, Sexual Health London is a discreet sexual health service for all STDs, providing contraception, test kits and test results anonymously: <https://www.shl.uk/>

London also provides mental healthcare online. Called ‘Good Thinking,’ this digital mental health service has assisted over 700,000 people since its launch in 2017 with problems such as anxiety, stress, low mood and sleep problems: <https://www.good-thinking.uk/>



A more inclusive London: Kevin Fenton on communications and community engagement

## Site visit: Childhood obesity, oral health, immunisations & trauma-informed childcare

One in 5 London children start school overweight, while one in 4 have tooth decay.

At a site visit to the Factory Children’s Centre, Islington Borough Deputy Mayor Joanne McCartney spoke of the [Healthy Early Years London](#) program, which promotes healthy eating, immunisations, breastfeeding and oral health.

Since 2020, early childhood staff have received training in responding to childhood trauma so they can work with parents to support children’s emotional well-being. Further programs support staff with their own mental health and well-being.



Site visit to The Factory Children’s Centre

## Commercial determinants of health

A lot of what we do in health at local government level is influenced by private actors, e.g., tobacco manufacturers and retailers, food and beverage retailers and unhealthy diet promotion.

Commercial determinants of health are activities (and omissions) of the private sector that affect people's health directly or indirectly, positively or negatively.

For example, the private sector determines labour conditions and product design and shapes consumer preferences (e.g. promoting breastmilk substitutes, junk food, gambling and vaping). Private actors can indirectly harm human health by polluting or degrading the environment.

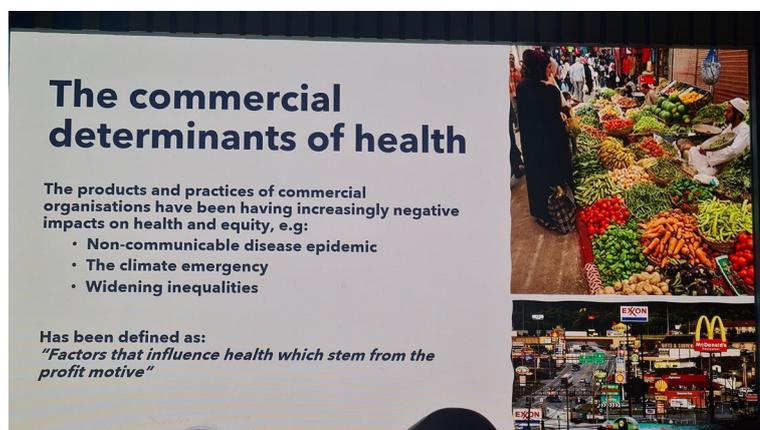
Commercial determinants often drive health inequities, both within and between countries. Determinants of health affected by the private sectors include: income level, educational opportunities, occupation and employment status, workplace health and safety, food security and availability of healthy food options, housing and utilities, tobacco use, gender inequity and racial segregation.

Positive actions by the private sector might include free vaccinations in the workplace, encouraging employees to donate blood or exercise, supporting breastfeeding and expressing in the workplace, providing family violence leave and healthy workplace canteens.

The WHO on commercial determinants of health:

<https://www.who.int/news-room/fact-sheets/detail/commercial-determinants-of-health>

Anna Gilmore, Professor of Public Health, University of Bath, moderated a conversation at the summit with mayors from Montevideo (Uruguay) and Accra (Ghana) about how they partner with the private sector to advance public health. Both mayors spoke of legal battles with tobacco companies when their country proposed tobacco control legislation.



## 3. What can cities do?

### Regulate the "bad"

- **Regulate harmful commercial products and practices, e.g.:**
  - NCD best buys
  - Carbon marketing bans
- **Use planning and licensing, e.g.**
  - Smoke free, alcohol free, junk food free public places
  - Reduce density of outlets selling harmful products
- **Introduce "polluter pays" levies, e.g. charge companies to clear their waste (cigarette butts, plastics)**
- **Conflict of interest policies**

### Enable the "good"

- **Health in all policies: education, transport, planning, food, housing**
- **Build progressive, inclusive local economies, e.g.:**
  - using procurement (contracting) to ensure a living wage and fair contracts, to minimise the pay gap, to promote local businesses or cooperatives
- **Use your power to innovate and change norms**

Presentation at the Partnership for Healthy Cities summit on the commercial determinants of health

Also working in this space is **Bite Back 2030**, an NGO formed by British teenage food advocates who seek to “get the big players in business and government to listen and act on ... your right to health.” They work on junk food advertising, among other things: [biteback2030.com](http://biteback2030.com)

## Nutrition

The City of London owns large amounts of advertising space (e.g. on trains, buses, bus shelters and in tube stations). To address childhood obesity in London, in 2019 Transport for London **banned advertising of unhealthy food and beverages** across London’s transport network (based on fat, sugar and salt content), **as well as gambling, breastmilk substitutes and tobacco**. The ban includes non-specific brand advertising without a featured product.

Manufacturers, restaurants, takeaways and delivery services may only place adverts that feature healthier products. For example, Coca Cola can advertise Coke Zero, but not anything containing sugar. Likewise, McDonald’s can advertise salads, for example, but not high fat or high sugar offerings.

A public consultation garnered 82% support for the ban. Advertising revenue for the city has not been affected by this measure and advertising demand has not fallen since the ban was introduced.

A 2022 evaluation by Sheffield Uni and the London School of Hygiene and Tropical Medicine found that the ban directly led to 94,867 fewer children and adults developing obesity than expected (a 4.8% decrease); 2,857 fewer cases of diabetes and 1,915 fewer cases of cardiovascular disease; saving the NHS an estimated £218m (AU\$403m) over the lifetime of the current population.

Evidence links advertising to purchasing behaviour. Banning advertising in this way has led to a fall in unhealthy food purchases estimated to amount to 1,001 calories/person/week or 1,307 calories per person in households where the main food purchaser catches public transport.<sup>3</sup>

Meanwhile, London’s primary and secondary schools are encouraged to become ‘**water-only schools**’, where only water, plain milk and unsweetened soy milk are available to school children to drink.<sup>4</sup>

To watch this session: <https://www.youtube.com/watch?v=gceanho3KqA>



Examples of advertising no longer permitted vs permissible advertising



3 S. Francis, ‘Transport for London junk food advert ban: Has the policy cut obesity?’, BBC News (5 August 2022) <<https://www.bbc.com/news/uk-england-london-62420773>>.

4 ‘Mayor of London calls for ‘water only’ schools to reduce child obesity’ <<https://www.laca.co.uk/news/mayor-london-calls-water-only-schools-reduce-child-obesity>>.

## Salt

The WHO has issued a new report on salt: *Global Report on Sodium Intake Reduction*. Salt is an essential nutrient, but increases the risk of heart disease, stroke and premature death when eaten in excess. Emerging evidence is also linking it to gastric cancer, obesity, osteoporosis and kidney disease.<sup>5</sup>

The report finds that **Australia does not have adequate salt reduction policies or practices**: we have only voluntary measures to reduce salt in the food supply or to encourage people to make healthier food choices re salt/MSG.<sup>6</sup>

The WHO recommends:

- Reformulating foods to contain less salt, and setting targets for the amount of sodium in foods and meals
- Establishing public food procurement policies to limit salt or sodium rich foods in public institutions such as hospitals, schools, workplaces and nursing homes
- Front-of-package labelling that helps consumers select products lower in sodium
- Behaviour change communication and mass media campaigns to reduce salt/sodium consumption.

### Zoning for public health: *Urban planning & childhood nutrition*

In 2019, London banned any new fast food outlets opening within 400m (5-min. walk) of all primary and secondary schools. It is by no means the first city (in the UK or US) to impose such a ban. Says the president of the Royal College of Paediatrics:

“Kids are coming out of school hungry and finding themselves surrounded by cheap chicken shops, chip shops and other types of junk food. This just wasn’t the case 20 or 30 years ago. People tend to eat what’s in front of them and we need to make it easier for children to make the right choices.”<sup>7</sup>

A study in the *American Journal of Public Health* has demonstrated that students at schools within walking distance of a fast-food outlet drink more sugary beverages, eat less fruit and vegetables and are more likely to be overweight.<sup>8</sup>

The London measure also imposes mandatory health requirements on all new vendors of hot takeaway food — from corner chip shops to multinational outlets — regardless of their proximity to schools. They must meet a minimum of 8 out of 22 criteria, such as displaying water more prominently than soft drinks and shaking excess fat off fried foods.

Says ChangeLab Solutions in the US:

***“[London has set] a precedent. As public health and planning become more intertwined, I think we’ll see more cities use zoning as a public health solution.”***<sup>9</sup>

Existing vendors are unaffected by the ban, which will limit the ban’s effectiveness in the short-to-medium term.

5 World Health Organization, ‘Massive efforts needed to reduce salt intake and protect lives,’ media release (9 March 2023) <<https://www.who.int/news/item/09-03-2023-massive-efforts-needed-to-reduce-salt-intake-and-protect-lives>>.

6 World Health Organization, <<https://extranet.who.int/nutrition/gina/en/scorecard/sodium>>.

7 S. Marsh, ‘Ministers urged to ban fast food outlets from opening near schools’, *The Guardian* (23 April 2018) <<https://www.theguardian.com/society/2018/apr/23/ministers-urged-to-ban-fast-food-outlets-from-opening-near-schools>>.

8 C. Dewey, ‘Why one major city will no longer let fast-food outlets open near schools’, *Washington Post* (1 December 2017) <<https://www.washingtonpost.com/news/wonk/wp/2017/12/01/why-one-major-city-will-no-longer-let-fast-food-outlets-open-near-schools/>>.

9 Ibid.

## Zoning for tobacco control

In 2009, New Orleans banned the sale of tobacco within 300 feet (91m) of schools, having previously banned alcohol sales within the same radius.

In 2010, Santa Clara County in California banned new tobacco retailers opening within 1,000 feet (305m) of schools or 500 feet (152m) of any other tobacco retailer.

In 2013, Chicago banned all flavoured tobacco products within 500 feet (152m) of schools.<sup>10</sup> In 2020, Chicago then banned all flavoured tobacco and liquid nicotine products. The city has also filed a number of lawsuits against vape manufacturers and retailers for deceptive marketing and illegal sales to children.<sup>11</sup>

In 2016, Philadelphia banned new tobacco retailers within 500 feet (152m) of schools and an overall limit of 1 tobacco retailer per 1,000 people anywhere in the municipality. In the following 3 years, the number of retailers within 500 feet of schools had fallen by 12%. Socioeconomic disparities in density also significantly reduced (retailers being more numerous in low-economic status areas).<sup>12</sup> It's a health and equity issue.

## Smoking cessation

The City of Greater Manchester aims to break intergenerational cycles of smoking and eliminate smoking within 10 years. Eighty percent of residents support its 'Make Smoking History' campaign: <https://makesmokinghistory.co.uk/>

It is working with behavioural scientists to devise evidence-based measures to reduce tobacco consumption, including:

- introduction of smoke-free areas
- incentives (vouchers) offered to pregnant women to quit smoking — evidence-based and successful
- a No Smoking Day
- a quit smoking app
- a program specific to shisha smokers
- encourages residents to report illegal tobacco retailers.

The City of Melbourne has worked closely with the City of Greater Manchester to discuss the success of our Smoke-free Melbourne policy creating smoke-free areas in our municipality.



presenter: Andrea Crossfield, the Make Smoking History lead

10 'Stores near schools: We have work to do to protect kids at the point of sale', Counter Tobacco <<https://countertobacco.org/resources-tools/evidence-summaries/stores-near-schools/>>.

11 Chicago Dept. of Public Health, 'City Council passes ordinance banning the sale of flavored vaping products as the City takes another important step to protect the health of young people', Chicago (9 September 2020) <[https://www.chicago.gov/city/en/depts/cdph/provdrs/healthy\\_living/news/2020/september/city-council-passes-ordinance-banning-the-sale-of-flavored-vapin.html](https://www.chicago.gov/city/en/depts/cdph/provdrs/healthy_living/news/2020/september/city-council-passes-ordinance-banning-the-sale-of-flavored-vapin.html)>.

12 'Stores near schools', op cit.

## Overdose prevention

The WHO says Naloxone and training in its use should be made available to people likely to witness opioid overdose. People most likely to witness an opioid overdose include:

- people at risk of an opioid overdose themselves;
- friends and families of people who use opioids on a regular basis; and
- health-care workers, emergency services personnel, people providing accommodation to people who use opioids, and peer education and outreach workers and anyone whose work brings them into contact with people who are at risk of overdose.<sup>13</sup>

Naloxone (brand name: Narcan) is a medication that reverses an opioid overdose and can prevent death if administered in time. It can be injected or administered as a nasal spray (pictured). It cannot be used to get high and has virtually no effect if administered to someone who has not taken opioids.

In recent years, Naloxone programs have expanded around the world and been shown to save lives. Such programs typically involve the distribution of Naloxone, plus training and education in its use and on the resuscitation of people suffering an opioid overdose.



Naloxone is available for free and over-the-counter (with or without a prescription) in Australia, but only from 'participating pharmacies' (called the Take Home Naloxone program). Non-participating pharmacies charge a fee, e.g. \$72 over-the-counter or \$37 with a script.<sup>14</sup> Participating pharmacies are listed here: <https://www.ppaonline.com.au/wp-content/uploads/2023/02/VIC-sites-registered-for-THN.pdf>

The North Richmond Community Health Centre offers free Naloxone training and has already trained over 1,000 people.<sup>15</sup>

Athens' take-home Naloxone program won a PHC award at the London summit.<sup>16</sup>

## Municipal libraries' role in overdose prevention

Since 2022, Chicago has made Naloxone nasal spray available for free (from 'small boxes on the wall') in all of its 81 municipal libraries and other council outlets; no questions asked, though librarians are trained to answer questions. Chicago's Dept. of Public Health has trained more than 300 librarians (at least one in every branch) plus other council officers on overdose prevention and how to use the nasal spray.

Fentanyl test kits are also available from City of Chicago premises. Fentanyl is a synthetic opioid that is 50-100 times more powerful than morphine and can be mixed into other drugs without the

<sup>13</sup> World Health Organization, 'Opioid Overdose Factsheet' (4 August 2021) <<https://www.who.int/news-room/fact-sheets/detail/opioid-overdose>>.

<sup>14</sup> Australian Dept. Health, 'Where to access naloxone' <<https://www.health.gov.au/our-work/take-home-naloxone-program/where-to-access-naloxone>>.

<sup>15</sup> North Richmond Community Health, 'Free Naloxone training' <<https://nrch.com.au/free-naloxone-training/>>

<sup>16</sup> Mayors of Europe, 'Athens paves the way for global overdose prevention efforts' (30 March 2023) <<https://mayorsofeurope.eu/news/athens-paves-the-way-for-global-overdose-prevention-efforts/>>.

user's knowledge, leading to increased risk of overdose. Test kits are a means by which users can check the safety of their purchase. Council staff are trained in the use of the test kits.<sup>17</sup>

Fentanyl now accounts for some 86% of fatal opioid overdoses in Chicago. It has not yet been successfully imported into Australia, though attempts have been made and it is surely only a matter of time before an undetected shipment appears on Australian streets.

Philadelphia also distributes Naloxone for free, via storage lockers or 'kiosks' outside libraries. An optional survey at the dispenser gives the Health Dept. a sense of who is using the machines. Ideally, all users and those who love or live with them would carry Naloxone on them or have it readily to hand to deal with an overdose. In an emergency, however, the kiosks will dispense Naloxone immediately.

Naloxone is also available from pharmacies without prescription throughout the state of Pennsylvania.<sup>18</sup>

The first library chosen for Philadelphia's naloxone dispensing program (called 'Narcan near me') was in the worst area for overdoses. In the 7 years prior, 54 people overdosed in Philadelphia municipal libraries and in 40% of these cases, library staff administered Naloxone.

The libraries also host Naloxone training for members of the public.



PHC assisted San Francisco to provide free Naloxone vending machines.

Local govt in San Diego has installed 12 Naloxone vending machines (pictured). Anyone over 18 may use the machines after completing online training, after which they are issued a PIN to access the machines. They may remain anonymous, and the training and Naloxone are free.<sup>19</sup> Vending machines can also dispense needles and syringes.

A Naloxone vending machine in San Diego, California

17 Chicago Dept. of Public Health, 'Chicago Dept. of Public Health and Chicago Public Library expand overdose prevention program citywide' (5 December 2022) <[https://www.chicago.gov/city/en/depts/cdph/provdrs/healthy\\_communities/news/2022/december/chicago-department-of-public-health-and-chicago-public-library-e.html](https://www.chicago.gov/city/en/depts/cdph/provdrs/healthy_communities/news/2022/december/chicago-department-of-public-health-and-chicago-public-library-e.html)>.

18 N. Feldman, 'Philly unveils first-of-its-kind Narcan vending machine at West Philly Free Library' (3 February 2022) <<https://whyy.org/articles/philly-unveils-first-of-its-kind-narcan-vending-machine-at-west-philly-free-library/>>.

19 <<https://www.countynewscenter.com/county-getting-ready-to-install-naloxone-vending-machines/>>.

## Supervised drug consumption sites

Canada has some 37 overdose prevention sites nationwide, including 20 in the province of British Columbia and 5 in the city of Vancouver (in BC). Some are less formal and run by peers rather than medical professionals. Research has found the centres result in less needle sharing, less public injecting and more participation in addiction treatment, with some suggestion that peers with lived experience are effective promoters of addiction treatment.<sup>20</sup>

## Effective public health messaging

'Non-communicable diseases' is not a term most people recognise. In Australia, we are more likely to say 'lifestyle diseases', which highlights the potential for prevention. However, 'lifestyle disease' also implies personal responsibility for sickness, underplaying the systemic contributors to ill health, such as junk food advertising and obesogenic urban design.

In research by Dr Hania Farhan from Gallup, New Mexico, the NCD people were most concerned about was cancer (then heart disease and stroke), but had the least sense of agency about preventing cancer. Of all the NCDs, people had the most sense of agency re diabetes, but were not concerned enough about it. Men underestimate NCD harm more than women, so public health campaigns should target men. Health knowledge is lower among low-socio economic groups, so they too should be prioritised. Also, young people are often overlooked in developing and delivering public health programs and messages.

Different audiences will be reached via different platforms, e.g. older people get information from TV; young people from social media, while different social media platforms reach different people. Also consider using smaller, independent media, social media and podcasters.

Dr Farhan found the most trusted sources of health information are doctors and nurses; while a panel of three cities (Santo Domingo, Dominican Republic, Philadelphia, USA, and Freetown, Sierra Leone) also emphasised choosing credible messengers to deliver public health messages and recruiting community leaders to the cause. They spoke of building public trust and involving the community in public health solutions.

Case study: Andrea Crossfield from Manchester and Dr Daniel Okello from Kampala presented on the tobacco control communications strategies in their city. Kampala targets specific members of the community, including pregnant women (pictured): <https://www.facebook.com/SmokeFreeKLA/>



<sup>20</sup> Recovery Research Institute, 'Expanding overdose prevention sites in Vancouver, Canada, has beneficial health impacts' <<https://www.recoveryanswers.org/research-post/expanding-overdose-prevention-vancouver-canada-beneficial-health-impacts/>>.

## Post-summit media

CoM featured in a [Vital Strategies](#) / [Cities4Health](#) blog highlighting our partnership with the City of Greater Manchester in relation to tobacco control. CoM's Joanne Young was quoted:

*City governments are often faced with parallel challenges, and working together can help accelerate solutions, even when those cities lie on opposite sides of the globe.*

*One such collaboration took place in a series of virtual conversations between Greater Manchester, UK, and Melbourne, Australia—two cities creating smoke-free spaces with Partnership [for Healthy Cities] support. The first day of the Summit, the teams met in person for the first time.*

*“When you’re dealing with a public health initiative on that sort of scale, the cities have quite a bit in common in terms of the barriers and the issues that we came up against,” Joanne Young, Melbourne’s Acting Team Leader, Health Projects, said, speaking alongside her Greater Manchester counterpart, Population Health Policy and Strategy Consultant Andrea Crossfield. “It was good to be able to bounce ideas off each other.”*

*The cities had a lot to discuss, as both are working to engage marginalized communities and expand smoke-free areas to new locations.*

*Crossfield said that by pairing the two cities, the Partnership had made room for deeper conversations. “Open and honest dialogue is so helpful,” Crossfield said, noting that it was equally important to share experiences not just of what goes well, but also what doesn’t work.*

Joanne also featured alongside Andrea from Manchester in a promotional video by Vital Strategies posted on [Twitter](#), [Instagram](#) and [LinkedIn](#).

## **Appendix: Partnership for Healthy Cities Summit 2023 program**

---- Tuesday, 14 March ----

### ***Welcome reception***

Met technical leads from Bangkok, Helsinki, Warsaw, Vancouver and Boston

---- Wednesday, 15 March ----

### ***Networking breakfast: Food policy multilateral (Latin America, London, Melbourne)***

Met technical leads from London, Quito, Cordoba, Montevideo and Vital Strategies staff

### ***Roundtable discussions for city staff***

Met Manchester, Cape Town, Muscat and Kuala Lumpur technical leads

### ***A more inclusive London: The importance of citizen engagement for public health***

- Prof. Kevin Fenton, CBE PrFPH PhD, Regional Director, Officer for Health Improvement and Disparities (London), Regional Director of Public Health, NHS London, Statutory Health Advisor to the Mayor of London, GLA and London Assembly

### ***Citizen engagement at the local level: Stories of success***

- Elizabeth Matteo, Dir. of COVID Vaccine Communications, Dominican Republic
- Cheryl Bettigole, Health Commissioner, Philadelphia
- Valena McEwan, Communications Lead, Freetown Sierra Leone

### ***Awards and keynotes in plenary***

- Sadiq Khan, Mayor of London
- Mike Bloomberg, former mayor of New York City, Founder of Bloomberg LP and Bloomberg Philanthropies, WHO Global Ambassador for Noncommunicable Diseases and Injuries

### ***Fireside chat: The public health landscape in London***

- Sadiq Khan, Mayor of London
- Rosamund Adoo-Kissi-Debrah, CBE, BreatheLife champion, founder of the Ella Roberta Foundation
- moderated by Francine Lacqua, Anchor and Editor at Large, Bloomberg Television.

The conversation focussed on the Mayor's world-leading efforts to improve air quality, his program to provide free meals for all primary school children, the case for change and how citizens and governments can successfully collaborate on these important shared goals.

### ***Lessons from the innovation sector for mayors and public health leaders***

- James Anderson, Head of Government Innovation Programs at Bloomberg Philanthropies

Discussed overlap between innovation strategies & the success of the public health sector

### ***The challenges and opportunities of commercial determinants of health***

- Anna Gilmore, Professor of Public Health, University of Bath (moderator)
- Carolina Cosse, Mayor of Montevideo (Uruguay)
- Mohammed Adjei Sowah, Mayor of Accra (Ghana)

A conversation with mayors about how they balance partnering with the private sector while prioritising public health

### ***Video remarks from Dr Tedros Adhanom Ghebreyesus, WHO Director General***

### **Spotlight sessions**

Moderated, small-group discussions designed to share best practices related to PHC focus areas including:

- Overdose prevention
- Road safety & mobility
- Food policy
- Data & surveillance
- Tobacco control

### **Evening reception (at the Wellcome Collection museum and library)**

- remarks by Jean Weinberg, Public Health team, Bloomberg Philanthropies

---- Thursday, 16 March ----

### **Networking breakfast (city staff only)**

Met technical leads from London, Cape Town, Uganda, Uruguay, Vancouver, Argentina, Kathmandu, Warsaw, Barcelona

### **London site visits**

Childcare Days: Experience a London childcare centre (attended by Joanne Young)

Visited a nearby childcare centre to observe first-hand how a healthier food environment is improving the lives of children and families

- Deputy Mayor London Children and Families – Joanne McCartney
- Islington Borough Lead – Jane Schofield

### **How do we build urban health capacity? (attended by Councillor Dr Ball)**

Learnt about and provided feedback on the WHO's new urban health capacity training course

### **Afternoon plenary: Strategies for communicating public health impact**

### **Noncommunicable diseases: Do people know what they are & how do we make them care?**

- Dr Hania Farhan of Gallup

### **From pitch to publication: Public health stories and the media**

- Emmy-nominated journalist Hannah Vaughan Jones facilitated a panel of geographically diverse journalists to solicit advice for city staffers and policy makers

### **City Stories: Crafting Tobacco Control Communications Strategies**

- City leads from Greater Manchester and Kampala shared lessons on how they craft tobacco control communications strategies in their cities
- Dr Daniel Okello – Director PH and Environment, Kampala (Uganda)
- Andrea Crossfield – City of Manchester

### **Plenary closing**

- Kelly Larson, Public Health Team, Bloomberg Philanthropies