







# National Collaborating Centre for Healthy Public Policy

Presentation to the
Subcommittee on Population Health
of the Standing Senate Committee on

Social Affairs, Science and Technology Honourable Wilbert J Keon, Chair Deputy Chair: The Honourable Lucie Pépin

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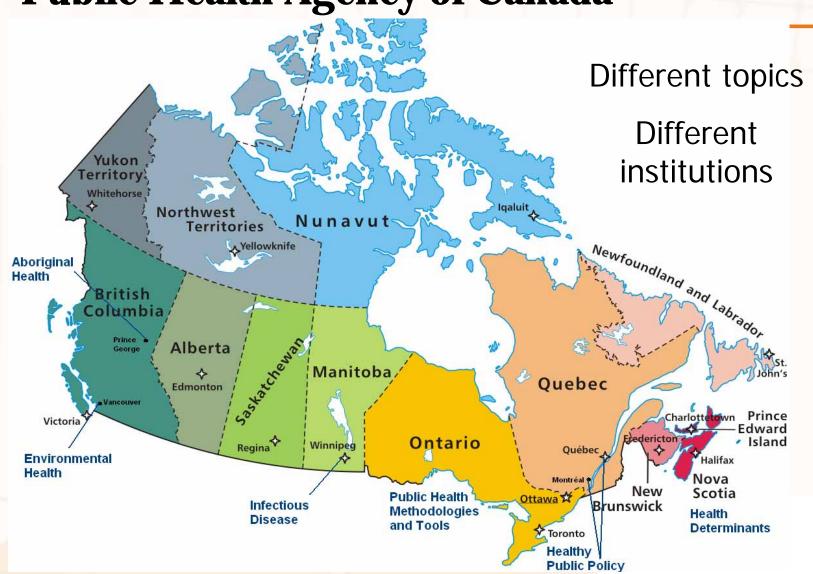




#### **Presentation overview**

- ■National Collaborating Centres program
- ☐ The NCC Program and Knowledge Translation. (Issue 1)
- □NCCHPP and Health Impact Assessment (Issue 2)

## One of six centres newly funded by the Public Health Agency of Canada



# Mission and activities for the National Collaborating Centres

#### Mission

□ To be the public health practitioners and decision-makers "bridge" and advocate with the research community

#### **Activities**

- ☐ Knowledge Synthesis, Translation and Exchange
- □ Network Development.
- ☐ Identification of Knowledge Gaps.
- □ Research Promotion

# Issue 1-Option: Invest in More Population Health Research and Enhance the Translation of Knowledge

#### □NCC shared mandate

– NCC are building on the internationallyrecognized work by Canadian Institute of Health Research (CIHR) and Canadian Health Services Research Foundation (CHRSF) on knowledge translation and share the mandate of knowledge translation with these organisations and others at the national and provincial levels.

# Issue 1-Option: Invest in More Population Health Research and Enhance the Translation of Knowledge

- □NCC unique perspective
  - Topics and context-relevant: multiple complementary experiments by the six NCCs
  - User driven (bottom-up)
  - Knowledge-driven
  - Use interaction in doing KT and interaction in determining KT priority agenda.
- □Continuous KT by many partners is needed to provide knowledge just-in-time to public health actors

## Issue 2 Possible Option: Require Health Impact Assessment (HIA)

Health Impact Assessment for the National Collaborating Centre for Healthy Public Policy

- □Why it is important
  - Helps Public health actors address the complexity of putting health in public policy
  - Tools and methodology exist for various applications.
  - Our current focus : local and regional level (provincial in re-emergence)
- □What NCCHPP is doing (2008-2009)
  - Foster network creations
  - Document experiences
  - Produce tools
  - Develop training

## Issue 2 Possible Option: Require Health Impact Assessment (HIA)

HIA Strengths and Weaknesses ☐ HIA is relevant as a decision-making tool ☐ HIA is a platform for intersectoral work ☐ HIA's use is contemplated or already in action at the regional and local level in Canada ☐ HIA could be seen as another "lens" to add to an already impressive list. ☐ HIA can be misconstrued as being another Health Department requirements

### Issue 2 Possible Option: Require Health Impact Assessment (HIA)

Challenges for Healthy Public Policy development (Frankish, 1996)

□Political challenges

(Lack of political will-Minimal public participation-Underdeveloped mechanism and incentives-Lack of cooperation among departments and jurisdictions-Competing interest)

☐Technical challenges

(Insufficient knowledge and expertise, Underdeveloped science, Underdeveloped measurements of health-related phenomena, uncertainty about the relative influence of certain determinants of health, Insufficient measures for managing relevant information)

☐ Has the situation evolved since 1996?

## Issue 2 Possible Option: Require Health Impact Assessment (HIA)

- ☐ HIA need three kinds of champions (HIA Canadian Meeting, 2008)
  - Bureaucratic
  - Advocacy
  - Academic
- ☐ Is it reasonable to think that all these factors are present in 2008?
- ☐ Should the Federal government wait for the upstream pressure from the local and regional HIA activities?









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