



22ND IUHPE WORLD CONFERENCE
ON HEALTH PROMOTION
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CURITIBA-BRAZIL

PROMOTING HEALTH AND EQUITY

Plenary

Closing Ceremony

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Legacy

- something that is handed down from one period of time to another period of time
- what we remember
- a similar concept as heritage-something inherited
- a created idea of history to take to the future

Where did we come from?

- History of PH
- History of HP
- Ottawa
- Since Ottawa
- The Future, the Legacy

What have we learned?

- Since before Ottawa? It is poverty that relates to health inequality
- Since Ottawa? It is inequity and social determinants
- Since Sunday? A lot

Methodology

- In order to capture a “legacy” we needed some type of appropriate methodology. There were no extant useful models to follow and therefore what was undertaken was itself created and quite unique:
 1. A team of over 100 volunteers rapporteurs reported back on every plenary, sub-plenary and the oral presentations to the legacy committee.
 2. They used a standard reporting form with a checklist and then a section of the form to write a summary of the key points made in the presentations and discussions.
 3. At the end of each day these forms were logged and a general summary of the checklist prepared for the legacy committee.
- Arising challenges:
 - Language: Most of the reviewers were writing in their comments in Portuguese; this was not a problem for the pre-coded parts of the review form, but for those on the committee without knowledge of Portuguese this meant dependency on the secondary report rather than a direct examination of what was written. The loss of Paulo Buss as co-chair was therefore a critical dimension.
 - Volume of reports: Overwhelming. I (dvmcq) personally read all the commentaries that were in English and met regularly with a Brazilian colleague who summarized for me the Portuguese, French, and Spanish reports. Nevertheless, one cannot be certain of the validity of this approach.
 - Variation in the quality of the reports submitted. As a result one should consider the dimensions of reliability and validity of the methodological approach.
- Despite the limitations mentioned, one must consider the uniqueness of this approach and applaud the efforts to create a ‘legacy’ using a documented synthetic and narrative approach. Much is to be learned from this effort.

Promoting Health and Equity

- Is this the answer to what we have learned?

What we learned about on Monday

- **URBAN CHANGE TO MAKE DIFFERENCES LOCALLY, PAYING ATTENTION TO EMERGING VOICES**
- **Eco-social determinants of health**
- **Improving equity in health by developing Health Literate Settings (HLS)**
- **The Sustainable Development Goals (SDGs) implications and experiences on addressing equity across the regions**
- **Building a culture of urban nonviolence with human development and quality of life**
- **Conflicts between public and private interests and their impact on health promotion**

Tuesday

- **HEALTH IN ALL POLICY AND INTERSECTORAL ACTION: INNOVATIONS IN THEORY, EVALUATION AND RESEARCH**
- **Health Literacy in all Policies – where are we now and where should we be headed?**
- **Health in All Policies and intersectoral action in times of financial crisis**
- **Roadmap for implementing a regional plan of action on Health in All Policies (HiAP) in the Americas: putting it to work**
- **Bringing evidence for action in Health in All Policies and social determinants of health: the role of surveillance beyond “showing” health disparities.**
- **Tackling the NCD epidemic - could Freire have done it better? A rotating scene for three solutions**

Wednesday

- **PATHWAYS TO ACHIEVE SUSTAINABLE AND HEALTHY HUMAN DEVELOPMENT ON A GLOBAL SCALE**
- **Health promotion and communication responses to disease outbreaks – lessons from “Getting to Zero Ebola” and polio eradication**
- **Art as a tool and bridge for health promotion**
- **The new health promotion in Latin America: values, policies, structures and challenges**
- **Catalyzing the science of solutions to improve health and health equity**
- **Health literacy: a cross-cutting platform to improve health promotion efforts across low-, middle- and high-income countries**

Thursday

- **Healthy Cities and citizen-led commitments: making urban change happen**
- **Health promotion workforce development and professional accreditation at a global level: a world café on opportunities, threats and challenges**
- **Designing and implementing health promotion policies: a dialog contrasting the Brazilian and Chinese experiences**
- **Advancing the IUHPE agenda on Health Impact Assessment (HIA)**
- **Happiness as a value and principle of health promotion**

What was old, tried and true?

- Values are in HP foundation
- Eco-social determinants of health
- Health equity
- Health Literacy

What was new, innovative, the future?

What was new

- The continued relevance of equity, also Austerity kills!
- Equity more than health equity
- Equity itself as a value
- Translating equity into the chief concerns of health promotion, namely the role of social structural factors in the causality of good and bad health, HIAP, governance
- Translating equity into the concerns of institutional players: the UN,SDGs, WHO, IUHPE

The major messages of Curitiba

- Move away from the individual-based biomedical model to a socio-structural model
- Less talking the talk – more walking the talk
- Abandon old linear models- we are in the age of complexity
- There is nothing more practical than a good theory –but, there is nothing more useless than a bad theory

More

- Give up prejudices about the superiority of a particular methodology in HP
- In thinking about the Sustainable Goals (SDGs) cultural diversity is critical
- Community participation is a way to empower people
- Address key emergent issues in challenged and marginalized groups (e.g. LGBT, indigenous, migrants).

And, critically

- A core belief of health promotion is to take action on its values
- Social justice and democracy are our core values
- Those in health promotion need to stand in solidarity for social justice and democracy throughout the world and in Brasil.