Transformation in Practice: the third Meeting of the Coalition of Partners to Strengthen Public Health Services in the European Region

Expert Meeting
Ljubljana, Slovenia
27 – 28 November 2018

Public Health Services Programme
Division of Health Systems and Public Health
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Abstract

The WHO Regional Office for Europe and Slovenia’s Ministry of Health convened the Third Meeting of the Coalition of Partners to Strengthen Public Health Services in the European Region in November 2018 in Ljubljana, Slovenia to enable the participants: to discuss the questions that mattered most to them and the Coalition of Partners; to learn from the past, present and emerging future about the art and science of strengthening public health services; to co-create activities for 2019; and to explore what the Coalition of Partners would become. The participants reflected on the lessons learned since the Coalition of Partners was founded in 2017, explored further opportunities for joint work in 2019 and formed a core group and advisory group to guide the further development of the Coalition of Partners.

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EUROPE

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# Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>APHEA</td>
<td>Agency for Public Health Education Accreditation</td>
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<td>ASPHER</td>
<td>Association of Schools of Public Health in the European Region</td>
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<td>CIS</td>
<td>Commonwealth of Independent States</td>
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<td>Coalition of Partners</td>
<td>Coalition of Partners to Strengthen Public Health Services in the European Region</td>
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<td>ECDC</td>
<td>European Centre for Disease Prevention and Control</td>
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<td>EHII</td>
<td>WHO European Health Information Initiative</td>
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<td>EUPHA</td>
<td>European Public Health Association</td>
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<td>HPH Network</td>
<td>International Network of Health Promoting Hospitals and Health Services</td>
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<td>IUHPE</td>
<td>International Union for Health Promotion and Education</td>
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<td>M-POHL</td>
<td>EHII Action Network on Measuring Population and Organization Health Literacy</td>
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<td>NCDs</td>
<td>noncommunicable diseases</td>
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<td>NGOs</td>
<td>nongovernmental organizations</td>
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<td>WFPHA</td>
<td>World Federation of Public Health Associations</td>
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<td>WONCA Europe</td>
<td>World Organization of Family Doctors, European division</td>
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Note to the reader

The WHO Regional Office for Europe, through the Public Health Services Programme, the Division of Health Systems and Public Health, together with Ministry of Health of Slovenia, hosted the third expert meeting of the Coalition of Partners to Strengthen Public Health Services in the European Region on the 27 to 28 of November 2018 in Ljubljana, Slovenia. This report provides a summary of the proceedings, presentation and interactive discussions of this meeting. The report condenses each session, including interventions from the participants, according to the theme addressed rather than attempting to provide a chronological summary.

The summaries of the discussions and group work address the main themes emerging from wide-ranging discussions among all speakers, and do not necessarily imply consensus. Summaries of presentation and points made in the discussions and interactive sessions are presented as the opinions expressed; no judgement is implied as to their veracity or otherwise.
Introduction

Strengthening public health services has had a well-recognized role in implementing Health 2020 (1), the European health policy framework for the WHO European Region, since it was adopted in 2012. The United Nations 2030 Agenda for Sustainable Development (2) incorporates and extends Health 2020 by strengthening countries’ capacity to achieve better, more equitable and sustainable health and well-being for everyone throughout the life-course. Implementing both Health 2020 and the health-related Sustainable Development Goals requires achieving universal health coverage and better health outcomes in countries by building strong, resilient and people-centred health systems, which includes strengthening public health functions and capacity.

Through the WHO Regional Committee for Europe, Member States endorsed the European Action Plan to Strengthen Public Health Services (3) in 2012, to develop, implement, monitor and evaluate actions to strengthen public health capacity and services. A midterm progress report on the implementation of the Action Plan to the 2016 session of the Regional Committee (4) led to the recommendation that greater effort be invested in engaging partner organizations. In response, the WHO Regional Office for Europe launched the Coalition of Partners to Strengthen Public Health Services in the European Region (Coalition of Partners) (5).

The Coalition of Partners brings together experts and practitioners from national public health services, international organizations, civil society and academia and invites them to co-create an agenda for action and form solutions to strengthen public health services in countries and to take joint responsibility for implementation. In accordance with the Regional Committee’s recommendations in 2016, the Coalition of Partners focuses on the enabler functions of public health services: human resources for, funding of and organization and governance of public health services and public health legislation.

Aim and Objectives

The first two meetings of the Coalition of Partners in 2017 led to the launch of several collaborative projects as part of its draft agenda for action. The Regional Office and Slovenia’s Ministry of Health convened the third Meeting of the Coalition of Partners to Strengthen Public Health Services in the European Region in November 2018 to enable the participants:

- to discuss the questions that mattered most to them and the Coalition of Partners;
- to learn from the past, present and emerging future about the art and science of strengthening public health services;
- to co-create activities for 2019; and
- to explore what the Coalition of Partners would become.
**Expected Outcomes**

- lessons learned from efforts to establish national-level coalitions in European countries with a clear focus on strengthening national health systems and public health services through institutional reform, developing the public health workforce and strengthening legislative and financial frameworks;
- concrete proposals to further strengthen existing country coalitions while creating opportunities for new countries to initiate coalitions in 2019–2020;
- concrete proposals for country-level pilot-tests of the tools developed by the Coalition of Partners and proposals for new tools to facilitate the strengthening of national public health services; and
- a further matured Coalition of Partners, with:
  - an improved understanding of how country coalitions function as a mechanism to strengthen national health systems and improve public health capacity in countries;
  - stronger relationships between partners;
  - an expanded number of countries actively engaged in establishing their own coalitions to strengthen public health services; and
  - a learning and evaluation framework as a key component in implementing the European Action Plan to Strengthen Public Health Services.

*Annexes 1 and 2 describe the programme and list the participants, respectively.*

**Welcome and Context**

In welcoming the participants, representatives of the Ministry of Health of Slovenia, Vesna-Kerstin Petric and Pia Vračko, noted the need for innovation to advance public health and called the Coalition of Partners a unique tool for public health implementation, particularly to strengthen primary health care, that should be shared with other WHO regions. In their welcomes, staff members of the WHO Regional Office for Europe – Hans Kluge, Martin Krayer von Krauss and Anna Cichowska Myrup – placed the Meeting in context with other major WHO activities in 2018 to which Coalition of Partners had made important contributions. These especially included four high-level WHO regional meetings: (1) Health Systems Respond to NCDs: experience in the European Region, in Sitges, Spain; (2) Accelerating Implementation of the International Health Regulations and Strengthening Emergency Preparedness in the WHO European Region in Munich, Germany; (3) Building Health Systems for Prosperity and Solidarity, in Tallinn, Estonia; and (4) the Global Conference on Primary Health Care in Astana, Kazakhstan.

The Third Meeting of the Coalition of Partners would continue the journey started in January 2017. The Coalition of Partners enables partners to develop relationships that lead to learning and innovation. It aims to catalyse innovation in public health services and mobilize sustainable change. As just one example of cooperation, Regional Office staff
members thanked the European Public Health Association (EUPHA) for its invitation to hold the Meeting as a satellite event of the 11th European Public Health Conference.

The participants numbered over 100 and came from over 30 Member States in the WHO European Region (including 27 people nominated by their countries) and represented 12 national and international partner organizations (Annex 2). They had rich and varying backgrounds, which enabled them to address common challenges. Many were interested in global health, the direction in which public health would develop in countries (especially developing public health strategies), the need to coordinate public health to bridge the gap between infectious diseases and NCDs and ways to develop organizations for public health professionals in countries and to interest people in public health.

Reflecting on what is

The participants began their work by reflecting on the objectives and achievements of the Coalition of Partners and formulating questions about its nature, methods and future. The Coalition of Partners has six objectives in transforming public health services, aligned with four of the 10 essential public health operations of the Action Plan.

The six objectives are:

1. There is alignment between the allocation of human resources for public health and the priorities determined by the burden of disease.
2. Public health leaders have the knowledge and skills required to functions as effective change agents.
3. The public health workforce is recognized and valued as a profession.
4. Member States have strong public health legislation enabling effective service delivery.
5. Member States effectively advocate investment in public health services and apply strategic financial management practices.
6. Public health services are organized and governed effectively and efficiently.

**WHO Activities**

The participants devised a series of questions that identified the most important issues for the Coalition of Partners to address, holding their discussion against a background of some of the most important events and achievements in 2018, which illustrated the collaborative nature of the Coalition of Partners and topics of interest. For example, WHO’s high-level meetings in Spain and Estonia had included work to identify opportunities to transform public health services and a special session on public health, respectively, and the Tallinn conference had included a session on the economics of public health. Other WHO events and publications had explored key policy questions on integrating public health services into primary health care, highlighted the lack of investment in public health services, sought ways to strengthen health systems for public health preparedness and response and ways to advance public health for sustainable development and reviewed methods of organizing and funding public health services in the European Region.

WHO had worked and planned to work with the International Association of National Public Health Institutes on several events to develop and strengthen national public health institutes and to engage with their directors. It had promoted the integration of public health services into primary health care at the annual conferences of the World Organization of Family Doctors (WONCA) Europe and the International Network of Health Promoting Hospitals and Health Services (HPH Network) and held a joint meeting with the Association of Schools of Public Health in the European Region (ASPHER) to peer-review three Coalition of Partners tools to support the development of the public health workforce: a competencies framework, a roadmap to professionalization and a handbook on accreditation services.

**The CoP’s Activities**

The work of WHO and the Coalition of Partners with specific countries had included a mission to Estonia on strengthening the role of municipalities in public health, a policy dialogue in Finland on ensuring collaboration between primary health care and public health services and a mission to Kazakhstan on strengthening the national public health institute and building capacity in the workforce. Several visits to Kyrgyzstan focused on mobilizing a national coalition to transform its public health services as a part of larger reforms of the
health system. Finally, support was provided to Slovenia in launching its essential public health operation self-assessment and discussing the resulting recommendations.

The achievements of the Coalition of Partners and its planned work for 2019 showed that it is an alliance of people pursuing joint objectives by building a whole-systems platform, since public health services are so complex that learning and developing ideas for cooperative action require input from across the spectrum of stakeholders. The Coalition of Partners was also a community of practice whose members could share and learn from experience and an incubator to inspire the creation of similar coalitions in countries to pursue joint objectives to strengthen public health. Catalysing change requires Coalition of Partners members to build high-quality relationships based on trust and a shared vision.

**Key issues for the CoP to address**

Considering their work in 2017–2018 and their plans for 2019, the participants noted down and shared many questions about issues that the Coalition of Partners needs to address, giving the highest priority to those about its working methods and structure. The questions were organized in a wide range of categories, which are listed in descending order of the number of questions in each category:

- how the Coalition of Partners members connect with each other
- priority areas for the Coalition of Partners
- the setting of priorities for public health issues and the economic case for the Coalition of Partners
- strategic planning for the Coalition of Partners
- communication within and by the Coalition of Partners
- attitudes, skills and knowledge
- the legal framework for the Coalition of Partners
- the work of the Coalition of Partners in countries
- the public health workforce
- public health at the national level
- integrating public health services with primary health care
- achieving the Sustainable Development Goals
- how to communicate public health
- resources for the Coalition of Partners
- education
- research
- monitoring and evaluation of the Coalition of Partners
- funding of public health.
Lessons Learned

Next the participants formed trios to identify the key lessons they had learned from their work to create transformative change in 2018 and to share the learning questions or objectives that would be most relevant for the work of the participants’ teams in 2019.

The six trios that shared their discussions with the participants primarily stressed both the need for and problems in building the broad partnerships required. Teams need to be multidisciplinary and their members need to have skills in both communication and advocacy, which nongovernmental organizations (NGOs) could offer. To build partnerships, especially horizontal and vertical ones, Coalition of Partners members need to: (1) to improve knowledge about partnerships; (2) to leave their professional comfort zones to form links with people in various sectors to understand the language of non-health ministries; and (3) to act as translators for their colleagues and to recognize both strengths and weaknesses in partnerships.

Some public health professionals at various levels need to overcome their reluctance to participate in new partnerships, especially to taking the role of leader rather than critic. Participants also suggested that partnerships give more voice to young people. Work for health system reform should involve members of parliament, enable health-care professionals to participate and consider and plan for the impact of change, especially at the local level. A participatory approach is essential at all levels. The participants listed their
lessons learned, which were allocated to the following categories, listed in descending order of the number of lessons in each:

- multistakeholder engagement and an interdisciplinary approach
- teamwork
- systemic vision and planning
- a common language
- overcoming inner obstacles
- setting priorities for public health with a systemic approach
- buy-in from politicians and political will
- capacity-building
- collaboration with NGOs and civil society
- intergenerational cooperation
- monitoring and evaluation
- country needs.

Objectives for 2019

Next the trios of participants determined the learning questions or objectives that were most relevant for them and their teams in tackling the work they anticipated in 2019. Those shared with the group also focused on building coalitions and relationships. They called for greater representation from the health system in processes: since the system is wider than participants might think, including the voices and views of a wide range of its representatives is important. Another suggestion is to consider restructuring key public health conferences to include the participation of various stakeholders, including environmental health. The International Association of National Public Health Institutes and ASPHER, for example, were already jointly setting the agendas for their annual conferences. Most of the learning objectives listed by the participants were allocated to a range of categories. By far the most important was creating intersectoral coalitions and multistakeholder collaboration to pursue a shared purpose and vision, followed by tools for needs assessment and advocacy skills and communication. Many objectives, including those related to the needs of specific countries, are too individual to allocate to a category.
Exploring what could be

In addition to the face-to-face discussions, videos played during the Meeting, lunchtime discussions and posters displayed in the meeting room enabled participants to share the lessons learned and opportunities available to take part in initiatives under Coalition of Partners.

Brown Bag Lunch Sessions

The following lunch sessions provided a more in-depth exploration of selected areas of content:

1. **Making it real: framework for action for a sustainable health workforce in the WHO European Region**, hosted by Cris Scotter and Gabrielle Jacob, Human Resources for Health programme, WHO Regional Office for Europe.

2. **What to take on the trip to the next level of a competent public health workforce** hosted by Katarzyna Czabanowska, with José Maria Martin-Moreno and Cedric Slock and Ellen Kuhlmann, with Robert Otok.


4. **Health Promotion Guide**, hosted by Caroline Costongs, Director, EuroHealthNet.

5. **Sustainable Development Goal 3+ health targets**, hosted by Emilia Aragón, Consultant, Sustainable Development and Health programme, WHO Regional Office for Europe.
Gallery Walk

In addition, the participants examined and indicated interest in taking part in the initiatives described in 20 posters that showcased products, services, resources, case studies and practices relevant or related to the Coalition of Partners.

These are listed with those attracting the most interest from participants at the top:

- WHO European Flagship Course on Equity in Health in All Policies;
- ASPHER’s aims, activities and alliances for the development and professionalization of the public health workforce;
- the work of the Agency for Public Health Education Accreditation (APHEA) for further integrating public health competencies and qualifications into national accreditation systems;
- the guide on health promotion being developed under the leadership of EuroHealthNet;
- building of support for healthy cities networks in countries;
- flagship courses in the European Region to ensure that public health leaders have the knowledge and skills to function as effective change agents;
- the WHO European Health Information Initiative (EHII) Action Network on Measuring Population and Organization Health Literacy (M-POHL);
- WHO initiative on its report on health equity, including a suite of tools to promote action;
- WHO Knowledge Action Portal on NCDs (https://www.who.int.kap);
- essential public health operations: paving the way to a shared understanding of public health through various deliverables and adapting them to country needs;
- WHO fact sheets on health and the Sustainable Development Goals, aiming to assist public health actors in work to achieve the Sustainable Development Goals;
- the work of the Regional Office to strengthen the public health workforce;
- support from the HPH Network to deploy the health-promoting hospital offer in countries;
- developing the public health workforce through a public health professional credentialing handbook and developing a roadmap by ASPHER and Maastricht University, Netherlands for the professionalization of the public health workforce;
- mapping the implementation of the International Health Regulations in the European Region, with a pilot project in Georgia, Kyrgyzstan, Serbia and Switzerland;
- developing a European Competencies Framework for the Public Health Workforce;
- being invited to join EUPHA’s network of public health professionals and associations, to ensure that all 53 Member States in the European Region have national public health associations;
- an assessment tool for strategies for funding public health being developed by the School of Public Health of Louisiana State University, United States of America;
- an initiative of the World Federation of Public Health Associations (WFPHA) to promote the Health Star Rating system (front-of-pack nutrition labelling) as part of work for healthy nutrition; and
- the European Centre for Disease Prevention and Control (ECDC) Virtual Academy (online learning platform).

In addition, the International Union for Health Promotion and Education (IUHPE) was developing a framework for advocacy.

**Design laboratory to co-create activities for 2019**

Design laboratories to co-create activities for 2019 comprised the bulk of the participants’ work over the two days of the Meeting. Some of the participants announced and called for support with tasks, products or initiatives that they were planning for 2019, to take advantage of the groups’ collective wisdom or to secure help from the Coalition of Partners for implementation. The tasks, initiatives and projects are required to be relatively concrete, serve the higher purpose of strengthening public health services and have a commitment for work to proceed in 2019. These participants then invited interested members of the larger group to join in increasingly specific conversations about the aims of their initiatives, the help that they needed to implement them and the concrete next steps to which project partners committed themselves in 2019.

On the first day of the Meeting, 20 hosts announced a wide range of activities, some of which were outgrowths of the work described in the posters. These activities included impact assessment for public health interventions by ASPHER, a survey of the public health workforce by EUPHA and IUHPE, European Public Health Week 2019, the building of a health planning process for Portugal consistent with the Sustainable Development Goals at the national and subnational levels and the establishment of a Coalition of Partners, following essential public health operation assessment, in Kosovo (in accordance with United Nations Security Council resolution 1244 (1999)). Resuming the design laboratory on the second day of the Meeting, the participants decided which of the projects needed no further discussion to proceed, announced further initiatives for 2019 and further fleshed out some proposals made on day one.

Groups formed, grew, combined or dissolved according to the participants’ interest in and the practical requirements of the work in question. One topic from day one was discontinued after discussion revealed that a different solution was needed than the one originally proposed, and two fell to the ground on the second day owing to lack of interest. This summary of the discussions presents the projects and initiatives in three groups: those discussed only on the first and second days of the Meeting, respectively, and the larger group that was developed in greater depth over both days.
**Day-one and day-two projects**

The groups discussing four of the projects announced on the day agreed that their aims, planned outcomes and stakeholders were relatively concretely defined and the next steps to take were clear. These projects comprised the WHO guide to support the implementation of Sustainable Development Goals for better health and well-being, the WONCA Europe statement on a long-term strategy of collaboration, an invitation to new countries to join M-POHL and the aim of learning more about their needs and strengthening the inactive central Asian public health association, particularly to make it useful for public health professionals. Discussion about the last of these initially focused on Ukraine but also covered other countries and led to an agreement to start with the discussion of needs.

On day two, two groups addressing additional initiatives – on Norway’s aim to reduce social inequalities in health at the local level by supporting municipalities in acting and ways to close the gaps between the local, national and international levels in public health – joined forces. The group members agreed that future work (involving Norway, Portugal, Sweden, the European Union and the WHO European Healthy Cities Network) would take the form of a conversation, not a project. Norway’s focal point would list actions that municipalities could take, and the other members would supply useful reports and data. Additional aims of this work included learning more about municipalities, in part by making better links with the Norwegian Association of Local and Regional Authorities and examining how the Sustainable Development Goals could contribute as a platform.

Several participants combined to discuss the IUHPE’s efforts to develop a new systems approach to health promotion for communicable diseases. A committed group was established, and representatives of Georgia, Slovakia and Ukraine were committed to further developing the framework, developing assessment tools and finding a site for a pilot test.

Further, representatives of a group of countries – the Czech Republic, Hungary, Poland and Slovakia – committed themselves to working together to put public health higher on the political agenda. They would start by comparing inequalities in health at their shared borders and setting up public health training to work on them.
Projects developed in greater depth

ECDC – Training Resources

The ECDC wanted to explore how to create a clearing-house of training resources on communicable diseases. Three main points arose from the discussion.

- The ECDC needs a communication strategy to better publicize its products.
- Its mechanisms for country support are useful and need to be supported based on the assessment of training needs.
- Accreditation and training needs to be integrated more systematically.

EuroHealthNet

A EuroHealthNet project aims to build a convincing narrative for investing in public health, through such means as its forthcoming guide. It needs feedback on the tool to assess public health funding. Participants from Austria, Poland and Switzerland committed themselves to taking part in Skype calls to further refine the tool, which would be ready to pilot-test in a couple of months.

Public Health Law

The Coalition of Partners focal point for the Russian Federation announced a project to develop a model law on public health for the Commonwealth of Independent States (CIS), hoping that both CIS countries and other countries, especially Switzerland, and WHO would take part in this work, particularly to analyse legislation. Discussion started with the lack of a
conceptual framework, which would begin to be built by agreeing on a common definition of public health. This would facilitate the harmonization of legislation. Later discussion focused on the desire to devise a tool to analyse existing legislation in the CIS and to secure advice from Coalition of Partners members with legal expertise. Representatives of Azerbaijan, Belarus, the Russian Federation, Tajikistan and Ukraine committed to taking part, and the group hopes to expand this list. To pursue their goal, members plan to present an analytical report on the normative basis of public health in each participating country, harmonized definitions of each public health field and a menu of possible elements of and the structure of a law on public health.

**National Public Health Institutes**

A discussion on what works well in establishing and running a national public health institute and network focused on the aim of developing these in Scotland, United Kingdom. Country representatives from Austria, Finland, Hungary, Norway and Poland not only supplied advice but also would support the development of a report by supplying tools and models for national and local networks.

**Global Charter for Public Health**

Two groups focused on the Global Charter for the Public’s Health \( (6) \). The first explored how to improve advocacy skills to implement the Charter by persuading other sectors to participate. The ECDC had developed a weeklong course on advocacy for young professionals; it would run the first such course with the involvement of ASPHER and IUHPE, and the partners would move forward to integrating the course into university training. The ECDC would decide where the course would be run and what countries would be involved. The second group discussed integrating the Global Charter into key Master of Public Health degree programmes. Led by representatives of ASPHER and WFPHA, the group decided that it is necessary to raise awareness in other sectors and bring them into the public health family. The group called for the participation of other Coalition of Partners members interested in working with intersectoral approaches at the national and international levels. WFPHA planned to hold a webinar on law and public health with a focus on communicable diseases, to include people with such expertise in plenary sessions of its 2020 meeting.

**EPHO Self-Assessment**

Slovenian participants want to use the results of the essential public health operation assessment underway in the country as the basis for preparing a national plan for developing public health services in Slovenia. The discussion group included participants from neighbouring countries. The proposed next steps were to finish the essential public health operation process by not only reporting to WHO but also publishing a scientific monograph in Slovenian, and then start building a coalition to draft the plan, after securing a mandate from the Ministry of Health to establish a working group.
Public Health Workforce

A substantial group, including representatives of ASPHER, discussed work on two Coalition of Partners tools to support the development of the public health workforce: operationalizing the roadmap for the professionalization of public health (self-assessment to allow priority-setting and action) and the competencies framework. Commitments to pilot-test the roadmap were sought. The group discussing both tools included participants from Belgium, Bulgaria, the Czech Republic, Hungary, Norway, Poland, Slovakia, Ukraine and the United Kingdom, who were committed to checking and using the self-assessment tools for both the road map and the competencies framework.

Further, to develop an educational programme in the leadership of collaborative systems for public health professionals, Germany, Kazakhstan, the Netherlands, Norway, Ukraine and the United Kingdom worked on a proposed capacity-strengthening programme on Systems Leadership to Enhance European Health Intervention Strategies.

Intersectoral Coordination

Finally, the head of the public health department of Armenia’s Ministry of Health led an exploration of how to create mechanisms for efficient and effective intersectoral coordination in the country that expanded to examine intersectoral efforts in Kyrgyzstan. The group proposed to establish a coalition of Russian-speaking countries with a special focus on developing codes of conduct, education and training. With the goal of achieving and coordinating intersectoral efforts to include public health in all sectors, members
planned to share experiences and achievements, to hold meetings in all participating countries and to start a series of national discussions.

The discussion showed that Coalition of Partners projects were at different stages of maturity but aimed to deliver results on the ground. A next step would be to recruit countries to pilot-test the various products and tools.

**Defining what will be**

The participants devoted the final portion of the Meeting to deciding on the future nature and structure of the Coalition of Partners. The discussion was based on a handbook for the Coalition of Partners drafted by the WHO Regional Office for Europe, which comprised headings on the purpose, objectives, theory of change, means of action, membership, economic foundations, governance and agreements, interspersed with relevant questions about each. It presented a vision of the Coalition of Partners as a new way of catalysing change: involving core teams with deep commitment to the cause and each other, deep listening and dialogue practices, participatory methods to engage stakeholders from across the system, shared ownership and distributed leadership.

The participants raised dozens of questions about the future of the Coalition of Partners, many focusing on the headings in the handbook, especially governance. Many also touched on topics discussed during the Meeting, such as how to build coalitions of partners at the national and even the municipal level, how to integrate public health services into primary health care, how the Coalition of Partners could take and build a truly intersectoral approach, how the Coalition of Partners could support implementation of the Sustainable Development Goals and how the Coalition of Partners both would fit in among the other organizations and initiatives for public health and could help to link them.

**CoP Team 2019**

Two new groups were proposed to answer these questions, drawing on lessons from existing networks represented at the Meeting: a core team (of 3–5 people devoting 3–5 hours per week to the Coalition of Partners) and an advisory group (of 5–15 people devoting 3–5 hours per month). They would attempt to group tasks, set priorities for questions, conduct learning journeys and develop proposals for presentation in 2019. The advisory group would be a sounding board for the core group, whose members would need to conduct research and discuss intensively to make proposals. The groups’ work was proposed to take place in February–June 2019, mostly by webinars, with homework in between. One participant noted that the members of these groups would need backing from their institutions and/or teams in order to function well. Table 1 lists the participants who volunteered for both groups (see also Annex 2).
Table 1. Volunteers for the Coalition of Partners core and advisory groups, 2019

<table>
<thead>
<tr>
<th>Group</th>
<th>Member (country or institution)</th>
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<tbody>
<tr>
<td>Core group</td>
<td>Katarzyna Czabanowska (ASPHER)</td>
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<td></td>
<td>Lorena Dini (Germany)</td>
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<td></td>
<td>Martin Krayer von Krauss (WHO Regional Office for Europe)</td>
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<td></td>
<td>Anna Cichowska Myrup (WHO Regional Office for Europe)</td>
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<td></td>
<td>Natia Shkvitaridze (Georgia)</td>
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<td>Advisory group</td>
<td>Igor Akulin (Russian Federation)</td>
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<td></td>
<td>Caroline Costongs (EuroHealthNet)</td>
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<td></td>
<td>Jeannette De Boer (Netherlands)</td>
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<td></td>
<td>Alexey Goryainov (Russian Federation)</td>
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<td></td>
<td>Peggy Honoré (United States of America)</td>
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<td></td>
<td>Rüdiger Krech (WHO headquarters)</td>
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<td></td>
<td>Viktor Liashko (Ukraine)</td>
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<td></td>
<td>Karolina Mackiewicz (Finland)</td>
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<td></td>
<td>Jürgen Pelikan (Austria)</td>
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<td></td>
<td>Salman Rawaf (United Kingdom)</td>
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<td>Gro Saeten (Norway)</td>
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<td>Aliya Senenko (Russian Federation)</td>
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<td></td>
<td>Tony Smith (United Kingdom)</td>
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<td></td>
<td>Farhang Tahzib (United Kingdom)</td>
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<td></td>
<td>Tetiana Yrochko (Ukraine)</td>
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</tbody>
</table>
Conclusion

At the end of the Meeting, the participants evaluated their experience. They appreciated their opportunities to meet and get to know other colleagues, welcomed the expansion of the Coalition of Partners, demonstrated by the number of participants present, and thought that the work of the Coalition of Partners was even more useful in their countries than before and presented a useful model. Although further measures need to be taken to include Russian-speaking participants more fully, more than 80% of the participants wanted to attend future meetings of the Coalition of Partners.
References


Annex 1. Programme

Tuesday, 27 November 2018
Registration
Opening session: Ministry of Health, Slovenia and WHO Regional Office for Europe
Reflecting on what is
Learning laboratory
Gallery walk
Design laboratory 1: exploring what could be
Closing

Wednesday, 28 November 2018
Morning practice (optional)
Opening session
Design laboratory 2: defining what will be
How does the Coalition of Partners take us to the next level?
Closing session
Annex 2. Participants

**Member State nominees**

**Armenia**
Kristina Gyurjyan, Head, Public Health Department, Ministry of Health (Coalition of Partners focal point)

**Austria**
Christina Dietscher, Executive Head, Federal Ministry of Labour, Social Affairs, Health and Consumer Protection (Coalition of Partners focal point)

**Azerbaijan**
Gahraman Hagverdiyev, Director, Public Health and Reforms Centre, Ministry of Health (Coalition of Partners focal point)

**Belarus**
Yelena Latushkina, Chief Specialist, Department of Medical Care, Ministry of Health (Coalition of Partners focal point)

**Bulgaria**
Vladimir Nakov, Assistant Professor, Mental Health Department, National Centre of Public Health and Analyses

**Croatia**
Krunoslav Capak, Director, Croatian Institute of Public Health (Coalition of Partners focal point)

**Czech Republic**
Vladimír Prikazsky, Adviser for Professional Activities, National Institute of Public Health

**Finland**
Heli Hätönen, Ministerial Adviser, Ministry of Social Affairs and Health

**Georgia**
Natia Skhvitaridze, Reproductive Data Analyst, Researcher, National Centre for Disease Control and Public Health

**Hungary**
Péter Csizmadia, Consultant, Unit of Health Promotion, National Centre of Public Health

**Italy**
Andrea Urbani, Director-General, Health Services, Ministry of Health (Coalition of Partners focal point)
Kazakhstan
Valikhan Akhmetov, Director, National Centre for Public Health (Coalition of Partners focal point)

Kyrgyzstan
Sharipa Suvanalieva, Lead Specialist, Public Health Department, Ministry of Health

Lithuania
Loreta Asokliene, Head, Division of Epidemiological Surveillance, Ministry of Health
(Coalition of Partners focal point)

Montenegro
Mirjana Djuranovic, Head, Directorate for International Cooperation and International Agreement, Ministry of Health
(Coalition of Partners focal point)

Netherlands
Marieke Verschuuren, International Affairs Advisor, National Institute for Public Health and the Environment

North Macedonia
Biljana Taneska, Special Advisor, Cabinet of the Minister of Health, Ministry of Health
(Coalition of Partners focal point)

Portugal
Ana Cristina Garcia, Senior Public Health Medical Specialist, Epidemiology Department,
National Institute of Health (Coalition of Partners focal point)

Republic of Moldova
Daniela Demiscan, Head, Public Health Division, Ministry of Health, Labour and Social Protection
(Coalition of Partners focal point)

Romania
Corina Pop, Senior Advisor, Ministry of Health

Russian Federation
Anna Korotkova, Deputy Director, Federal Research Institute for Health Organization and Informatics
(Coalition of Partners focal point)

Aliya Senenko, Head, Department of Scientific Foundations of the Organization of Primary Care, Ministry of Health

Slovakia
Daniela Kállayová, Department of Public Health, Screening and Prevention, Ministry of Health
Zuzana Katreniakova, Department of Social and Behavioural Medicine, Faculty of Medicine, PJ Safarik University (Coalition of Partners focal point)

Zuzana Klochanova, Department of Health Promotion, Public Health Authority of the Slovak Republic

**Slovenia**

Mojca Gobec, Director-General, Public Health Directorate, Ministry of Health

Tatjana Krajnc Nikolic, National Institute of Public Health

Eva Murko, National Institute of Public Health

Vesna-Kerstin Petric, Head, Division of Health Promotion and Prevention of Noncommunicable Diseases, Ministry of Health (Coalition of Partners focal point)

Maja Roškar, Researcher, National Institute of Public Health

Pia Vračko, Secretary of State, Ministry of Health

**Switzerland**

Erika Placella, Health Advisor, Eastern Europe and Central Asia Department, Federal Department of Foreign Affairs, Swiss Agency for Development and Cooperation (Coalition of Partners focal point)

**Tajikistan**

Nuriddin Muhiddinov, Rector, Institute for Postgraduate Training of Health Workers (Coalition of Partners focal point)

**United Kingdom**

Paul Johnstone, North Region Director, Public Health England

**Ukraine**

Viktor Liashko, First Deputy Director, Public Health Centre of the Ministry of Health (Coalition of Partners focal point)

**Other participants**

Igor Akulin, Head, Department of Public Health and Healthcare, Management, St Petersburg State University, Russian Federation

Peter Beznec, Director, Centre for Health and Development Murska Sobota, Slovenia

Vesna Bjegovic-Mikanovic, School of Public Health and Management, Faculty of Medicine, University of Belgrade, Serbia

Bettina Borisch, Institute of Global Health, University of Geneva, Switzerland and World Federation of Public Health Associations
Mateja Bulc, Associate Professor, Family Medicine, Medical Faculty, Ljubljana University, Slovenia; World Organization of Family Doctors (WONCA) Europe, and European Network for Prevention and Health Promotion in Family Medicine and General Practice, Slovenia

Caroline Costongs, Director, EuroHealthNet, Belgium

Claire Cotter, Programme Manager, People Directorate, Workforce Development, Public Health England, United Kingdom

Byron Crape, Director, Public Health Department, School of Medicine, Nazarbayev University, Kazakhstan

Katarzyna Czabanowska, Associate Professor of International Health, Maastricht University, Netherlands and President, Association of Schools of Public Health in the European Region (ASPHER)

Jeannette De Boer, Head, Training Programme for Public Health, Netherlands School of Public and Occupational Health and Netherlands National Institute for Public Health and the Environment

Lorena Dini, Head, Working Group on Health Policy and Systems, Research Institute of General Practice, Charité – Universitätsmedizin Berlin, Germany

Maaike Droogers, Scientific Officer, European Public Health Association (EUPHA), Netherlands

Karl Ekdahl, Head of Unit, Public Health Capacity and Communication, European Centre for Disease Prevention and Control (ECDC), Sweden

Juliette Fugier, Programme Manager, France Secretariat, International Association of National Public Health Institutes

Mojca Gabrijelčič Blenkuš, Senior Adviser, National Institute of Public Health, Slovenia

Julien Goodman, Director, Agency for Public Health Education Accreditation (APHEA), Belgium

Alexey Goryainov, Head, Centre for Comparative Analysis of Medical and Health Law, Russian Federation

Stela Guvir, Head of Department, Public Relations and International Cooperation, National Agency for Quality Assurance in Education and Research, Republic of Moldova

Tanya Herfurth, Founding Board Member, Young Leaders for Health e.V., Germany

Peggy Honoré, School of Medicine and School of Public Health, Louisiana State University, United States of America

Camilla Ihlebæk, Public Health, Norwegian University of Life Sciences, Norway

Grzegorz Juszczyk, Director, National Institute of Public Health, National Institute of Hygiene, Poland
Ellen Kuhlmann, Health Workforce Section, Hanover Medical School, Germany and President, EUPHA
Maggie Langins, Senior Fellow, International Foundation for Integrated Care, United Kingdom
Lore Leighton, Managing Editor, Secretariat, ASPHER, Belgium
Marta Lomazzi, Executive Manager, World Federation of Public Health Associations (WFPHA), Switzerland
Alison McCallum, Director, Public Health and Health Policy, National Health Service, Lothian, United Kingdom
Karolina Mackiewicz, Executive Director, National Institute of Health (WHO Collaborating Centre for Healthy Cities and Urban Health in the Baltic Region), Finland
Sasha Marschang, Acting Director, EUPHA, Belgium
José Maria Martin-Moreno, Preventive Medicine and Public Health, University of Valencia, Spain
Michael Moore, Immediate Past President, Governing Council-Executive, WFPHA, Australia
Robert Otok, Director, Secretariat, ASPHER, Belgium
David Patterson, Principal, Health, Law and Development Consultants, Netherlands
Ellen Marie Paulssen, Senior Adviser, Social Determinants, Norwegian Directorate of Health, Norway
Jürgen Pelikan, Director, Institute of Public Health (WHO Collaborating Centre for Health Promotion in Hospitals and Health Care), Austria
Bosse Pettersson, Honorary Board Adviser, Executive Board, EuroHealthNet, Sweden
Jeanine Pommier, Senior Expert in Pedagogy, Public Health Training, ECDC, Sweden
Salman Rawaf, Director, Department of Primary Care and Public Health (WHO Collaborating Centre for Public Health Education and Training), Imperial College London, United Kingdom
Graham Robertson, Secretariat, International Union for Health Promotion and Education (IUHPE), United Kingdom
Gro Saeten, Municipal Planner and Public Health Adviser, Municipality of Rana, Norway
Milena Santric-Milicevic, Institute of Social Medicine, School of Public Health and Health Management, Faculty of Medicine, University of Belgrade, Serbia
Cedric Slock, Consultant, Secretariat, ASPHER, Belgium
Tony Smith, Centre for Leadership in Health and Social Care, Sheffield Hallam University, United Kingdom
Irina Son, Deputy Director of Scientific Research, Federal Research Institute for Health Organization and Informatics, Ministry of Health, Russian Federation

Farhang Tahzib, Chair, Public Health Ethics Committee, Consultant in Public Health, Faculty of Public Health, United Kingdom

Vladislava Talanova, Research Assistant, University of Neuchâtel, Switzerland

Stephan Van den Broucke, Psychological Sciences Research Institute, University of Louvain, Belgium

Carmen Varela Santos, Head of Section, Public Health Training, Public Health Capacity and Communication Unit, ECDC, Sweden

Milena Vasic, Institute of Public Health, Serbia

Anne-Catherine Viso, Deputy Director, International Association of National Public Health Institutes, France

Dejana Vukovic, Institute of Social Medicine, Faculty of Medicine, University of Belgrade, Serbia

Tetiana Yurochko, Head of Department, School of Public Health, National University of Kyiv-Mohyla Academy, Ukraine

Dineke Zeegers Paget, Executive Director, EUPHA, Netherlands

Observer

Naim Jerliu, Assistant Professor, Faculty of Medicine, University Clinical Centre, Kosovo (in accordance with United Nations Security Council resolution 1244 (1999))

World Health Organization

Headquarters

Jack Fisher, Consultant, Global Coordination Mechanism on Noncommunicable Diseases

Ann-Lise Guisset, Technical Officer, Services Organization and Clinical Interventions

Rüdiger Krech, Director, Health Systems and Innovation

Regional Office for Europe

Danielle Agnello, Consultant, Public Health Services, Division of Health Systems and Public Health

Sampreethi Aipanjiguly, Communications Officer, Division of Health Systems and Public Health

Olga Aleksandrova, Special Service Agreement, WHO Country Office in Ukraine

Nurlan Algashov, Technical Officer, Public Health Services, Division of Health Systems and Public Health
Maria Emilia Aragon de Leon, Consultant, Division of Policy and Governance for Health and Well-being

Cécile Bailey, Programme Assistant, Public Health Services, Division of Health Systems and Public Health

Clayton Hamilton, Technical Officer, Public Health Services, Division of Health Systems and Public Health

Gabrielle Jacob, Programme Manager, Human Resources for Health, Division of Health Systems and Public Health

Hans Kluge, Director, Division of Health Systems and Public Health

Martin Krayer von Krauss, Senior Adviser, Public Health Services, Division of Health Systems and Public Health

Anna Cichowska Myrup, Programme Manager, Public Health Services, Division of Health Systems and Public Health

Natalia Piven, Technical Expert on Public Health, WHO Country Office in Ukraine

Cris Scotter, Senior Adviser, Human Resources for Health, Division of Health Systems and Public Health

Ryoko Takahashi, Technical Officer, Division of Information, Evidence, Research and Innovation

Francesco Zambon, Coordinator, Investment for Health and Development in Healthy Settings, Division of Policy and Governance for Health and Well-being
The WHO Regional Office for Europe

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**World Health Organization Regional Office for Europe**

UN City, Marmorvej 51, DK-2100 Copenhagen Ø, Denmark  
Tel: +45 45 33 70 00  Fax: +45 45 33 70 01  
Email: eurocontact@who.int  
Website: www.euro.who.int