On Tuesday, Fellows hosted three unique case studies on health promotion and health communication from diverse audiences and stakeholders. One case study session focused on the concept of community connectedness. A key theme that emerged was the important task of fostering a sense of belonging among members of a community. The group discussed how sections of society could be experiencing disease due to inequalities, poverty and lack of opportunity. Such societal disease might manifest itself through exclusion and desperation. A key challenge was how to create a sense of hope and belonging through a long-term vision and effective partnerships. The group discussed a number of positive examples of initiatives at the community level while recognizing the challenges of a widespread approach.

Another case study featured examples from both Wales and India. In the case of Wales, Fellows studied the impact of Adverse Childhood Experiences (ACEs) on individual and community health and wellbeing, considering the impact of the “First 1000 Days of Life” within that context. These first 1000 days were discussed to be an important time frame in attempting to break a cycle of harm. For India the group was given a government perspective on the severe problem concerning infant and maternal mortality in the country. The Fellows discussed some concrete policies implemented in India, including a direct cash transfer for institutional delivery to incentivize mothers to opt for the generally safer environment of institutional rather than home delivery. The third case study focused on housing and the links between housing developments and structures and health. One of the cases presented related to poverty and housing issues in Portland, OR. One Fellow remarked: “We don’t just not have housing for the homeless, we don’t have housing for anyone.” Questions were raised on how to make housing part of health policy, not just housing policy and to what extent it should be part of health care. Another example in the housing case study focused on how to build better homes that can improve health and not create “time bombs” that can lead to unintended consequences due to poor housing development planning. One Fellow concluded: “There is a choice of people living in slums or planning better housing solutions. If we don’t lobby, we’ll only value real estate from a profit point not from a health perspective.”
Session materials now available online

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