Intersectoral collaboration

Public- and private-sector stakeholders from across society are all playing a role in fighting hypertension. Given its multifactorial causes, no single player can deal with cardiovascular disease (CVD) alone. CVD is the world’s leading cause of death and to truly address this burden, health authorities need to take a population approach to lower overall cardiovascular (CV) risk, rather than focus on treating the condition when symptoms arise.

It is essential that public and private sector stakeholders from across society – spanning health, urban planning, finance, technology, education, work, insurance, food and agriculture – all play a role. The main “end users” (health providers and patients) must also participate through relevant professional and patient associations.

Accordion heading
Key interventions and indicators
Accordion Item
Key interventions (taking the example of hypertension as prime risk factor for CVD)
Accordion body

- Articulate the overall goal for a population health approach and align all partners behind it. Identifying common challenges, mutual goals beyond health and joint benefits can help foster further engagement between sectors
- Determine the expertise and resources needed to achieve the goal and conduct a mapping to identify the best fitted partners – involve a combination of public-private stakeholders and end-users in a design thinking process to co-create solutions
- Complete a situational assessment at baseline, using questionnaires, interviews, focus groups, workshops, field observations (with patients, health professionals, health center managers, city authorities) to start outlining the most important solutions
- Bring investors together around similar objectives to bundle and align social investments for bigger impact

Key performance indicators
Accordion body

The indicators below can come from a variety of sources (primary and secondary data collection, national or regional surveys and databases).

Intersectoral collaboration

- Establishment of a multi-sector steering committee by city health authorities
- # of partners from sectors and disciplines other than health (education, IT and communication, food and agriculture, transport and mobility, mobility, transport, sports or urban planning sector, etc.)
- # of workplace programs
- # of patient associations/representatives participating in the steering committee
- # of professional associations/representatives participating in the steering committee
- # of steering committee meetings where >80% of the partners participate
- % increase in availability of healthy food options across the city

Improvement of physical exercise and nutrition in schools

- Integration of CV risk factor education in national school curriculum
- % of schools offering nutrition courses
- % of schools offering physical activity courses
- % of school children that are overweight or obese based on WHO child growth standards
- % of available snacks with high nutritional value based on WHO regional nutrient profile models
- % of snacks containing permitted vs. non-permitted foods according to WHO regional nutrient profile models
Highlights

CARDIO approach – Intersectoral collaboration

Additional external resources

Reference documents and literature

- Kazibantu research and publications
- Background and evaluation design of a community-based health-promoting school intervention: Fit Lifestyle at School and at Home (FLASH). BMC Health Services Research, 2019, 19:784
- Multisectoral and intersectoral action for improved health and well-being for all: mapping of the WHO European Region - Governance for a sustainable future: improving health and well-being for all: WHO 2018

Previous pillar: Leverage data and digital technology

Beside the collection and use of real-time data, digital technology provides an array of opportunities to transform the way health and care are delivered.

Next pillar: Ensure local ownership

Local authorities and local partners should own the design, implementation and monitoring of interventions and solutions to fight hypertension and cardiovascular disease.

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