



Healthy Cities of Russia priorities for the Association members

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Why do we pay much attention to noncommunicable diseases?

NCD account for 60% of all deaths and 44% of premature deaths

Death ate due to NCD is double that of all communicable diseases including AIDS, TB and malaria combined

15 mln deaths caused by NCD are registered annually in people under 70

85% of them happen in developing countries

Each year NCD kill 40 mln people

The factors contributing to NCD spread, include chaotic urbanization, expanding unhealthy life style and global ageing

And besides, this is unfair!

The difference in life expectancy, for instance, between the richest and the poorest countries is over 40 years

Countries with low income feature a high level of disease incidence and premature death

A child born in Japan or Sweden, for instance, may live beyond 80; in Brazil – 72; in India – 63, and in some poor countries – no more than 45.

COVID-19 pandemic: this is what has been found so far

- Lack of people's trust to information about COVID-19, which is due to too many diverse information sources, including from opinion-leaders of all levels.
- Poor preparedness of the healthcare system and other services for managing emergency situations.
- Lack of trained staff in practical healthcare, many teachers and doctors in their retirement age, who have to stay self-isolated.
- Need to ensure rapid supply of protective wear in the beginning of the pandemic and lack of tests to detect COVID-19.
- Lack of preparedness in employees aged over 60 in work with advanced communication channels.
- Lack of preparedness of the available communication networks for a large influx of users at the same time.
- Need to incorporate healthy urban planning principles in construction & development solutions (too small residential facilities, obstructed access to medical institutions, lack of areas for safe leisure activities, etc.).

Preventive medicine: more than a few issues

Poor status of socio-economic health determinants



- Poor health literacy among common people
- Poor compliance among common people



Preventive medicine: it's all about staff!!!

- Lack of medical staff & insufficient training
- Lack of motivation (e.g. proper funding to maintain health schools)
- Lacking competence among medical employees in NCD prevention





Preventive medicine: Believe or Not Believe? That is the question!

• Lack of trust in the healthcare system among common people

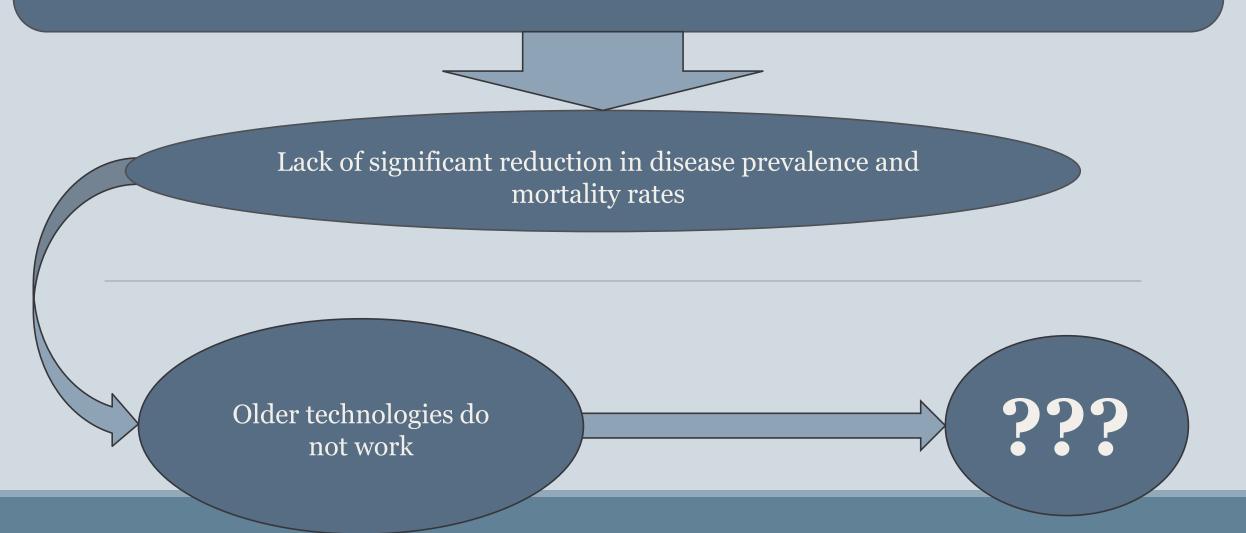
• Low demand for health centers and preventive (incl. screening) measures





- Low health literacy among common people
- Low compliance
- Negative status of socio-economic health determinants
- Lack of people's trust in the healthcare system

- Lack of trained medical staff
- Lack of due funding for health schools
- Lack of competence among medical staff in NCD prevention issues
- Lack of demand for health centers and screening measures



Preventive medicine: what are we to do?

- Create an impact on socio-economic health determinants
- Arrange inter-sectoral cooperation on health issues
- Offer salaries based on efficiency criteria



 Launch programs on enhancing health literacy and compliance among common people





Measures to correct socio-economic health determinants (it takes the world!)

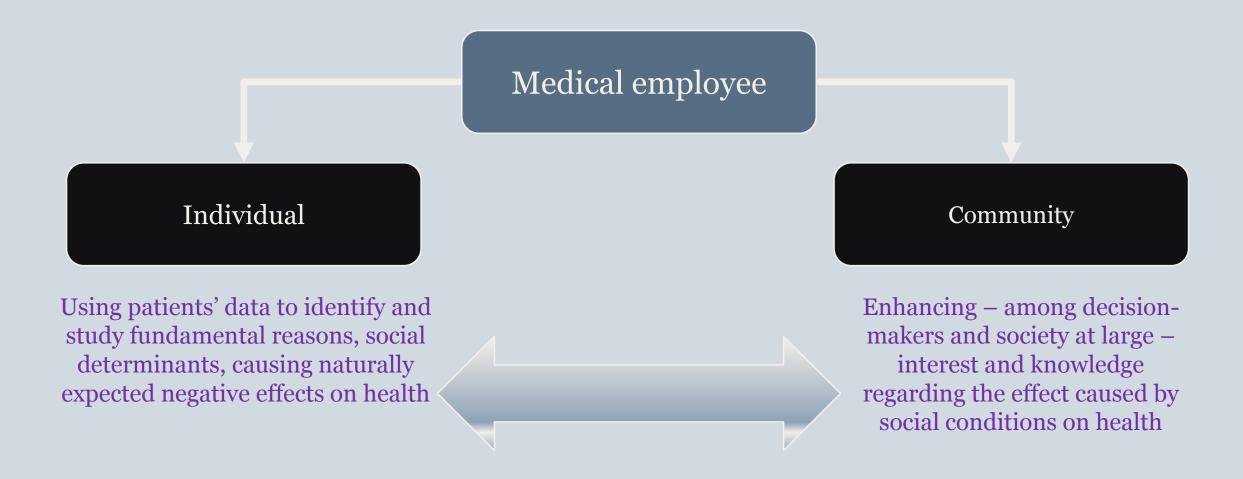
✓ Coordinated activities by public healthcare and primary medical & sanitary aid, carried out with various public sectors (e.g. WHO's Healthy Cities international project)





Bambra C. Gibson M., Sowden A. et al. Tackling the wider social determinants of health and health inequalities: evidence from systematic reviews. // J
Epidemiol Community Health. 2010. 64. P. 284–291

What role?



Time to be tougher and exercise some power!

- ✓ Enhanced funding for sectors like living conditions, education, early development & child care, employment, legal literacy, mass media, transport infrastructure development, agriculture
- ✓ Promotion of inter-sectoral programs aimed at improving health with an unlimited number of major partners





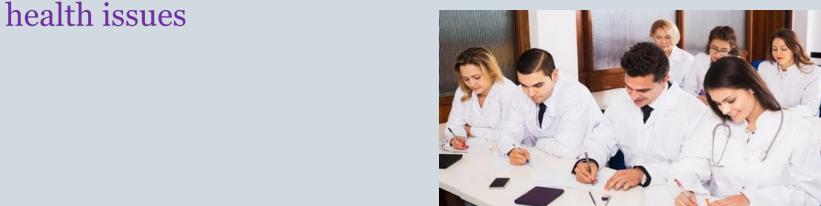
Health literacy – how to improve it?

- Enhancing potential required for spreading information meant for a specific audience
- · Repudiation of misinformation, whatever the source
- Establishing social environments and strategies promoting health literacy
- Orienting information at specific target groups (targeting)
- Segmenting audiences
- · Using entertainment methods in combination with education
- Support forums for patients sharing similar diagnosis
- Mobile apps containing medical recommendations
- Medical vocabulary in an easy language, which is publicly accessible on the Internet, as well as apps for mobile phones



Health literacy – how to improve it?

- · Planning and introduction of medical services, available, among others, to people with low HL level
- · Aiming at high competence in HL issues among medical employees
- Arranging continuous knowledge update in HL issues, both for medical employees and common people
- · Creating and adjusting mechanisms for inter-sectoral cooperation in enhancing HL, including regular monitoring people's health literacy levels
- Studying people's opinion on availability of medical services and information about



Tobacco-free healthy cities

On June 1, 2014, the Federal Law № 15-FL ON PROTECTING PEOPLE'S HEALTH AGAINST TOBACCO SMOKE AND TOBACCO USE EFFECTS (of 23/02/2013) took effect in Russia

- Introducing ban on smoking tobacco in certain areas, inside buildings, and in certain facilities
- Pricing & taxation measures aimed at reducing tobacco demand
- Legalizing medical assistance aimed at discouraging people from tobacco smoking
- Treating tobacco dependence and effects of smoking
- Restrictions on tobacco trade

Tobacco-free healthy cities project

- Summarizing & scaling practical experience accumulated in municipalities-members of Association, aiming to stop tobacco smoking, development and introduction of single principles for municipal policy in local self-government, aimed at reduction of tobacco use
- The project allows promoting mechanisms for inter-sectoral cooperation, involving common people in monitoring health indicators, as well as running an efficient prevention of NCD risk factors, namely tobacco smoking



Quantitative outcomes



- 24 municipalities of 7 federal regions of Russia involved
- 122 monitoring inspections carried out by volunteers jointly with respective authorities
- 505 protocols written registering violations detected via the inspections
- 11 seminars delivered for volunteers and NGOs in 6 municipalities
- 517 persons attended the seminars
- 17 inter-sectoral committees (working groups), the purpose of which is coordination of local self-government and promotion of intersectoral cooperation while creating healthy living conditions
- Over 500 persons attended special working meetings in various regions of Russia
- 7 municipalities launched helplines and forums on their websites
- 7 press-conferences held (Privolzhsky District; Stavropol; Nevinnomyssk, Cherepovets; St. Petersburg).

GATS Global Poll data on smoking in Russia (2009-2016)

- Tobacco smoking prevalence rate went down by 9% (40% to 31%)
- Smoking among males went down by 10 %
- Smoking among females went down by 8 %

Source: Ministry of Healthcare

What can be done?

- 1. Regular monitoring of public health indicators and analysis of public health status in the region.
- 2. Train specialists in public health, including from among those not involved in medicine.
- 3. Create an impact on public health policy in the region, which is to be done through representatives in official and non-governmental bodies
- 4. Develop partnerships and joint efforts of all structures aiming at promoting public health.
- 2. Design guides on public health and medical prevention & health life style.
- 3. Arrange regular exchange of information on current situation with public health, advanced technologies for promoting public health, with other universities and partners from among non-medical areas.
- 4. Develop and submit joint applications to launch projects in the area of public health.

What issues are, and will be, relevant?

- 1. Staff supply and improvement in healthcare
- 2. Medical education in view of globalization
- 3. Quality and accessibility of medical services
- 4. NCD risk factors monitoring
- 5. Medical prevention & health life style

What issues have become more urgent?

1. Healthcare system sustainability & their readiness to tackle emergencies (pandemics, etc.)



2. Climate change





Health literacy & arranging channels for delivering evidence-based information to common people (communication issues at the global level).

What can be done?

- ✓ Improve the status of medical employees, protect their health, eliminate shortage of staff
- ✓ Use health literacy enhancement programs to inform people about the importance of sanitary & anti-epidemic measures, as well as public and personal hygiene
- ✓ Develop rapidly, at all types of companies and agencies, a step-by-step algorithm for actions in case of various emergencies, involving epidemiologists, and strictly follow those instructions in view of respective situations
- ✓ Identify channels for internal & external communication on the most important areas of vital activities
- ✓ Envisage development of emergency scenarios of various degrees of complexity. Develop an economic plan for the educational organization survival through periods of lowering income from profitable activities.
- ✓ Carry out continuous and consistent online training for the employees.

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