



Healthier & Fairer Futures UK Summit - Commercial Determinants of Health

29th September 2021

Event outcomes report

1) Introduction

The consumption of highly profitable but unhealthy commodities (such as tobacco, alcohol, and foods high in fat, salt and/or sugar) is a key contributor to the development of preventable chronic diseases. Complex systems of production, distribution, and promotion of these products by unhealthy commodity industries (UCIs) drive their consumption and the ill-health and inequities associated with them. The economic interests of these large corporations, and their strategies and tactics to influence policy and the public, often conflict with public health goals.

Although conceptually the 'wider determinants of health' can be seen to incorporate the 'commercial determinants', this focus has only recently begun to gain widespread attention. To build a more inclusive and sustainable economy, we need to ensure that future profits are not made at the expense of healthy lives, wellbeing, and the environment.

This event, a first for Yorkshire and the Humber, led by the regional Association of Directors of Public Health (ADPH) and SPECTRUM consortium, and supported by the Faculty of Public Health, brought together more than 150 people from a range of organisations across the country including health, local authority, academia and voluntary and community sector. The aims of the event were to share and discuss the impact of large unhealthy commodity corporations and their products on the health and wellbeing of our population; and to begin conversations about how we can create a healthier and fairer future for all.

Members of SPECTRUM, the Non-Communicable Disease Alliance, Action on Smoking and Health, Institute of Alcohol Studies and Bristol City Council shared evidence, experiences and learning with delegates in order to provide them with a deeper knowledge and understanding, with potential to stimulate and enhance effective health improvement practice across the system.

2) Evaluation approach and key outputs

Evaluations were conducted via pre- and post-Summit surveys. Aims were: - to better understand the level of existing knowledge on the subject, to ensure that the event fulfilled expectations, and to gauge appetite for planning a programme of work regionally and locally. A Mentimeter interactive survey was conducted toward the end of the session to capture some snapshot thoughts and responses.

A total of 100 responses were received for the pre-evaluation, 38 for post-evaluation, with 63 people taking part in the Mentimeter survey.

This feedback is being used to inform the next steps required to progress this programme, as well as for practical improvement of future events.

The evaluation surveys compared knowledge and awareness levels before and after taking part. These are illustrated below.

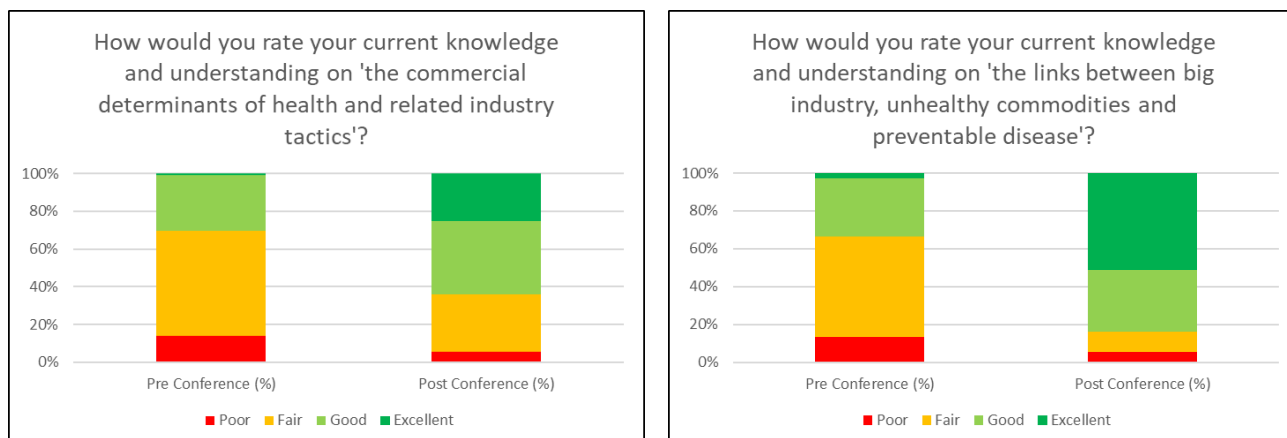


Figure 1: Pre- and post-summit knowledge and understanding

In addition, attendees reported a greater degree of relevance of the topic to work programmes following the summit than previously (68% vs 45% rated this as 'very relevant'), with 92% rating it a 4 or 5 on a scale of 1-5 on follow up.

Reported desire to get involved with work on this agenda increased from 42% to 73% post-summit.

3) Reported current activity

The post-summit evaluation survey asked: 'What actions are being taken in your organisation already which could support this agenda?'

Most commonly, attendees cited involvement in the development or application of policy around High Fat, Salt and Sugar (HFSS) or Healthy Weight/Inactivity and related advertising, and a 'compassionate approach to weight', challenging the traditional narrative.

Next popular answers related to leadership and influence, supporting a focus on 'the causes of the causes', and developing resources to that effect.

Collaboration and partnerships, especially with external agencies and alliances, was also mentioned frequently.

Other less noted but significant actions included: a Marmot city proposal, funding and programmes focused on priorities such as tobacco and healthy living, planning for health via Healthy Places programme working, supporting community action by providing of alcohol licensing data measures, and having clear conflict of interest policies and statements in place.

4) How the summit influenced intentions

Feedback on next steps and possible actions generated the following common themes throughout:

- **Collaboration**
- **Awareness-raising, education, and empowerment**
- **Challenge**
- **Transparency**

These are reflected in the following summaries.

We asked via the post-summit survey: *‘What one thing will you do because of what you have learnt today?’*

Many of the answers given had commonalities with answers to the Menti question *‘What personal change has today inspired you to make?’*

The responses given, in order of popularity, included:

- Spreading the word, communicating, and debating the subject, raising awareness and calling out practices with a negative impact on health – at work and with family and friends
- Linking up with colleagues, collaborating, networking, connecting
- Looking behind the headlines, being more cautious, and looking for evidence behind the narratives
- Feeling more motivated and re-energised, intention to be bold and keep pushing forward, working upstream
- Reflect on priorities and refocus action – taking back to teams and leaders - and discussing
- Finding ways to work across portfolio areas and priorities with common solutions

Some responses revolved around scrutinising current approaches to improve clarity and transparency – such as reviewing signposting and resources, research partnerships, connections to industry-funded bodies and sources of funding – as well as asking ‘who is involved/at the table’ in partnerships.

Examples of action to influence the policy context included joining existing alliances (such as alcohol) and getting involved in lobbying at local and national level, to influence and challenge.

Some attendees mentioned changing personal behaviour and looking at influences on that, closer to home – as well as ‘standing up for my community’.

5) Questions about potential action

The Mentimeter survey asked, *‘What should our next good step be in order to move this programme forward?’*

The suggestions which were overwhelmingly popular centred around **collaboration** (including connection, sharing of practice and solving problems together) and wider **awareness** (across the public, local authority and system).

There was an emphasis on the need to build relationships across alliances, public health directorates and integrated care systems, with an organisation leading this. There was request for this to cut across organisations. Lively discussion and chat also raised the possibility of ‘pooling resources and influence’.

The call for more awareness-raising around the tactics of unhealthy commodity industries included wider public awareness via joined up communications and proactive messaging.

In descending order of popularity, other responses included:

- Lobbying and challenging
- Focus on biggest gaps for action, innovation and implementation
- Toolkits, support materials, and simple key messaging for local authority use
- Skills development around public health advocacy and knowledge sharing
- The need to embed in local plans and policy
- National leadership
- Further events

Finally, we asked: *‘What regional support would you welcome to aid work on this agenda?’*

