

Réseau
français
Villes-Santé

Lessons learned from the FR HC network on the pandemics

FEEDBACK FROM THE FR HEALTHY CITIES NETWORK

Different steps to gather knowledge on cities' pandemics management:

1/ National study on how cities are handling the pandemics, first lessons learned (Fall 2020)

2/ Online 'exchange of practices sessions' between November 2020 and April 2021

3/ Annual French Healthy cities conference in Rennes on « Healthy cities in times of pandemics: learning from COVID19 experience, build on the future » in November 2021

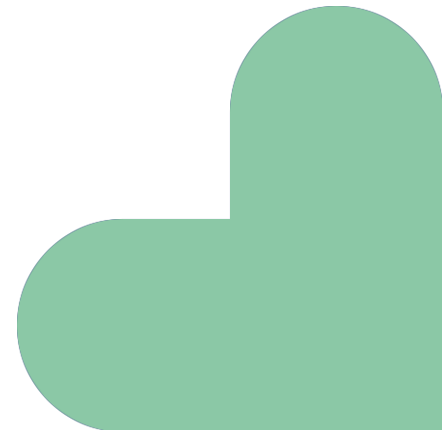
4/ Working group on 'Mental Health in times of pandemics and post-pandemics'



FIRST REACTIONS (MARCH 2020)

Sudden change, and immediate role of cities to :

- **Coordinate**/articulate actions to answer immediate needs (vulnerable groups, information transfer) and provide some information
- **Protection material management & logistics**
- Maintain **social linkages for those in need of daily support** and who need to stay at home: food, day-to-day products, medicines, etc.



FIRST REACTIONS (MARCH 2020)

BUT at state level, focus on crisis management :

- there's no room anymore for health promotion**
- information limited to 'no contact', 'isolation'**
- mental health completely set aside on the first 1,5 year**



STRENGTHS from cities

« We know the **stakeholders** from our territory »

« We have tools and internal skills on support to population **mental health** »

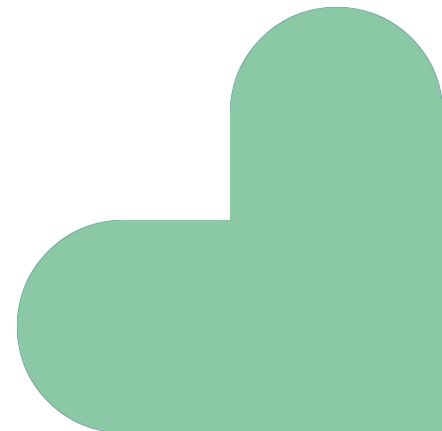
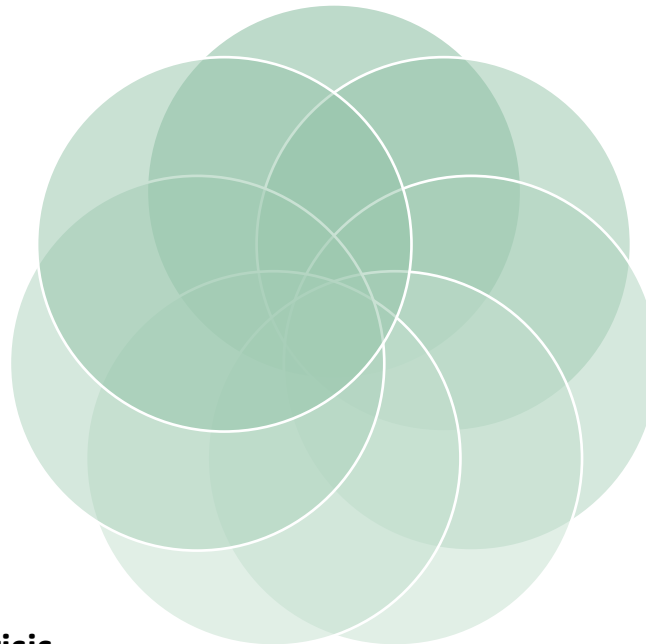
« **We know how to work together**, what are our strengths and complementarities » internally and externally

« We have **internal skills** that can rapidly be used (health, social, environment)

« **We know how to reach the population** from our territory»

« We have a '**crisis management mode**' in our city to know how to work with partners in such situation'

« We have dedicated tools to get informed on the situation of **vulnerable people** of our territory »



STRENGTHS from cities

« We know the **stakeholders** from our

But :

Are they legitimate to act? To act as a coordinator of health organisations?

Which actions need to be prioritized? How to finance them?

How to efficiently coordinate with local representatives from the State, and with the regional Healthcare authority?

« We have a '**crisis management mode**' in our city to know how to work with partners in such situation'

« We have dedicated tools to get informed on the situation of **vulnerable people** of our territory »

Examples from the vaccination centers management

- ⇒ **Cooperation between city services and the hospital** to create the vaccination centers
- ⇒ **Who does what?** Responsibilities were not always clear, and limits are blurred
- ⇒ **Public-Private cooperation** : Articulate public services, hospital, doctors, other stakeholders (pharmacists, laboratories, etc.)



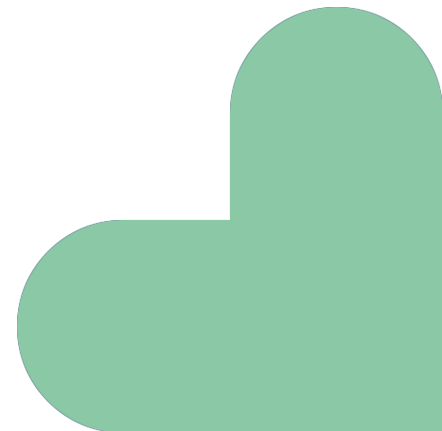
ROLE OF CITIES on vaccination centers and crisis management as a whole

⇒ **Public places and spaces management**

⇒ **Reach the most vulnerable** ⇒ Mobile vaccination services, transport services, provide social & financial support

⇒ **Communication to the population + to the professionals** > health(determinants) literacy? Digital divide?

⇒ **Helplines, mobile teams, etc.**



And some perspectives...

Some reflections:

- ❑ Local health observatories and profiling is key to better know the population's state of health and diversity > **proportionate universalism**
 - ❑ How to balance between massive **vaccines and information strategies**, and local, targeted strategies (thanks to local health surveillance tools)?
 - ❑ **How to better mobilize the general population ?** Limit 'fear' or 'guilt' strategies to better deploy 'responsabilisation' strategies facing the risk, in order to limit the pandemics fatigue
 - ❑ **Challenge of acting on health determinants** (housing, natural environment, social environments, food, physical activity, etc.) **and improve mental health capacities**
- => Limit as much as possible closing schools, cultural places, etc.





Thank you !

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