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## **GNLC/PASCAL Webinar: *The challenge of Health and Well-being in Learning Cities***

### **UNESCO Institute for Lifelong Learning and PASCAL International Observatory**

On 16 December 2020, the UNESCO Institute for Lifelong Learning (UIL), together with the PASCAL Observatory, hosted the sixth webinar of the series entitled “Learning Cities’ COVID-19 recovery: from research to practice”. This session focused on the challenge of Health and Well-being in Learning Cities

#### **Opening Remarks and Welcome**

An opening remark was given by the moderator for the session, Ms. Christina Drews, Programme Specialist, UNESCO Institute for Lifelong Learning

There followed welcoming remarks from, **Mr Raúl Valdés Cotera**, Team Leader, UNESCO Institute for Lifelong Learning, noted that the role of health had been a core focus for the Global Network of Learning cities, but no-one could have in 2019 anticipated the challenges to link education and health that had arisen this year because of the pandemic. He pointed out that the closure of schools and universities had led to some 1.6bn students being out of education, and that this had amplified existing social and economic exclusions. However, the pandemic had shone a light on the role of education as a pillar for every society, and it was clear that both education and health were central foci of the UN’s 2030 agenda for sustainable development. He spoke also of the important role of cities in health education as we come out of the crisis.

#### **World Health Organisation**

**Ms Monika Kosinska**, Programme Manager, Governance for Health, Regional Focal Point for Healthy Cities Division of Policy and Governance for Health and Well-being of World Health Organization, Regional Office for Europe gave the opening address of the webinar. She emphasised the criticality of cities as epi-centres of the pandemic and their being at the forefront of recovery. Despite their heterogeneity health is a common challenge for all cities, and increasing inequalities between cities in the same country and between countries in a major issue. She emphasised the importance of networks, including the interchange between the Healthy Cities Network, and GNLC. Emerging from these interchanges, the importance of learning (for resilience, well-being, mental health and inclusion) has come to the fore, and the challenge will be to maintain this development. She described ‘education as an inoculation against deprivation’, and concluded by stressing the importance of cities as advocates for learning in future.

#### **City of Bogotá, Colombia**

**Ms Sara Valencia**, Director of Districts Research Centre for Health Education, shared experiences from her city as it related to education, health and well-being, focusing both health professionals and informal learning of citizens in the community with regard to health. She described three activities, the first being the use of art as a vehicle to address mental health issue, through the use of a ‘time capsule’ use to capture emotions and feelings of people in multi-media form.. The second related to health promoters in the community people who were involved in people on a daily basis for instance in the delivery of food or in drug stores, who facilitated informal learning of healthy behaviours through their day to day activities. The third related to health professionals, and how they were being

trained to deal with patients. Using a virtual education platform some 35,000 people have been trained in this regard.

### **City of Duhok, Iraq**

**Mr Azad AbdulJabar Haleem**, Vice-Manager of Hivi Paediatric Teaching Hospital, Duhok Head of Paediatric Department, College of Medicine/University of Duhok provided a summary of how the city of Duhok had developed as a Learning City since 2012, and the particular challenge of a high influx of Syrian refugees, mainly aged less than 18 years in age. He reported on the strategic plan for health in the city, including addressing the needs of internally displaced persons as well as external refugees. He also emphasised that the work of the learning city was not only in the field of health, but also in agriculture, infrastructure, environmental protection, planning and cultural activities including heritage and protection of Mesopotamian historical ,and tourism

### **Centre of Sustainable, Healthy Learning Cities and Neighbourhoods, University of Glasgow**

**Mr Rich Mitchell**, Professor within the MRC/CSO Social & Public Health Sciences Unit, University of Glasgow and Co-Investigator in the Centre of Sustainable, Healthy Learning Cities and Neighbourhoods in his presentation vividly illustrated that some aspects of cities hurt us and some keep us well. Furthermore some neighbourhoods in cities have stayed the same and some have changed considerably over time. In focusing neighbourhoods, he argued that they are not simply a crucible where life happens. Rather, they are an integral part of our social and health systems, shaping them and shaped by them. He spoke of a dynamic city system without independent variables, and that it was impossible to separate health and education. He reported data on the positive association between years of education and health, citing the example of Buenos Aires. Other data taking from his research showed the remarkable lack of change in terms of the geographic location of poverty and deprivation in London, and its relation to mortality from the late 19<sup>th</sup> to the late 20<sup>th</sup> century. He completed his presentation with suggestions of levers to develop the learning city based on potential health interventions informed by data-driven research.

### **Questions and answers**

The followed a series of questions that were posed to the panel by Ms Drew, which were responded to by panellists.

*What are the experiences of the panel regarding the concept of neighbourhood, health and well-being from the international perspective?*

Ms Kosinska responded saying that the challenges that we face as communities is pushing us to a common approach across education and health, which are very synergetic with each other. Co-operation between the two sectors is fundamental, and mutual benefits are real, and when one sector benefits so does the other. The COVID-19 crisis has changed rhetoric into real actions and this has been a way to succeed to build a better future.

*What is the need for Media Literacy Competencies amidst the pandemic restrictions in Bogotá?*

Ms Valencia responded that the city tries to understand the difficulties that students have in making use of technologies so that they can provide training. If they identify that people in communities don't have access to technology or have difficulties in their use, they use different strategies. The city has found a barrier that some students don't have access to devices so has designed strategies at the local level to facilitate the donation of devices.

She also commented on the challenges at the beginning of the pandemic of centralising information and data for the public. The city therefore developed a web-based observatory of health information, freely available to citizens who can observe how and why the city makes decisions on a daily basis.

*How do you try to interconnect education and the health sector in your city?*

Mr. Haleem reported that during the pandemic it has not been very easy to educate health students using the online platforms. His university has tried to organise small groups of students coming to the hospitals to get hands-on training, but they were infected of Covid-19. The process of learning has not been really effective because they observe that many students psychologically are not well, and they are anticipating that after the pandemic we will have many people psychologically affected by the virus and its effects. He said that they have replan and involve more people in building a learning city. He argues that they should focus more on mental health and on our children.

*What strategies or options that you can suggest for cities in terms of how to improve health and wellbeing?*

*Is there any data on how education policies have changed across this year? How can adult education policies today impact future generations?*

Mr. Mitchell responded that understanding the connection between phenomena is very important. One of the problems in the UK is that policy is fragmented in reality, and the country does not have a 'Ministry for Everything'. The issue of social care is important as is to connect generations to each other, and targeting our interventions around such options. This idea of connection from generation to generation, and the idea of neighbourhoods for the recreation of society is very important in reducing inequalities. His research connects to education at school level rather than adult education, but he run models looking at how many years of education people have had as a predictor of their health and wellbeing, and he is seeking to understand how neighbourhoods are associated with differences in attainment.

He was optimistic regarding some experiences of having lived through a pandemic. It has brought an awareness hygiene, mental health, viruses, the need for exercise and social interactions are important. This has created an increased awareness that should not be overlooked.

Mr. Osborne added that the issue of learning is often relegated in urban discussions and that adult education and education beyond schooling seldom mentioned in policy documents at city level.

Ms. Lido, Professor of Psychology and Adult Education at the University of Glasgow said that we are increasingly aware that mental health is just like physical health. We all face mental health challenge, and we are now talking more about removing the stigma on anxiety or depression. During the lockdown we have seen that people support each other in many ways and that this collaboration between individuals is important. I think that having the conversations about the importance of anxiety or depression is a very important thing that has emerged during the pandemic.

### **Closing remarks**

**Mr Peter Kearns**, PASCAL Board Member from Brisbane, Australia made four main points. Firstly he pointed out the need to integrate across domain areas that are traditionally siloed as exemplified by the Bogotá case of art and health. Secondly he emphasised the importance of neighbourhoods, citing some examples from Limerick and Cork, but stressing the need for more work in this area. His third

point returned us to the issue of mental health and cited an Australian enquiry that had recently pointed out that mental was a productivity as well as a well-being issue. Finally he referred to the newly formed OECD WISE centre, concerned with the link between Well-being, Inclusion, Sustainability and Equal Opportunity, which he reported that PASCAL would be working with.

**Mr Mike Osborne**, Professor of Adult and Lifelong Learning. Director of Research, School of Education, University of Glasgow and Director of PASCAL made some closing remarks, summarising many of the main issues made by presenters and thanking all participants for their excellent presentations. **Mr Raúl Valdés Coterá** offered final thanks to all involved.

*This summary was written by Professor Michael Osborne, PASCAL Director (Europe), University of Glasgow, supported by Mr Sergio Hernandez Mendoza University of Glasgow/PASCAL Observatory.*