Scaling up promising practice to promote healthy urban food, waste and ecosystems in east and southern Africa

Regional workshop
REPORT

Delegates to the meeting

May 23-24 2024
Nairobi, Kenya

Regional Network for Equity in Health in East and Southern Africa (EQUINET)

through Training and Research Support Centre

with support from Medico Int and OSPC

Table of Contents

Summary: key messages and priorities for follow up…… 2
1. Background and objectives…… 2
2. Opening, introductions and overview…….. 3
2.1 Opening remarks…… 4
2.2 Overview of issues and learning from work to date……. 5
2.3 Discussants on work on urban health and assessing health impacts 7
3. Features of practice for and institutionalising scale up……. 8
3.1 Group discussions on key features for scale up…… 8
3.2 Round tables on issues for scale up from case study experiences 12
3.3 Further experiences from HIA and urban health case study work 14
4. Developing policy and practice recommendations…… 15
4.1 Taking forward practice and change nationally and regionally… 15
4.2 Recommendations from the work for policy dialogue…….. 18
4.3 Local authorities as a vehicle for scale up……. 20
5. Moving forward and tracking progress and outcomes……. 21
5.1 Theory of change driven proposals for scale up of integrated practice 21
5.2 Communicating the work and proposals to different stakeholders 24
6. Closing the two day meeting……. 26
Appendix 1: Programme…… 27
Appendix 2: Delegate list…….. 29

Cite as: EQUINET, TARSC (2024) Scaling up promising practice to promote healthy urban food, waste and ecosystems in east and southern Africa, Report of an EQUINET Regional Workshop, May 23-24 2024, Nairobi, Kenya

Acknowledgements
The meeting was organized and facilitated by the Training and Research Support Centre for EQUINET. Acknowledgments are conveyed to all participants of the meeting for their active and invaluable contributions, to those in the opening and closing sessions, those presenting work, in panel discussions, and facilitating and reporting on group discussions. Thanks to rapporteurs of discussion sessions for their notes. This meeting report was prepared by TARSC. Thanks to those whose photographs are used in the report, acknowledged in each of the photo credits. Thanks to ECSA Health Community for longstanding association on and contributions to this work. Thanks to Medico International and Open Society Policy Centre, TARSC and all delegates for resource support, TARSC personnel for administration support and Palacina Hotel staff for hosting us.

Summary: key messages and priorities for follow up

Delegates at the EQUINET Regional Meeting on urban health in east and southern Africa (ESA) (shown in the cover photo) on May 23 and 24 2024 in Nairobi, Kenya presented and discussed work implemented in countries in the region in 2023-24. The meeting reviewed issues relating to scaling up promising, climate responsive practice to promote healthy urban food, waste and ecosystems in ESA, together with experiences of health impact assessment to inform policy and planning.

With so much local practice underway, the task is to scale up and institutionalise promising practice. Learning from the wide range of work and promising practice underway, delegates made 9 recommendations, each with examples of practice to BUILD, ENABLE and AMPLIFY promising practice and policy on climate-responsive integrated healthy urban food, waste and ecosystems in ESA, viz:

To BUILD a healthy circular economy in food, waste and urban ecosystems, we recommend to

1. Design, plan for, incentivise, capacitate and reclaim urban spaces for urban resident food producers to implement various forms of innovative urban agriculture.
2. Establish through community, private, CBO and state actors 3R (reduce, recycle, reuse) waste management systems and link these systems to urban agriculture and to interventions for improved access to quality healthy urban food, as an alternative to ultra-processed and other harmful food products.
3. Invest domestically in technology research and development (R&D), supported by regional investment and technology transfer, and establish a supportive technology ecosystem for locally appropriate, climate sensitive technologies and infrastructures that build and enable links between food, waste and energy systems.

To ENABLE such integrated healthy urban food, waste and ecosystems, we recommend to

4. Capacitate and institutionalise the regular generation, analysis and communication of multiple forms of disaggregated, accessible relevant evidence, including from health impact assessment (HIA), integrating also perspectives from multiple stake-holders and affected communities, with active use of the evidence in decision making, monitoring and review.
5. Set up inclusive, sustained, multistakeholder forums to facilitate integrated food-waste-eco systems, with local government as a key convenor, and ensure relevant, accessible communication with stakeholders.
6. Implement ‘policy 3Rs’, that is Relook, Realign and Revise local, national policies and laws, and harmonise law and guidance regionally, to enable these key elements of healthy integrated urban food, waste, eco-systems; and build implementer capacities and stakeholder literacy, to regularly monitor and review/revise laws and to engage in policy processes locally, nationally and regionally.
7. Develop frameworks that will mobilise, harmonize and coordinate the allocation of budgets, pooled and blended funding, and other resources towards addressing risks, strengthening assets, and managing assessed costs, drawn from multistakeholder evidence and review.

To AMPLIFY such integrated healthy urban food, waste and ecosystems within countries and across the region we recommend to

8. Organise and connect in networks and link across local, national, regional and international actors to exchange knowledge and ideas.
9. Establish or engage existing regional and national research and development and training / academic centres to generate new knowledge and strengthen integration of existing knowledge focused on innovative, relevant, climate responsive approaches to healthy urban food, waste management and ecosystems.

There are many actions and platforms within countries to build on, develop and sustain. The 9 recommendations provide a framework for our follow up actions to continue to document and share in different accessible forms the evidence, success stories, tools, training materials and information resources to support practice and scale up; and to map, inform and build capacities of key stakeholders, including affected communities. The framework motivates action to share and engage within and across countries on information that demonstrates the benefits, including cost benefits of integrated approaches and HIA healthy urban food-, waste- and eco-systems in local, national, regional and global engagement on climate and health.; as well as information on relevant local technologies, funding methods and opportunities, state and cross-sectoral measures; and on specific areas for law and policy reform and harmonized regional standards.

1. Background and objectives

Urbanisation and economic/commercial activities in east and southern African (ESA) countries are associated with rising opportunities and wealth for some groups, but also many dimensions of stress, poverty and ill health for others. Urban areas are sites of new commercial processes and products, such as ultra-processed foods, harmful substances, traffic and industrial emissions. This makes it important to ensure equitable benefit and to provide viable alternatives to risk environments, processes and products that are harmful to health in a range of areas, particularly for poorer groups, and where commercial determinants of health (CDoH) and climate change pose significant burdens.

Aims: This EQUINET regional meeting, convened by TARSC, gathered people from institutions involved in the work on urban health and health impact assessment (HIA) and related expertise on May 23 and 24, 2024 in Nairobi, Kenya, to address particularly issues relating to scaling up promising, climate responsive practice to promote healthy urban food, waste and ecosystems in ESA. It built on work implemented in the region on urban health from 2020 and used a mix of presentation, discussion and participatory processes to:

1. Share and review experience and evidence from both urban health work and HIA in ESA on the laws, policies, systems, features, measures and tools that positively impact on and make linkages across economic, social, health and ecosystem wellbeing, including to respond to climate change.
2. Identify the implications for policy and practice at national, regional and global level.
3. Identify a theory of change and strategies to advance, support and scale-up in ESA the promising policies, practices and tools identified in the meeting.
4. Identify issues from the meeting to communicate to policy, technical and wider audiences in and beyond the region on improving health (equity) and climate adaptation in urbanisation and in economic/ commercial activity in ESA.

The meeting was participatory, with short delegate presentations, plenary and group discussions and some specific breakaway groups/ sessions to deepen focus on particular areas of interest and discussion. The programme is shown in *Appendix 1*. The delegate list is shown in *Appendix 2*.

The meeting in session

2. Opening, introductions and overview

Delegates were welcomed to the meeting for EQUINET by *Dr Rene Loewenson, Director, Training and Research Support Centre.* Delegates introduced themselves, their institution and country. Rene then introduced *Mr Jones Masiye, ECSA-Health Community.* She noted EQUINET's formal and long interaction with ECSA HC and invited him to open the meeting and to chair the introductory sessions.

2.1 Opening remarks and meeting agenda

Mr Masiye welcomed participants. He brought warm greetings from the Director General of the ECSA-HC whom he was representing, as the DG had prior commitments. He noted that ECSA-HC was established in 1974 to foster and strengthen regional cooperation and capacity to address the health needs of the member states. Through partnerships with diverse institutions, ECSA HC's activities also spread to other African countries to address common health challenges facing the region. Currently, there are nine Member States for ECSA HC namely: Eswatini, Kenya, Lesotho, Malawi, Mauritius, Uganda, Tanzania, Zambia, and Zimbabwe. The non-member states supported include; Botswana, Burundi, Cameroon, Eritrea, Gabon, Liberia, Mozambique, Namibia, Rwanda, Seychelles, South Sudan and Somalia. This gives ECSA HC great possibility for convening policy actors.

He noted that we stand at a pivotal moment in our collective efforts towards ensuring the health and well-being of our communities across the region, including through healthy food systems and urban environments, that are crucial pillars for better health outcomes for all. ECSA-HC has four clusters and one of them is the cluster of NCDs, Food Security and Nutrition which is mandated to undertake activities that contribute to the reduction of malnutrition and non communicable diseases (NCDs) in the region, by promoting knowledge generation, sharing of experiences and best practices, identifying priorities, building capacity of member states and advocating for improved policies and programmes.

He noted that our region faces a multitude of challenges in relation to food security, access to nutritious food, and environments for healthy lifestyles. This is particularly so, given rapid urbanization, poverty, epidemic outbreaks and poor infrastructures, all of which are exacerbated by climate change. Illnesses can reduce household incomes and increase healthcare expenses, further exacerbating food insecurity. In the face of these challenges, he indicated that it is imperative that we come together, united in our resolve to address them comprehensively and effectively.

On this, he noted ECSA-HC's coordination of food fortification in the region, surveillance through Learning Network on Nutrition Surveillance, and regional initiatives on adolescent nutrition, and appreciated the focus in this meeting on assessing and promoting healthy food systems and urban environments. Through collaboration and knowledge-sharing, ECSA HC aims to develop innovative strategies and policies that will empower communities to make healthier choices, be food secure, and lead more fulfilling lives. He thus urged delegates to actively engage in the meeting's discussions, to share insights and experiences, and to join hands in forging a path towards a healthier, more equitable future for all. With that he wished all well in the deliberations and officially opened the meeting.

Dr Rene Loewenson thanked Jones Masiye for his opening. Noting that the meeting is convened under the EQUINET umbrella, she explained EQUINET's background as a network formed in 1998 of professionals, civil society members, policy makers, state officials, parliamentarians in the 17 countries of east and southern Africa (ESA) that advances and supports health equity and social justice through research, analysis, networking and dialogue. EQUINET is organizing work within three strategic areas, 'Reclaiming the resources for health', 'Reclaiming the state' and 'Reclaiming collective agency and solidarity', all of which have some implication for the work on urban health. Delegates can find more information on the EQUINET website (www.equinetafrica.org) on the different areas of work led by institutions in the different countries of the region, and EQUINET produces a quarterly newsletter sharing information from the region. EQUINET publications produced online are open access.

Rene indicated the aims of the meeting as outlined in *Section 1* and the outlined the meeting process for the two days. Delegates adopted the agenda and process.

2.2 Overview of issues and learning from work to date

Dr Rene Loewenson, TARSC/EQUINET gave an overview of the work to date after the past few years and particularly since the March 2023 regional meeting, that this meeting is a follow up of. She noted the case study work that had been done in the region by different institutions under the EQUINET umbrella. The May 2023 meeting identified that promising practices are taking place locally, but need to be scaled up, and that inequity in the burdens of climate change call for multi-actor, holistic approaches that involve communities. That meeting thus called for sustained and integrated approaches**,** that better manage commercial factors and that call more effective regional sharing of methods, tools, evidence, and capacities. Since the May 2023 meeting, work was implemented to gather evidence on practices in urban food systems, urban waste management and their connections with energy, green and public spaces, water and climate and to build capacities for health impact assessment.

Rene presented evidence for the ESA region from the UN SDG database that signals the need for more integrated approaches to food, waste, energy, water for health, due for example to

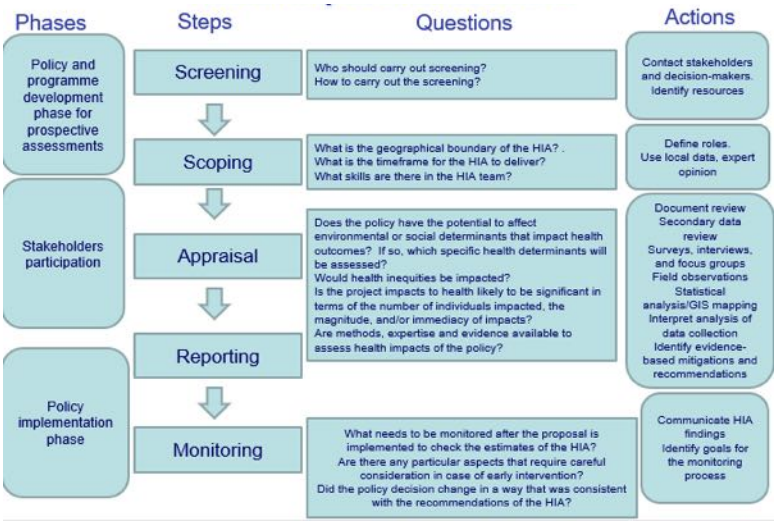
- Increased population undernourishment in 55% of sub-Saharan Africa (SSA) countries in 2015-2021, as well as an increase in moderate/severe food insecurity, moreso in East Africa than in Southern Africa;
- A double burden in the region of rising undernutrition (in poorer groups) and rising obesity (in wealthier groups);
- A significant gap in ESA to achieving universal SDGs for safe drinking water; and
- A shift from household air pollution to ambient air pollution, with wider population impact and affecting child development/IQ

She noted that these trends and deficits are affected by climate change. However, they also make countries and affected communities more vulnerable to climate change.

In 2023-4, TARSC / EQUINET and 9 ESA institutions in Madagascar, Malawi, Kenya, Zimbabwe, Zambia, Uganda documented initiatives to promote healthy, equitable, climate adapted urban food systems. Rene noted that all nine case studies and a synthesis of the findings (EQUINET discussion paper 132) had been circulated as links to delegates and hardcopies were available in the meeting. The case studies followed the five areas of an EQUINET conceptual framework to identify the common and different features and areas of shared learning. The settings ranged in size, but all had a high degree of insecure, informal settlement and economic activity, with poor infrastructures, and inadequate waste management and food security. The common conceptual framework explored elements of urban systems that

a. Listen and respond to and integrate community evidence and ideas with other evidence, and generate multi-actor, multisector interactions and collaborations in planning, design, implementation and review.
b. Develop, resource and implement holistic, area-based and system approaches that address risks and drivers and build capacities to address challenges.
c. Provide affordable, safe, nutritious foods and green spaces in healthy food neighbourhoods for all urban residents, promoting equity and climate justice.
d. Respect and protect ecosystems and provide inclusive, poverty-reducing and equity oriented circular economies that reduce, recycle and reuse urban food and other waste to support local needs; and
e. Involve governance approaches, capacities and measures for implementation, for adaptive change and for strategic and collective learning

Rene also updated the training taking place through EQUINET and partners on HIA, as a combination of procedures, methods, and tools" that systematically assesses the potential direct and indirect effects of a policy, plan, programme, economic activity or project on the health of a population. HIA assesses the distribution of those effects within the population, whether intended or unintended, and identifies appropriate actions to manage those effects. HIA is thus not only to judge if policies have integrated health, but a process to improve policies and their legitimacy. It processes in the steps shown in the graphic overleaf. She indicated that some delegates were involved in the HIA training and would bring this experience to the meeting discussions as a tool to assess the commercial factors affecting health in urban areas.



Steps in the HIA process, WHO, 2023

Rene shared some of the learning arising from an analysis across the case study work implemented in the region on integrated systems for waste management, food- and eco- systems, highlighting:

a. The role of multi-sector, multi-actor collaborative planning, informed by disaggregated evidence of different forms, to build coalitions that share goals, ideas and ownership, and bring different resources and skills to processes.
b. Various forms of holistic, area-based, linked systems in a circular economy that link the 3Rs (reduce, recycle, reuse) to reclaim vacant land with waste dumps for gardens enable urban agriculture, use biowaste for energy and develop and use local technology innovations
c. Processes that integrate equity, incomes and food security to bring sustainable benefit and improved health and nutrition for often marginalised groups
d. Sustained processes, MoUs to enable participation, trust and partnerships across state, community and local private sector
e. The integration of health and climate justice in reduced air and water pollution, reduced emissions from waste burning, reduced flooding from clogged drains, enriched soil through organic fertilisers, and climate proofed structures for food markets.
f. Iterative steps to assess, review and improve practice, build practical understanding of the paradigm shift and strengthen social respect for healthy ecosystems as a source of economic and social benefit and reduced ill health.

She noted the enablers of local practice and scale up arising from across the range of case studies as:

- A shared vision and a paradigm shift at the onset or in the process, backed by relevant disaggregated evidence for planning, information outreach and capacity building;
- Inclusive, accessible, collaborative forums and spaces building trust, collective responsibility;
- Convenors (local authority), brokers, linking areas in horizontal spread;
- Local technology, social and economic benefits supporting sustainability, affordability, supported by incentives, blended funds, investments, and community contracting; and
- M&E to enable strategic review, confidence building, sharing learning and for advocacy.

However challenges for local practice and scale up were also raised, including:

- Sustainable funding, resource constraints in public funding, local authorities, and short term project funding, including for local R&D, technology development and uptake;
- Inadequate law and policy and tender/procurement measures eg on urban agriculture; waste management, food processing. Weak uptake of local learning by national, regional institutions;
- Inadequate investment in institutional 'brokers' of change and M&E of impact; and
- Resistance to change in current 'winners' (eg TNC food importers

In the **discussion** that followed delegates raised questions about some of the policy tools noted that can be used to support the work such as social tendering and blended funds, and examples of these were discussed. It indicated that it would be useful to share information on these different state/policy measures available for promoting public interests,

2.3 Discussants on work on urban health and assessing health impacts

Two discussants gave inputs on the work implemented to exemplify issues raised in the overview.

Mr Allan Ouko and Mr Pascal Mukanga of Kounkuey Design Initiative (KDI) Kenya talked about using evidence and HIA to expose and control risks to urban health.

Drawing across different areas of their work they presented various ways of engaging communities to draw their evidence and experience into planning for urban health, and tools such as GIS mapping to demonstrate how risks and assets are distributed using more visual and accessible tools. They noted the importance of engaging local communities to gather input and understand their health needs and priorities. Participatory approaches can help to empower residents and ensure that interventions are culturally appropriate and locally accepted. Engaging the community also fosters a sense of ownership and commitment to the proposed changes.

Photo: Engaging communities in mapping risks and assets, KDI work in Nairobi, as presented in May 2024

They also outlined the potential for HIA as a tool to systematically evaluates the potential health impacts of policies, plans, and projects in underserved neighborhoods, identify key health risks such as inadequate sanitation, poor housing conditions, and limited access to healthcare, and develop a comprehensive risk profiling that can enable organizations to prioritize interventions that address the most pressing health concerns. This enables evidence-based recommendations that inform KDI's design and planning processes, indicating how different design choices can impact health outcomes and ensuring that health considerations are integrated into urban development projects. They noted that HIA findings can be used to advocate for policy changes at the local and national levels, to demonstrate the health benefits of certain interventions to engage policymakers to adopt health-promoting policies and allocate resources to improve living conditions in informal settlements.

Ms Paxina Phiri, Centre for Primary Care Research (CPCR) Zambia presented work on scaling up a promising urban practice from the first stage of work at the Longacres market in Lusaka. She noted the challenge in Zambia shared by many in ESA countries of effectively managing urban waste, including food waste. Addressing this multifaceted problem necessitates understanding of factors that influence waste-related behaviour and adoption and scaling up of sustainable solutions calls for understanding of root causes of and strategies that minimise waste at source, linking behaviour modification to environmental measures, planning, and informed decision-making. Paxina described the work at Longacres food market where waste, including food waste from the market is carried to a nearby Material Recovery Facility, where waste is separated, and processed for reuse or recycled. Organic waste is transferred to a bio-digester at a school near the market to produce methane gas energy used by the school for cooking, lighting and digested bio-waste used as fertilizer. As an integrated initiative it needed careful mapping of all relevant stakeholders within each site, facilitating the collaborations with clear goals, roles and mechanisms and capacity building measures. She pointed to this as a critical factor for scale up, together with alignment with relevant laws, regulations and guidelines. Participants in the training agreed to come up with penalties for failure to separate waste at the shop level as part of enforcement, with such co-production of enforcement strategies through mutually agreed penalties raising compliance with agreed strategies.

Photo: Longacres market stakeholders discussing plans, CPCR, as presented in May 2024

Other factors that enabled scale up included adequate funding, equipment, and personnel, including from a local firm based in Lusaka contracted to construct the system. To make it easier for individuals to transport waste from the source to the Material Recovery Facility, the company also refurbished the road to the market. They also built a tank to supply the water required for the digester to function. Paxina noted that this points to the need to consider these related infrastructures in scale-up, together with training to provide skills and knowledge, such as for better waste handling and separation, with these areas embedded in the design for project scale-up. She also noted some challenges, such as from low compliance, as workers were constantly changing at the market, owners are not orienting new workers on the new methods of disposing of waste, or lack of bins in some shops. She recommended that for scale-up, policy makers and implementers need to embed regular knowledge acquisition within implementing institutions' and ensure resources to implement knowledge acquired, regular sensitisation and monitoring at key places to promote awareness and behaviour change, and regular policy and law review involving relevant government agencies and through stakeholder consultations to sustain practice and promote scale-up. (See https://equinetafrica.org/sites/default/files/uploads/documents/UH%20CPCR%20casestudy%20research%20Feb2024.pdf for further information)

In the **discussion** that followed delegates noted some key issues from the experiences for wider exchanges/ uptake, including:

- The practice applied in Zambia of vendor associations themselves agreeing on their own penalties for not following agreed practices used to promote collective compliance;
- The use in Kenya of mapping, GIS tools, story maps, photos as a key visual to identify the distribution of risk and assets and the processes of change in ways that are accessible to different social actors and communities;
- The necessity of using mixed approaches to generating and sharing visual, qualitative and quantitative evidence in accessible forms to help people understand what is behind the numbers;
- The role of local innovation, contracting, local policy setting, and evidence sharing to stimulate a system approach in linking food, waste and energy;
- The need to internalise regular training to deal with turnover of personnel; and
- The importance of bringing government actors in early to processes.

3. Features of practice for, and institutionalising scale up

3.1 Group discussions on key features for scale up

Dr Rene Loewenson introduced the discussions delegates would have in three groups to identify the features of work that are most important to recommend / share for scale up within and across countries in the region. Groups drew on a summary of the findings from the synthesis across work to date to draw out and add the issues they felt to be most important. These were listed on a flip chart.

Photo: delegates in one of the group discussions

Group 1 discussed holistic, climate proofed ways of promoting healthier urban waste, water, food, energy and ecosystems. As background they reviewed points from the list below:

a. Ensure facilities (bins), public waste management, activities and social enterprise to gather waste from households, unplanned urban dumps, food markets and public spaces to reclaim vacant land for green and productive spaces, including urban agriculture.
b. Segregate and implement the 3Rs (reduce, recycle, reuse) of food and other waste to process for organic fertilisers, bio-energy and other local products and integrate social enterprise in waste

management schemes and tenders to improve local circular economy and community incomes, reduce greenhouse gases and ambient pollution from waste burning, and the share of waste in urban dumpsites.

c. Steer urban agriculture activities to support urban food producers/ farmers with land, including in schools, hospitals and other public land, and with water, including through water harvesting, solar powered boreholes and water conserving approaches, while ensuring public health and environmental protections.
d. Build capacities, technologies and demonstrate sites for, and expand innovative approaches for urban agriculture, including micro-gardening, and nutrition gardens, to improve food security and dietary quality, affordable access to food and incomes for low income communities, embed activities in schools top engage children, and expand green spaces.
e. Link local food producers, processors, retailers, communities and authorities in approaches that generate local incomes, technologies and innovation across the food value chain.
f. Protect people, especially children, from promotion and consumption of harmful, unhealthy, unsafe and ultra-processed foods across the whole food chain, including through inspection and testing services, market-controls and through laws and their enforcement.
g. Improve decentralised food testing capacities and sell locally grown food in accessible, hygienic and climate change-proofed markets.

GROUP 1 identified the following five areas to be key
Link urban waste management to urban agriculture
Identifying incentives for committees and social enteprises
Waste management (collection)- decentralising to involve other actors (residents, private, CSOs) *
Build urban residents/ food producers on innovative urban agriculture (community gardens, labs, vertical farming, hydroponics, integrating links across waste, energy etc
Favourable/enabling policies that empower private landholders to innovate

Group 2 discussed providing evidence for / demonstrate risk including commercial and climate-related risks; monitor impacts of intervention, and to engage and act across sectors and groups.
As background they reviewed/ changed/added to points from the list below

a. Gather disaggregated evidence on the situation, views, ideas and local 'solutions' from routine data, surveys, participatory methods and community dialogue.
b. For specific commercial interventions implement prospective or concurrent health impact assessment (HIA) to identify risks and to embed and monitor mitigation measures.
c. Map key stakeholders, their interests and assets, including affected communities, implementers, civil society, private sector, technical and policy actors.
d. Use stakeholder mapping for HIA and to set up multi-actor, multi-disciplinary and multi-sector forums to review evidence, design, plan and review programmes and generate inclusive dialogue, ownership and accountability.
e. Use local authority convened forums or where needed set up informal forums with clear procedures and links to formal decision making.
f. Use the forums to institutionalise evidence-gathering, review evidence, set shared vision and objectives and monitoring frameworks, to build capacities and share learning, lever resources, capacity building, consultation, accessible processes for meaningful involvement/engagement and accountability at all stages of processes.
g. Organise in-country and regional sharing of promising practice and link with international networks to bring tools, ideas and methods to planning and for international advocacy.

Group 2 identified the following 10 areas to be key
Gather disaggregated evidence
Use HIA to identify risk
Map all key stakeholders
Set up multi-stakeholder forums
Link formal and informal forums
Institutionalise evidence gathering
Organise national and international networks

Group 2 identified the following 10 areas to be key
Literacy on policy process
Sustain forums through M&E
Local government as a convenor

Group 3 discussed features that reward/ incentivise practice, secure resources, and gain higher level support (nationally and internationally). As background they reviewed/ changed/added to points from the list below

a. Monitor, analyse and effectively communicate evidence on programme performance and impacts and the recommendations from HIA using qualitative and quantitative information to demonstrate outcomes to inform policies and plans from local to international level.
b. Use digital systems to support, manage and monitor programmes and to communicate their impact, to build public, implementer, policy and political support
c. Implement programmes in feasible stepwise approaches, supported by local non state agencies / brokers and local government, to build capacities, experience, learning in line with resources to enable change.
d. Frame and link different domestic (public and private) and international resource pools to support sustained, step wise longer-term programmes.
e. Invest in domestic R&D, test in local communities and produce locally appropriate, climate sensitive technologies and infrastructures in food, waste, and energy systems. Protect local technologies, innovations and life-forms from external commercial patenting and extraction, without sustained fair benefit for local communities.
f. Update national laws, local by-laws, policies, social tendering, procurement, community contracting, budget and innovation funding options to integrate and incentivise proven holistic, integrated programmes for food, waste, energy and water systems, including for the 3Rs on waste; urban agriculture; HIA, renewable energy, control of ambient pollution and ultra-processed foods and protection urban green spaces.
g. Link local actors with other cities and national levels within countries, and with other cities and countries internationally to exchange and engage on knowledge, approaches, ideas and practices for advocacy, support, scale up and system reforms.

Group 3 identified the following five areas to be key
Link local, regional and international actors for knowledge and ideas exchange
Monitor, analyse evidence and effective communication to shape decisions
Review/ amend /set policies and national and local laws
Frame and link domestic (public and private) and international resource pools to scale up system reforms
Invest in domestic R&D for locally appropriate, climate sensitive technology and infrastructures in food, waste and energy systems

All three lists were brought to the plenary and delegates using ranking and scoring allocated their nine votes that each held to the features that they saw to be priorities and feasible for scale up in the region.

The results of the ranking and scoring of the 3 lists is shown overleaf.

The top ranked areas were (in order of highest rank)

1. Invest in domestic R&D for locally appropriate, climate sensitive technology and infrastructures in food, waste and energy systems.
2. Build urban residents/ food producers on innovative urban agriculture (community gardens, labs, vertical farming, hydroponics, integrating links across waste, energy and related areas.
3. Link local, regional and international actors for knowledge and ideas exchange.
4. Review/ amend /set policies and national and local laws.
5. Set up multi-stakeholder forums.
6. Link urban waste management to urban agriculture.
7. Identifying incentives for committees and social enteprises.
8. Waste management (collection)- decentralising to involve other actors (residents, private, CSOs).

However delegates also noted that some areas shown in different groups are linked that boost their relevance. These are shown in the table with an asterix (*). For example 'Organise national and international networks' and 'Literacy on policy process' raised by group 2 are linked to areas raised as high priority in group 3. The delegates noted that many of the priorities related to gathering and using evidence for urban health. It was thus agreed to add a further priority on gathering and using relevant evidence in different forms and from different sources.

GROUP 1: For holistic, climate proofed ways of promoting healthier urban waste, water, food, energy and ecosystems	**Dele-gate 'votes'**	**Group 2: Provide evidence for / demonstrate risk incl. CDOH and climate-related risks; monitor impacts of inter-vention, engage across sectors & groups.**	**Dele-gate 'votes'**	**Group 3: To reward/ incentivise practice, secure resources, and gain higher level support (nationally and internationally)**	**Dele-gate 'votes'**
Link urban waste management to urban agriculture	11	Gather disaggregated evidence	9	Link local, regional and international actors for knowledge and ideas exchange *	13
Identifying incentives for committees and social enteprises	11	Use HIA to identify risk	7	Monitor, analyse evidence and effective communication to shape decisions	8
Waste management (collection)- decentralising to involve other actors (residents, private, CSOs) *	11	Map all key stakeholders	4	Review/ amend /set policies and national and local laws	13
Build urban residents/ food producers on innovative urban agriculture (community gardens, labs, vertical farming, hydroponics, integrating links across waste, energy etc	17	Set up multi-stakeholder forums	12	Frame and link domestic (public and private) and international resource pools to scale up system reforms	3
Favourable/enabling policies that empower private landholders to innovate	10	Link formal and informal forums	1	Invest in domestic R&D for locally appropriate, climate sensitive technology and infrastructures in food, waste and energy systems	19
		Institutionalise evidence gathering	2		
		Organise national and international networks *	4		
		Literacy on policy process *	10		
		Sustain forums through M&E	4		
		Local government as a convenor	11		

It was also noted that some issues are cross cutting principles, such as equity and gender equality These prioritised areas would be carried forward in discussion on Day 2, together with other input from the first day.

Discussing the ranking and scoring of priorities for integrated action

3.2 Round tables on issues for scale up from case study experiences

Ms Connie Walyaro TalkAB[M]R Kenya chaired this session. Rene introduced the three concurrent round tables each sharing one of the case study experiences to hear the experience from the case study lead and then discuss questions relevant to scaling up these practices. Delegates were divided between the round tables and a rapporteur documented the feedback on the questions relevant to scaling up the work.

Photos: The three round table discussions

The three round tables were

1. Kariba, Zimbabwe- From urban litter-jungles into healthy environments- Casper Mutumbami, Municipality of Kariba, (See https://equinetafrica.org/sites/default/files/uploads/documents/UH%20Kariba%20case%20study%20Jan2024.pdf for the case study). Rapporteur: Locadia Muzenda

2. Bembeke, Malawi- From a Waste Dumpsite into a Food Basket, Wilson Asibu, CMPD Malawi (See https://equinetafrica.org/sites/default/files/uploads/documents/UH%20CMPD%20Malawi%20case%20study%20Jan2024.pdf for the case study). Rapporteur: Richard Tamva

3. Kibuye I, Uganda – Small scale urban farming challenging food insecurity Alfred Ogwang, UAAU, Waiswa Kakarire, ACTogether, Uganda. (See https://equinetafrica.org/sites/default/files/uploads/documents/UH%20ACTogether%20Uganda%20Jan2024.pdf for the case study). Rapporteur: Nosimilo Mlangeni.

The round tables discussed what the case study tell us about the following questions:

1. What sustained information, data gathering is needed to sustain/ widen the practices?
2. What gaps in law or enforcement need to be addressed to manage risk or promote healthy practice?
3. What local technologies were important? What is needed to support local technology R&D and use?
4. What resources, types and from where, help to sustain and widen the work?
5. What are the essential roles/powers / duties of the local authority?

In the plenary report back the following feedback was provided by the rapporteurs on each question from the three round table discussions, showing below the combined feedback for each question:

1. **On information and data gathering** the discussions highlighted:
    - **a.** The importance of mapping and validating information on stakeholders, their expectations, knowledge, capacities and perceptions as an input to planning, including to identify training needs and personnel. This could use also pictures and videos, that are helpful to determine interventions for specific contexts.
    - **b.** Scoping the existing laws, policies, guidelines and information from literature and experiences elsewhere as an input to planning.
    - **c.** Assessing and profiling sources and types of waste, risk hotspots for health, waste, energy, food security.
    - **d.** Integrating local knowledge systems, data gathered through monitoring and experimenting as well existing information.
    - e. Gathering data to support cost benefit analysis of interventions.
    - f. Implementing data gathering (qualitative and quantitative) using standardized tools and reporting findings regularly, with periodic monitoring and review to assess performance and impact of programmes.

2. **On laws and their enforcement,** the discussions highlighted:
    - a. Reviewing, realigning and revising key laws and policies (what we called the policy 3Rs!), and options for regional harmonization of standards.
    - b. Overcoming multiple barriers to implementing laws, including lack of resource to enforce them, lack of public awareness and motivation, legal literacy gaps, and liberalized trade making regulation difficult.
    - c. Following the cycle of farm to fork and of waste producers to disposal to integrate practice in key areas of risk and identify referral and collaborative pathways.
    - d. Registering community-based associations or organisations or having MoUs to more formally integrate their roles.

3. **On local technology development and use,** the discussions highlighted:
    - a. Community participation in designing, planning, implementation and problem identification and problem solving to align technology to needs.

b. Integrating locally produced technologies that apply collective processes for waste management and processing and for food production, such as cages fabricated for separation of waste for recycling (PET-plastics and beverage cans); tanner bags re-used to store the separated waste; beverage can crusher machines to reduce volume of beverage cans; manual PET plastic bailer machine used to reduce volume of plastic bottles; composter tumbler drums for composting organic waste; digging pits instead of using sacks when producing fertilisers; creation of gardens through waste plastic and fertilizers, as there is not enough space/land for planting gardens.
c. Introducing innovations such as vermiculture; hydroponics that use recycled water and materials where space and water is limited for growing vegetables.
d. Developing innovations such as for food preservation technologies.
e. Training residents/ farmers on new methods on sorting organic waste.
f. Building a technology ecosystem.

4. **On sustainable resources,** the discussions highlighted:
    a. National and local government to allocate budgets, with participatory budgeting at local lvel.
    b. Options to locally manage levies to use for implementation of plans and policies, such as levies collected by vendor associations at markets, with a certain percentage used for waste management
    c. Selling and using income generated from waste products, food, organic fertilizers to re-invest in processes.
    d. Attracting attention of different stakeholders who provide financial and other types of support including materials, resources and training.
    e. Using evidence on waste profiles to direct resources to highest risk sources/ burdens.
    f. Using pilots to assess cost benefit to lever wider resources.

On the roles/powers / duties of the local authority, he discussions highlighted:
    a. Engaing CBOs as contractees, such as in waste management and directly involving them in waste management and landfilling projects and activities.
    b. Coordination across multiple sectors and stakeholders as key in integrated programmes.
    c. The multiple roles of the local authority, as convenor of multi-stakeholder forums, mobilising resources and capacities, facilitating training, education and awareness programmes; monitoring, documentation, communication and reporting.
    d. Local authorities also participate in community forums, assist in identification and planning of spaces for urban farming and facilitate local land acquisition for community gardens.
    e. In these roles it was noted that there is need for a common language to enable inclusion and to move from projects to plans and programmes.

3.3 Further experiences from HIA and urban health case study work

Mr Thulani Ngamphalala, Swaziland Migrant mineworkers association, Eswatini chaired the last session of the first day. The session gave an opportunity for further presentation of case study work and experiences from the region.

Ms Nosimilo Mlangeni, NIOH, South Africa shared l**earning from implementing an HIA for a commercial sector: policy for agricultural workers in South Africa**. She noted that the agricultural sector is the second largest source of employment globally, and is the most hazardous of all sectors. There are exposures to dust, chemicals and infections agents; musculoskeletal implications; excessive noise; and extreme weather conditions. In South Africa farm workers are mainly migrant and highly mobile populations with poor working and living conditions and increased risk of HIV and TB. There is currently no occupational health (OHS), HIV or tuberculosis (TB) policy for farm workers in SA and the workers have poor access to healthcare and poor health outcomes. A new policy for agricultural workers OHS, HIV and TB is being discussed and the HIA sought to assess the health impact to improve the policy.

The Limpopo province was targeted for the HIA and the possible positive and negative health impacts identified, with the pathways to the impacts. These included many social determinants of health that Nosimilo presented, such as such as working and living conditions, unsafe work environments/

occupational risk factors; social support networks; low income, long distance to health and other services, poor housing and road infrastructures. The HIA assessed a baseline of the current health status and distribution of these factors, and then how the policy would affect these and the health impacts. This was used to make recommendations to improve the policy, such as by engaging employers on implementing OHS services, risk assessments, injuries and prevention programs; providing PHC support to small and medium farms and providing garden spaces for workers to grow their foods, and integrating nutrition into the policy. (Not all recommendations that she presented are shown here).

Nosimilo reflected on the lessons learned from doing the HIA, and particularly that:
- HIA is an important step to undertake during policy formulation process;
- There is more to the burden of diseases and healthcare challenges than meet the eye;
- When social determinants of health are not factored in, even good policies fail to address health inequalities; and that
- Existing gaps in the baseline information points to a dearth in research and programs that produce routine data to use for decision making, specifically in issues of equitable healthcare.

Ms Salohy Randrianasolo FARM Madagascar presented the research implemented on **managing organic solid waste in Antananarivo**. She noted challenges from existing waste management systems, the proliferation of vectors and health risks from smoke, surface and underground water pollution, early marriages of girls; child labour and numerous fights.

She presented the work implemented and the results of the research in terms of areas to be addressed in future plans, including:
a. Regulations and municipal policy measures, including dumpsite conception, support infrastructure and addressing legal gaps in the construction and adoption of a new dump site and related infrastructure;
b. Municipal partnerships with associations and the private sector;
c. Dumpsite operationalization, with systems to monitor the quality of the compost to avoid risk to waste collectors and continuous monitoring and evaluation of the site; and
d. Measures to alleviate climate change; awareness and education, gap analysis.

In the **discussion**, delegates explored some aspects of the two areas of work presented, raising issues of disaggregating evidence to be able to ensure that more marginalized groups are not left out of evidence gathering and processes; and the role of state key institutions beyond health, such as from the environment management agency of the employment and labour sector. Delegates also noted the need to test safety of new technologies, and to test organic fertilisers produced from waste to ensure that they are free from contaminants, harmful microbes or chemicals.

4. Developing policy and practice recommendations

4.1 Taking forward practice and change nationally and regionally

Ms Agnes Kirabo, Food Rights Alliance (FRA) Uganda introduced and chaired a session with presentations on taking forward practice and change nationally and regionally and in legal systems.

Dr Danny Gotto, Innovations for Development (I4D) Uganda (and an EQUINET steering committee member) outlined **opportunities and barriers identified in discussions of scale up of circular economy practices in Uganda.** The findings he reported came from organized capacity-building Sessions in two cities- Kampala and Masaka – and a urban leaders workshop with stakeholders from 11 urban authorities to identify issues for scaling up promising practice in the country. From the two cities, the barriers to scale up were identified as relating to capacity, capital/credit, entrepreneuship, cross sectoral collaboration shortfalls, an inadequate regulatory framework for policy incentives and standards; inadequate funds to meet costs of waste recovery, competition with cheap alternative imports and

negative public perception of recycled waste products and safety issues in biological waste products. There were also opportunities and enablers in the national demand for clean energy-efficient, climate-smart green solutions; a circular economy framework in process; growing demand for recycled products and synergies across sectors; **c**limate funding commitments; promising local innovations, and technological solutions and in the potential for job creation especially for young people.

As examples, he showed some of the innovations underway, including:

- Emerging information, knowledge and technology hubs;
- National Water Sewerage Corporation recycling solutions that produce fertilisers, energy briquettes, and clean water for agriculture from wastewater, *shown in the photo adjacent,* and
- A Black Soldier Flies Initiative in Kampala that produces animal feeds from agricultural and faecal waste.

The lessons from these dialogues pointed to the need for technological, implementation capacities; local knowledge systems; public, institutions, civil society, advocates, and networks to act as drivers of change; and a conducive policy environment. He indicated that public participation is critical in driving demand, ownership, and scale-up of solutions, but that there is also need to address sectoral governance, policy rigidities and fears, silo-thinking mentalities and red tape within structures and systems of government at all levels. As recommendations the urban leaders proposed to strengthen mechanisms that support evidence-based solutions that respond to community needs; local, people-oriented ownership; actions built on established best practices and collaborative partnerships to build effective solutions that demonstrate viability on the ground.

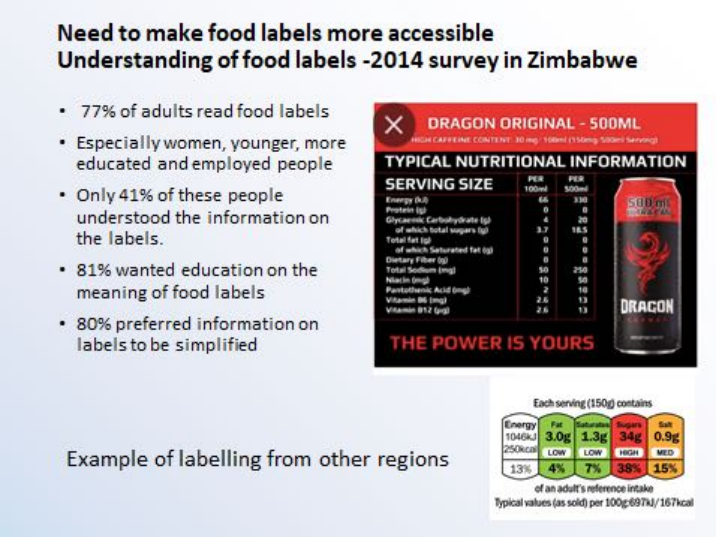
Two presentations then followed on legal issues affecting urban food systems.

Dr Rene Loewenson, TARSC presented **legal issues in exposing and managing food and health risks.** She noted that there are international standards that ESA countries have committed to that provide for the right to a safe, clean living environment, with clean water, adequate housing, adequate nutrition, social security and education and the right to expect and demand adequate health care as well as food safety standards. These rights are also found in many national constitutions. Public health law equally sets duties on **e**very legal 'person' (includes private companies) to avoid harm to public health. The FAO/WHO Food Safety and Quality Guidelines, 2003 set strategies and principles for national food control systems to protect public health, that includes

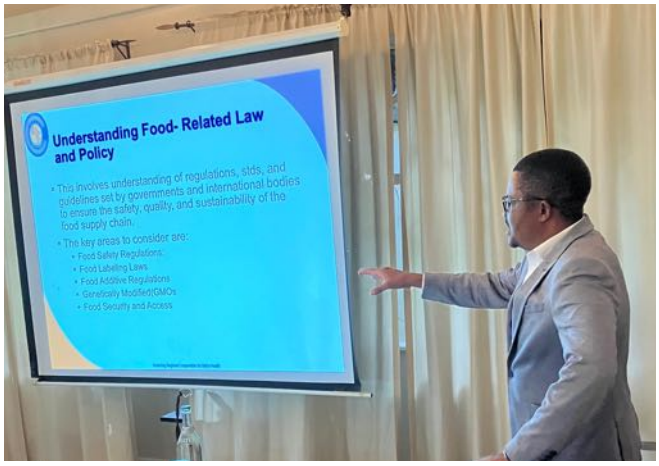
- Maximising risk reduction -prevention throughout the food chain.
- Addressing the farm to table continuum – integrate prevention throughout production, processing and marketing, consumption and storage eg using a Hazard Analysis Critical Control Point system.
- Establishing priorities based on risk analysis and management- including (i) risk and exposure assessment (ii) risk management; and (iii) risk communication to all interested parties.
- Developing holistic transparent, science-based food control strategies – target risks, communicate information to the public, and take into account costs of compliance and economic impact.
- Establishing emergency procedures for dealing with particular hazards (e.g. recall of products).
- Recognising that food control is a widely shared responsibility that requires positive interaction among all stakeholders; and
- Enabling research and scientific co-operation.

A joint EQUINET ECSA HC Review of food law in the region (available in full at https://equinetafrica.org/sites/default/files/uploads/documents/EQ%20ESA%20Food%20law%20review%20Jan2023.pdf) reviewed how far these FAO/WHO food safety and quality guidelines are being applied in the region.

That review found that food standards and safety in public health law are largely present, but with limited inclusion of ultra-processed foods. Risk assessment and response could be more comprehensively included across the entire food chain. It is currently partial through inspection, medical checks of vendors, testing and recall. Biosafety law on genetically modified organisms (GMOs) and novel risks is not present in all ESA countries and there are no controls of advertising, sponsorship on ultra-processed foods (UPFs) especially for children. She noted that labelling requirements are present but not always in visual ways that are understood by communities. She noted implementation challenges such as testing and operational gaps, especially in informal sectors and with imported foods. On urban agriculture (UA) she noted that some ESA countries lack a clear policy and legal framework for UA, and that proactive assessment using HIA is not well provided for in law or guidance in ESA countries, except for Zimbabwe, South Africa and Kenya.



Mr Jones Masiye, ECSA HC presented on **improving food related law and policy in the region (***photo adjacent)*. Recalling the information on the ECSA HC presented in the opening, he noted that the NCDs, Food Security and Nutrition cluster in the secretariat is responsible for work on regulations, standards, and guidelines set by governments and international bodies to ensure the safety, quality, and sustainability of the food supply chain, such as through law/regulations for food safety: food labeling; food additives; GMOs and food security and access. He noted that these food related laws are important for promoting public heath and reducing disease burdens more generally. The region faces challenges regarding food safety, nutrition, and food security, such as weak food safety standards and regulatory frameworks in some countries, with problems of contamination and food borne illnesses; limited access to nutritious food, dietary shifts in urbanisation, and a lack of adequate capacity and infrastructure for food safety management, surveillance, and enforcement. ECSA HC has thus developed strategies to respond, including the ECSA-HC Adolescent Nutrition Advocacy Strategy (2023-2028) now being applied in all 9 member states to promote investment in adolescent nutrition as a priority population group in the region. Other strategies include food fortification; universal salt iodization and the formation of a Regional Learning Network on Nutrition Surveillance to support and facilitate learning and information exchange among public and research institutions in the region.



In the **discussion** that followed, delegates noted that while there are areas for law reform, there is also a need for wider awareness and capacities for law enforcement and implementation. The demand side needs to be more people-driven, with legal review going hand in hand with awareness raising in the public, such as on issues such as ultra-processed foods. The legal review process can itself raise awareness if done in a more inclusive manner. The role of affordable, accessible technologies to enable producers to comply with standards was also noted, such as for food fortification.

On the issue of the expanding reach of ultra-processed foods it was noted that these are being sold even in pre schools and junior schools. It was suggested that the current ECSA HC programme on adolescent nutrition could expand to be an adolescent and young child nutrition programme and that it would be useful to engage the Ministry of Education and schools on the sale of these foods and to regulate advertising and sale in places where there are children.

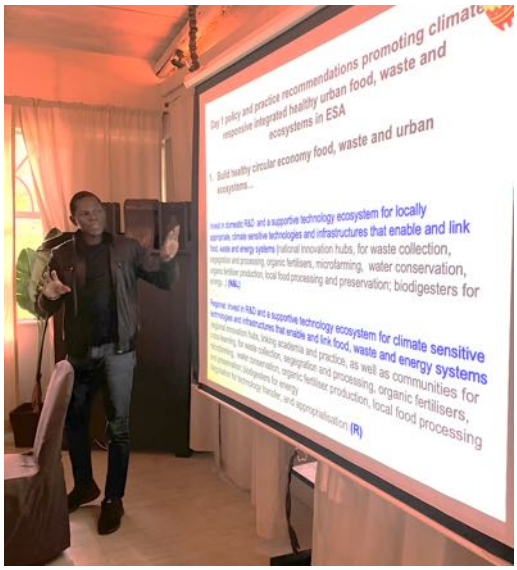
4.2 Recommendations from the work for policy dialogue

Dr Rene Loewenson introduced the information for delegate discussions on policy and practice recommendations from the meeting addressing scale up of promising practice on urban health and CDoH. She integrated the prioritised areas from Day 1 discussions on integrated healthy urban food, waste and ecosystems in ESA into 8 recommendations and areas of practice/policy relating to

1. **Building** healthy circular economy food, waste and urban ecosystems
2. **Enabling** healthy food, waste and urban ecosystems
3. **Amplifying** healthy food, waste and urban ecosystems

She presented these on powerpoint and distributed the powerpoint between the three groups, each discussing a section of the recommendations, if mainly applying within countries or at regional level and the examples of areas of relevant policy or practice.

Photos: Group and plenary discussions on the recommendations



The revisions to the recommendations were discussed in plenary. The final version adopted by the meeting is shown in *Box 1* below.

Box 1: Policy and practice recommendations promoting climate-responsive integrated healthy urban food, waste and ecosystems in east and southern Africa

The meeting made 9 recommendations on areas of practice and policy to advance climate-responsive integrated healthy urban food, waste and ecosystems in east and southern Africa, within the three main areas below

1. **Building** healthy circular economy food, waste and urban ecosystems;
2. **Enabling (**and institutiionalising**)** healthy food, waste and urban ecosystems; and
3. **Amplifying** (scaling up in and across ESA countries) healthy food, waste and urban ecosystems

In each of the 9 recommendations shown in blue font we have in black font italics some areas where we have examples of promising practice, guidance, methods, tools and experience to share.

To BUILD a healthy circular economy in food, waste and urban ecosystems, we recommend to:

10. Design, plan for, incentivise, capacitate and reclaim urban spaces for urban resident food producers to implement various forms of innovative urban agriculture.
This applies largely at local and national level, although with possibilities of regional training, with practices such as in community gardens, vertical systems, hydroponics, converting areas used for waste dumping into urban green spaces for urban agriculture and other activities.

11. Establish through community, private, CBO and state actors 3R (reduce, recycle, reuse) waste management systems and link these systems to urban agriculture and to interventions for improved access to quality healthy urban food, as an alternative to ultra-processed and other harmful food products.
This applies largely at local and national level, although with possibilities of regional exchanges, with many examples in the region linking 3R waste management locally to organic fertiliser and urban farming, making clear local and community and national roles and responsibilities. There is also experience from the region in the shift to local foods away from imported ultra-processed foods as health promoting during the Covid-19 pandemic.

12. Invest domestically in technology research and development (R&D), supported by regional investment and technology transfer, and establish a supportive technology ecosystem for locally appropriate, climate-sensitive technologies and infrastructures that build and enable links between food, waste and energy systems.
This applies within and across countries in the region. For example, countries may have national innovation hubs and investment funds to promote R&D on locally appropriate technologies for waste collection, segregation and processing, for organic fertiliser production, for micro-farming, water conservation, local food processing and preservation; biodigesters for energy and other examples linked to food systems. There is scope also for regional innovation hubs, linking academia and practice, as well as communities to stimulate investment and for cross-learning on these technologies and for technology transfer and adaptation.

To ENABLE such integrated healthy urban food, waste and ecosystems, we recommend to:

13. Capacitate and institutionalise the regular generation, analysis and communication of multiple forms of disaggregated, accessible relevant evidence, including from health impact assessment (HIA), integrating also perspectives from multiple stake-holders and affected communities, with active use of the evidence in decision making, monitoring and review.
This applies largely at local and national level, although with possibilities of regional exchanges. There are useful existing examples and tools, such as for mapping stakeholders, risk and assets, assessing waste types, sources, health and ecosystem impacts; methods and training for HIA, areas for inclusion of HIA in law. A gap needs to be addressed in implementing cost benefit analysis; showing health, equity, economic, ecosystem and climate impacts.

14. Set up inclusive, sustained, multistakeholder forums to facilitate integrated food-waste-eco systems, with local government as a key convenor, and ensure relevant, accessible communication with stakeholders.
This applies largely at local and national level, with attention to ensuring common language, moving projects to plans, linking promising processes to planning systems and budgets; and dissemination of information in accessible forms for different target populations/stakeholders.

15. Implement 'policy 3Rs', that is Relook, Realign and Revise local, national policies and laws, and harmonise law and guidance regionally, to enable these key elements of healthy integrated urban food, waste, eco-systems, and build implementer capacities and stakeholder literacy to regularly monitor and review/revise laws and to engage in policy processes locally, nationally and regionally.
This applies largely at national level, although with possibilities of local by-laws and of regional harmonised guidance and standards. Areas such as updated food standards for new food risks, legal frameworks for urban agriculture, state procurement, tendering, funding/budget, incentive and contracting policies can stimulate new practice, drawing examples from the region. An enabling environment calls for political support, resources and policy literacy, to generate demand driven policies, supported by strengthened implementation capacities.

16. Develop frameworks that will mobilise, harmonize and coordinate the allocation of budgets, pooled and blended funding, and other resources towards addressing risks, strengthening assets, and managing assessed costs, drawn from multistakeholder evidence and review.

This applies largely at national level, with examples from existing demonstration pilots, participatory budgeting, ringfencing levies/ tax and innovation funds for relevant food, waste, energy innovation and R&D, leveraging private and climate financing.

To AMPLIFY such integrated healthy urban food, waste and ecosystems within countries and across the region we recommend to:

17. Organise and connect in networks and link across local, national, regional and international actors to exchange of knowledge and ideas.
This applies from local to national, regional and international level, with many existing networks for sharing approaches, harmonising standards, laws and guidelines regionally, including in the ECSA-HC, and the regional economic communities, and regional UN agency networks.

18. Establish or engage existing regional and national research and development and training / academic centres to generate new knowledge and strengthen integration of existing knowledge focused on innovative, relevant, climate responsive approaches to healthy urban food, waste management and ecosystems.
This applies from national to regional and international level, with many existing networks for this such as EQUINET, The regional local government networks, area specific networks like Waternet, the network of schools of public health, research networks and so on.

These recommendations are now being taken forward for follow up work and for discussion in other forums, and will be presented at the ECSA HC Best Practices Forum in June 2024 within a session on climate-responsive, integrated approaches to urban health and nutrition.

4.3 Local authorities as a vehicle for scale up

Ms Shylette Dzivai, Chegutu Municipality, Zimbabwe chaired and moderated a panel on local authority forums as a vehicle for scaling up practice and law in urban health. The panel involved *Mr Tserayi Machinda, Urban Councils Association of Zimbabwe (UCAZ*) and Mr *Alfred Ogwang, Urban Authorities Association of Uganda (UAAU*).

Shylette asked the panel to outline what the role and composition of their institution, particularly on the role they play in sharing practice and scaling up practice and legal review, and the recommendations they would want to present to government ministers to support good practice.

Photo: The panellists and moderator in the panel on local authority forums as a vehicle for scaling up practice and law in urban health

Mr Machinda, UCAZ noted that UCAZ has 32 urban authorities as members. Amongst the various UCAZ forums there is a Health Officers Forum that involves all Heads of City Health Departments, the UCAZ Secretariat and stakeholders by invitation. The latter provides a platform for integrated and coordinated urban health practice and policy in Zimbabwe among local authorities in Zimbabwe. These forums provide a resource pool of expertise, inter-city exchange of good practices, and improved accountability of service providers to citizens needs. They enable increased engagement between central government,

local authorities and stakeholders, with joint advocacy and advice to government departments having better impact. The forums also advise councils on research and development needs with the aim of ensuring that policy and practice are based on sound science and information; and build capacity of local authorities' staff and elected officials, including to debate and make input on new public health policies, legislation and strategies.

He reported that UCAZ has various success stories on urban health policy and practice, such as on

- Community Health Clubs created by Harare residents to provide clean and safe water;
- The COVID-19 pandemic and urban policy interventions in Zimbabwe;
- Development of public health model by-laws; and
- By laws on food safety, anti-litter, and food vending

He also reported that the last UCAZ health officers forum discussed case study work on health promoting food systems from work in 7 local authorities with partners (TARSC/EQUINET) and resolved to scale up key areas of practice from the work in all local authorities, so UCAZ is now involved in supporting this follow up. He also reported on UCAZ work on service level benchmarking and peer review for water supply, sanitation and hygiene services.

Mr Ogwang, explained the history and composition of the UAAU. He noted that the association provides a platform for sharing experiences and practice between different local authorities affiliated to the UAAU. The association has some thematic areas around which they organise meetings and exchanges. For example, UAAU submitted a proposal to the central government for the local authorities to receive funds for slum upgrading, and in the most recent budget were allocated 2 billion Uganda shillings. They see this as a start to a wider programme. However, he noted that local governments are often not adequately consulted in national policy development despite the fact that this would enable compliance and implementation.

The speakers recommended that their associations be consulted in policy, that they plan for the longer term, bring experts from other countries, and use their structures to widen good practices within and across countries. The session moderator noted the key role of such associations in generating by laws, policies, scaling up practice and tracking progress. She noted also the importance of including indicators on food, waste, nutrition and ecosystems in their peer review processes to support and sustain scale up.

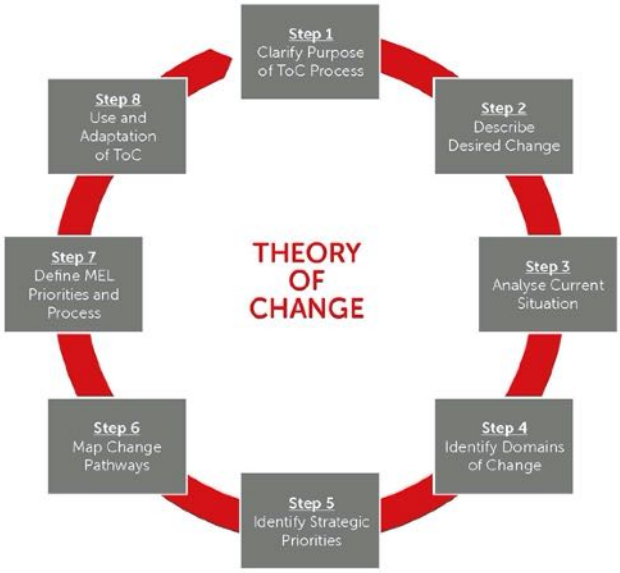
5. Moving forward and tracking progress and outcomes

Mr Tserayi Machinda, UCAZ chaired the next step of the meeting process for delegates to identify actions and formats for advancing and communicating work in the region and in countries on the key areas recommended (as were shown in *Box 1*).

5.1 Theory of change driven proposals for scale up of integrated practice

Dr Rene Loewenson, TARSC presented information on using a theory of change to identify follow up actions for two key areas arising from the meeting

a. Scaling up and leveraging national/ regional support for promising UH practices, particularly on integrated approaches for food, waste, energy and green spaces and for local technology R&D and use.
b. Institutionalising HIA tools and information to tackle CDOH nationally and regionally



Delegates were divided into two groups, each group taking one of the two areas above based on their background work and experience. The groups worked concurrently in a structured process to apply a theory of change as shown in the adjacent figure (Van es et al., 2015). The groups developed in stages:

A: The prioritised goals/desired change by end 2030? (on green cards)
B: Key features of the current situation to address that are relevant to the goals (on pink cards)
C: Between the current situation and the goals, the key measures and steps in sequence to produce the change (on yellow cards)

The groups also noted the assumptions they were making in the process. (*Read more on implementing a theory of change in Part 2 of Making Change Visible at* https://www.tarsc.org/publications/documents/MCV%20Implementers%20Resource%202022%20for%20web.pdf)

The delegates in plenary reviewed and contributed to the two theories of change . While there were time constraints that limited the process – for example to identify measures to monitor progress - the final versions produced are shown overleaf and will inform follow up dialogue and work regionally and within countries.

Photos:
Right: Delegates developing the theory of change on Scaling up and leveraging national/ regional support for promising UH practices

Below: The group explaining their theory of change on institutionalising HIA tools and information

GROUP 1: SCALING UP AND LEVERAGING NATIONAL/ REGIONAL SUPPORT TO SCALE UP PROMISING UH PRACTICES

Communities, governments, structures and systems in food,, waste, energy sectors have adopted and are using affordable, usable, appropriate and accessible terchnologies

Urban food, waste and water systems are integrated across all dimensions, vertically and horizontally

There is sustainable investment on R&D by both public and private sectors that support the food, waste, energy system at all levels

Ensure, monitor, review and improve functioning of multi-sectoral processes and partnerships in urban systems

Engage / advocate on financial stumulus packages

Negotiate for technology transfer

Certify and standardise products

Set up / expand co-ordinating structures for food, waste, energy at different levels for both financing and implementarion

Implement budget monitoring and expenditure tracking

Fund innovation hubs for technology R&D

Engage media on issues and success stories

Integrate technical training on technology needs

Direct financing, budgets to integrated systems

Mobilise the required resources

Document locally available technologies

Build capacities of key actors in integrated food, waste, energy systems

Establish financial co-ordination mechanisms

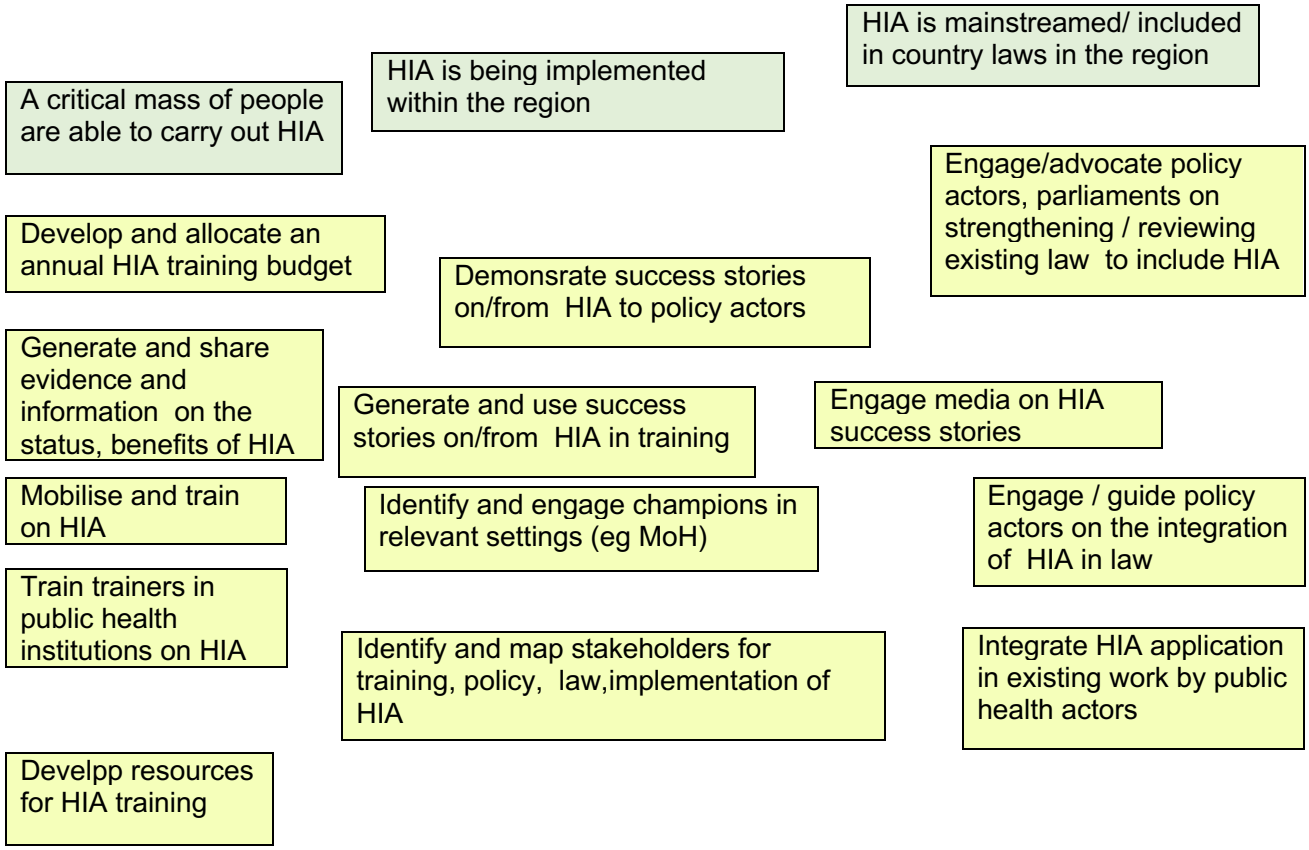
Map available financial opportunities/ funds

Identify, map and profile the key stakeholders

Implement assessment of financing and expenditure

Technologies are not readdily available and are expensive and unaffordable	Sectors are siloed and not working toghether/talking to each other	Investments are small, scanty and unsustainable, eg many are pilot in nature
There is no accessible information on available technologies There is limited evodence on locally produced/used technologies	Food security and food systems are weakly prioritised (in policy)	Investments are external funder led and respond to international vs national/local priorities and interests

GROUP 2: INSTITUTIONALISING (HIA) TOOLS AND INFORMATION TO TACKLE CDOH NATIONALLY AND REGIONALLY



There are few people with capacity to implement HIA	EIA experts do not see the need for HIA	HIA not housed in the relevant Ministry/department	Dearth of evidence on impacts of CDOH
Limited awareness and knowledge on HIA	Policy actors do not understand HIA	Technical institutions do not understand HIA	Public health laws weak on CDOH
			Only 3 ESA countries have law / guidance institutionalising HIA

5.2 Communicating the work and proposals to different stakeholders

Delegates continued the discussion on follow up with a focus on communicating the recommendations, knowledge and work to different audiences. They identified four target audiences. In a participatory 'market place' activity, they then identified the products and messengers and networks for amplifying message for each of these target audiences.

The four key audiences identified by delegates were

a. Community.
b. Various local urban health actors / implementers.
c. Technical actors and agencies supporting urban health.
d. Policy leads, particularly at national and regional level.

The outcome of the 'market place' discussions is shown in the table below. Products/processes, messengers or amplifiers that were identified for more than one target audience are shown in italics.

COMMUNITY	URBAN HEALTH ACTORS	TECHNICAL ACTORS	POLICY LEADS
COMMUNICATION PRODUCTS/ PROCESSES			
Posters Community forums *Radio/spot messages* *Dramas* Competitions E*xhibitions* Sports events	Fliers. *Policy briefs* *Posters* Social media *Radio messages* Jingles, music, art edutainment *Dramas* Road shows Town hall meetings	Fact sheets *Policy briefs* In person meetings *Concept notes* Testimonies *Success stories* *Technical Reports* Maps Journal paper *Audio/video podcast*	*Policy briefs* *Audio/video podcast* Newspaper features TV programmes *Radio messages* Petitions *Concept notes* *Success stories* Dialogue forums Memos Powerpoint presentations *Technical reports* *SMS messaging*
MESSENGERS			
Community leaders Civil society State extension /community workers Community radio Social enterprises *Social influencers*	UH stakeholders *Technical UH actors*	Conference/workshops Webinar Presentation *Strategic events* eg commemorations *Exhibitions* Accelerator programme	Press Media journalists *Technical actors* Development banks (eg ADB) African company CEOs *Influencers*
AMPLIFIERS			
Radio *SMS messaging* Local forums *Faith-based orgs* *Civil society orgs* Private sector Indigenous groups Health systems Schools	*Websites* (local,EQUINET) UH champions I*nfluencers* Thought leaders *Faith-based orgs* *Civil society orgs*	Opinion leaders *Mass media* Regional conferences	*Websites* Business forums *Strategic events* UN agencies Development partners (eg WHO) Parliament committees

In the discussion it was noted that some common products/ processes can be used for different audiences, possibly with some modification of language, messaging. Others are audience specific. There is also some overlap in the messengers and amplifiers, suggesting some priority targets to reach. There are some areas that can be done collaboratively as a region and used as resources for all in in country or regional processes. These include success stories, policy briefs, a powerpoint set, video/audio podcasts. EQUINET may take up some of these in follow up

.

Photo: Discussing the communication products and messengers for a policy audience

In the discussion it was also agreed that communication work needs a shared framework to ensure common core messaging in different settings and for different audiences. The 9 recommendations potentially represent such a framework, including to locate stories, fact sheets etc. These recommendations can be worked on for this with media personnel, to ensure clear accessible language.

Finally it was suggested that a technical journal paper could come from the synthesis of the work and meeting with all as co-authors, and institutions were also encouraged to write journal papers on their case studies.

6. Closing the two day meeting

Dr Rene Loewenson noted that a draft report of the meeting would be shared in the forthcoming fortnight for delegates to review, to be finalized thereafter and made available online. She noted also that the recommendations from the meeting will be shared at the ECSA HC Best Practices forum and with other regional partners such as WHJO AFRO, and that the outcome of the meeting will be shared with the EQUINET steering committee. She expressed her gratitude for the active and creative contribution from all delegates, to the Palacina staff, for the funding from Medico International and Open Society Policy Centre, and for the resources and work of all participating institutions.

A different kind of closing remarks was implemented! Delegates using a ball of string connected by throwing the string to a different delegate with why they wanted to keep connecting with them. By the end all delegates were connected in a network shown in the photo below!

We wished all safe travel home and look forward to connecting further on the ideas, actions and recommendations crafted in the meeting. With that the meeting closed

Appendix 1: Programme

Thursday May 23rd

Time	Item	Facilitation
0830-0845	Registration Administration and payments	TARSC Delegates
	Opening, introductions and learning to date	
0845-0930	Welcome, introductions Opening remarks Recap, Aims, outcomes, process for the meeting	*Chairperson: J Masiya, ECSA HC* Rene Loewenson, TARSC/ EQUINET Jones Masiye, ECSA Health Community Rene Loewenson
0930-1015	Overview of contexts, conceptual frameworks, learning from work implemented on urban health and HIA and key issues arising Discussion: Potentials and limits	Rene Loewenson, TARSC
1015-1100	Discussant 1. Using evidence and HIA to expose and control risks to urban health from CDOH Discussant 2. Scaling up a promising urban practice: The Longacres market (10min) Discussion: Opportunities and challenges	Allan Ouko, Pascal Mukanga KDI Paxina Phiri, CPCR
11.00-11.30	Tea/coffee	
11.30-12.15 12.15-1300	Group discussions on features of work to recommend / share for scale up within and across countries in the region GROUP 1: For holistic, climate proofed ways of promoting healthier urban waste, water, food, energy and ecosystems GROUP 2: To provide evidence for / demonstrate risk including commercial and climate-related risks; monitor impacts of intervention, and to engage and act across sectors and groups. GROUP 3: To reward/ incentivise practice, secure resources, and gain higher level support (nationally and internationally) Plenary Discussion of priorities and common across the groups	*Moderator: Rene Loewenson, TARSC* Delegates
1300-1400	Lunch	
	Institutionalising and scaling up promising practice	
1400-1450 1450-1545	Introduction to the session and key issues to explore for scale up of practice 3 round table discussions: 4. Kariba, Zimbabwe- From urban litter-jungles into healthy environments 5. Bembeke, Malawi- From a Waste Dumpsite into a Food Basket 6. Kibuye I, Uganda – Small scale urban farming challenging food insecurity Plenary report back and discussion of practices/issues for scale up of practice	*Chair: Connie Walyaro* Co moderator: Rene Loewenson Casper Mutumbami, Kariba Municipality *Rapporteur: Locadia Muzenda* Wilson Asibu, CMPD Malawi *Rapporteur: Richard Tamva* Alfred Ogwang, UAAU, Waiswa Kakarire, ACTogether, Uganda *Rapporteur: TBC*
1545-1600	Tea/coffee	
1600-1630	Presentations from experience: Learning from implementing an HIA for a commercial sector: policy for agricultural workers in South Africa Learning from research on managing organic solid waste in Antananarivo	*Chair: Thulani Ngamphalala, Eswatini* Nosimilo Mlangeni, NIOH, South Africa Salohy Randrianasolo FARM Madagascar

Time	Item	Facilitation
	Discussion: Enablers and barriers to practice Admin issues and Closing the day	
1645	Closing of the day	

Friday May 24th

Time	Item	Facilitation
	Developing policy and practice recommendations	
0845-1000	Taking forward practice and change nationally and regionally: opportunities and challenges Opportunities and barriers identified in discussions of scale up of circular economy practices in Uganda Legal issues in exposing and managing food and health risks Improving food related law and policy in the region Discussion: Legal and institutional measures / changes	*Chair: Agnes Kirabo, FRA* Danny Gotto, I4D Uganda Rene Loewenson,. TARSC Jones Masiye, ECSA HC
1000-1040	Introduction to and group discussions on recommendations from the meeting on scale up of promising practice on urban health and addressing commercial determinants of health Group 1: On policies, practices and technologies for holistic, approaches to food, waste and energy system that promote health, socio-economic and ecosystem wellbeing Group 2: On improving information systems, evidence and HIA for addressing commercial risks and integrated multi-sectoral systems for health Group 3: On incentivising, resourcing, sustaining promising practice from local to international level	Moderator: R Loewenson Delegates
1040-1100	Tea/coffee	
1100-1130 1130-1150	Plenary feedback on group recommendations Discussion Panel: Local authority forums as a vehicle for scaling up practice and law in urban health – each in 10 min	*Chair: S Dzivai, Chegutu Municipality* Group rapporteurs Alfred Ogwang, UAAU, Tserayi Machinda, UCAZ
	Moving forward, communicating the work and tracking progress	
1150-1250	Introducing theories of change Participatory exercise to set up a theory of change Group 1: Scaling up and leveraging national/ regional support to scale up promising UH practices Group 2: Institutionalising (HIA) tools and information to tackle CDOH nationally and regionally	Moderator: R Loewenson Delegates
1250-1400	Lunch and group photo	
1400-1430 1430-1500	Presentation and discussion of the theories of change The current situation The goals The steps and roles Monitoring and tracking progress on the theory of change steps Discussion	*Chair: Tserayi Machinda, UCAZ* Group rapporteurs Delegates Moderator: R Loewenson Delegates
1500-15	Communicating the work- products, audiences, messengers and networks. Plenary interactive activity for each of the 4 key audiences on Product ideas and messengers; Networks for amplifying Summary, Next steps	Moderator: R Loewenson Delegates
	Closing of the meeting	
1545-1615	Closing remarks	Delegates
1615	Tea/ coffee and end of day. **Closing of the session**	

Appendix 2: Delegate list

	Name	Institution and country
1	Rene Loewenson	Training and Research Support Centre /EQUINET, Zimbabwe
2	Shylette Dzivai	Municipality of Chegutu, Zimbabwe
3	Tserayi Machinda	Urban Council Association of Zimbabwe
4.	Jokoniah Mawopa	Food Federation and Allied Workers Union of Zimbabwe
5.	Casper Mutumbami	Municipality of Kariba, Zimbabwe
6	Agnes Karia	Food Rights Alliance, Uganda
7	Danny Gotto	Innovations for Development, Uganda
8	Salohy Randrianasolo	Femmes en Action Rurales de Madagascar, Madagascar
9	Kakaire Waiswa	ACTogether Uganda
10	Alfred Ogwang	Urban Authorities Association of Uganda (UAAU)
11	Constance Georgina Walyaro	TalkAB[M]R, Kenya
12	Pascal Mukanga	Kounkuey Design Initiative, Kenya
13	Allan Ouko	Kounkuey Design Initiative, Kenya
14	Richard Andrew Tamva	Ex miners association of Malawi, Malawi
15	Nosimilo Mlangenni	National Institite of Occupational Health, South Africa
16	Thulani Ngcamphalala	Swaziland Migrant mineworkers association, Eswatini
17	Paxina Phiri	Centre for Primary Care Research, Lusaka, Zambia
18	Wilson Asibu	Community Minders for Peoples Development, Malawi
19	Lorcadia Muzenda	Abdullah Dzinamarira Foundation Trust (ADFT), Zimbabwe
20	Jones Masiye	East Central and Southern Africa Health Community, Tanzania
21	John Mwendwa	Media consultant to EQUINET, Kenya