



# Prioritising Prevention Webinar

24<sup>th</sup> November 2020

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*A collaboration between:*

**East of England Population Health Research Hub**  
*EoE PHResH*

**NIHR East of England Applied Research Collaboration**  
*NIHR EoE ARC*

**University of Cambridge Centre for Science and Policy**  
*CSaP*



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# Agenda

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## **Prioritising Prevention**

**Tuesday 24<sup>th</sup> November 2020: 14.00 – 15.00**

**14.00 – 14.05**

### **Welcome**

Dr Angelique Mavrodaris, Clinical Research Fellow and Consultant in Public Health Medicine,  
Public Health England – East of England

**14.05 – 14.15**

### **Prioritising Prevention Across the Lifecourse**

Jessica Stokes, Deputy Director - Health and Wellbeing, PHE East of England

**14.15 – 14.30**

### **Prevention Research: what? what? what?**

Dr Helen Walters, Public Health Consultant Advisor, NIHR

**14.30 – 14.45**

### **European and International Perspectives on Disease Prevention, Promoting Health and Wellbeing**

Clive Needle, Senior Policy Advisor, EuroHealthNet

**14.45 – 15.00**

### **Question & Answer Session, Mentimeter and Next Steps**



# Engage with us!

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## Questions for the speakers

Please write your questions in the Chat section of Zoom. We will answer these questions in the Q&A session.

## Let us know your needs and thoughts on prevention

Join our live voting and input into this session by:

1. Jumping onto: <https://www.menti.com/> on your phone or open a new window on your computer
2. Enter the code: **56 36 27 6**

OR visit <https://www.menti.com/2vcg47gr4x>

### To answer the following questions:

*What do you think are the key public health prevention priorities that should be addressed?*

*What do you think are the barriers that currently hinder action on these priorities?*

*How do you think we can better utilise our existing assets and infrastructures to address these barriers or support these priorities?*

**We will share your input after the Q&A session.**





# PHResH-ARC-CSaP

## Prioritising Prevention

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### **Prioritising Prevention Across the Lifecourse**

Jessica Stokes

Deputy Director – Health & Wellbeing

*Public Health England – East of England*



Public Health  
England

Protecting and improving the nation's health

# Prioritising prevention across the lifecourse

[Jessica.stokes@phe.gov.uk](mailto:Jessica.stokes@phe.gov.uk)

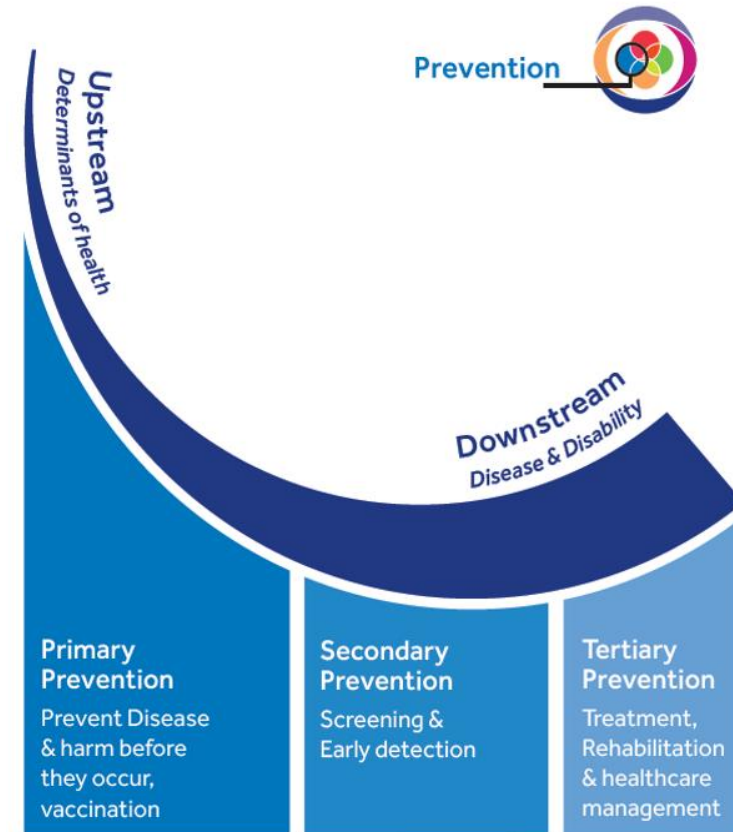
Deputy Director Health & Wellbeing  
PHE East of England

# Prevention is better than cure (DHSC, Nov 2018)

**Prevention** is about helping people stay healthy, happy and independent for as long as possible. This means reducing the chances of problems from arising in the first place and, when they do, supporting people to manage them as effectively as possible. Prevention is as important at seventy years old as it is at age seven.

- Prevention works: significant long-term social return on investment - around £14 of social benefit for every £1 spent across a broad range of areas
- Goal to improve healthy life expectancy by at least 5 years, by 2035, and to close the gap between the richest and the poorest
- Focus on main preventable causes of ill health – healthy lifestyles, the homes and neighbourhoods we live in, the jobs we do, our friends, family and other social connections

## Levels of prevention



Source: The Commonwealth Health Hub

## Positive and negative influences across the life course

### Protective factors:

- having a healthy and balanced diet
- an environment that enables physical activity
- good educational attainment
- being in stable employment with a good income
- living in good quality housing
- having networks of support including friends and family



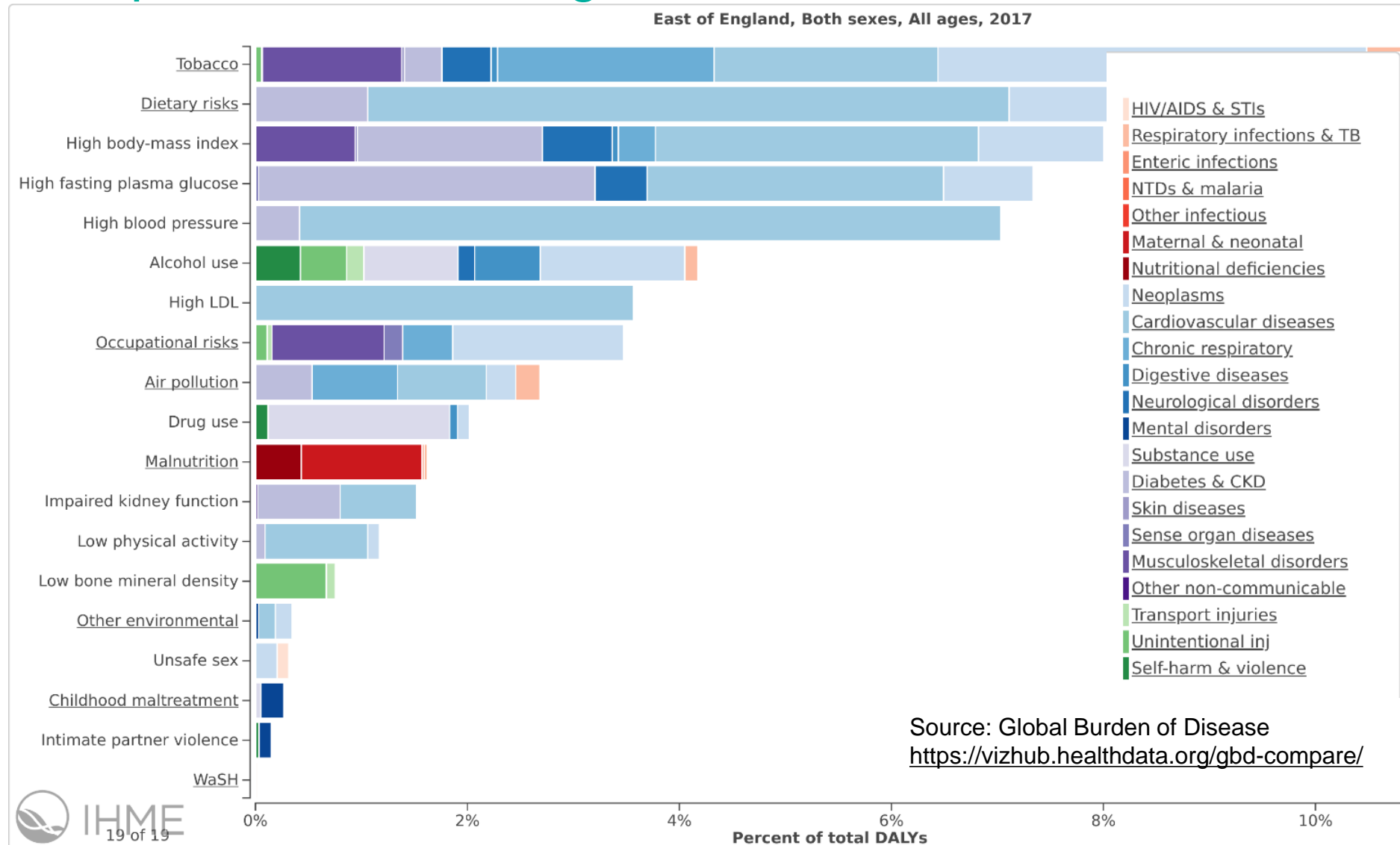
### Risk factors:

- smoking
- adverse childhood experiences
- crime and violence
- drug and alcohol misuse
- poor educational attainment
- poor mental health



Source: Health matters: Prevention – a life course approach. PHE, May 2019

# We have good evidence on factors contributing to early death and poor health in our region





# NHS Long Term Plan (LTP), January 2019

## Chapter 2: More NHS action on prevention and health inequalities

LTP commitments:

- ✓ **Smoking cessation services**
- ✓ **Alcohol Care Teams in hospitals**
- ✓ **Obesity**
- ✓ **Antimicrobial resistance**
- ✓ **The NHS contribution to reducing air pollution**

Systems will need to work in close partnerships with regional and local Directors of Public Health to set out how they and their **local authority partners who have commissioning responsibility** for many of these preventative services will develop and deliver prevention activities that respond to local health needs.

**1 IN 4**

patients admitted to hospital are smokers



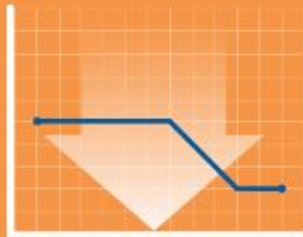
Over **840,000**

smokers are hospital inpatients



In a study of impact of treating tobacco dependence in hospitals in Ontario, Canada found:

**6%**  
drop in mortality rate at 1 year



**6%**  
drop in readmission rate at 30 days

There were nearly **1.2 million**

hospital admissions attributed to alcohol in 2017/18



Source: Health Matters: tobacco and alcohol CQUIN. PHE, March 2019.

# NHS LTP Prevention Commitments

Topic:	Commitments include:
<b>Smoking</b>	<ul style="list-style-type: none"> <li>• By 2023/24, <b>all people admitted to hospital</b> who smoke will be offered NHS-funded tobacco treatment services</li> <li>• The model will also be adapted for expectant mothers, and their partners, with a new <b>smoke-free pregnancy</b> pathway</li> <li>• A new universal smoking cessation offer will also be available as part of <b>specialist mental health</b> services for long-term users of specialist mental health, and in learning disability services</li> </ul>
<b>Alcohol Care Teams (ACTs)</b>	<ul style="list-style-type: none"> <li>• Hospitals with the highest rate of alcohol dependence-related admissions will be supported to <b>fully establish ACTs</b> to provide specialist interventions and input into the care of alcohol dependent patients</li> </ul>
<b>Obesity</b>	<ul style="list-style-type: none"> <li>• Targeted support offer and <b>access to weight management services</b> in primary care for people with a diagnosis of type 2 diabetes or hypertension with a BMI of 30+</li> <li>• <b>Doubling of the NHS Diabetes Prevention Programme</b> over the next five years, including a new digital option to widen patient choice and target inequality.</li> <li>• The NHS will continue to take action on healthy NHS premises.</li> </ul>
<b>Air pollution</b>	<ul style="list-style-type: none"> <li>• NHS will work to reduce air pollution from all sources. Specifically, we will cut business mileages and fleet air pollutant emissions by 20% by 2023/24</li> </ul>
<b>AMR</b>	<ul style="list-style-type: none"> <li>• Continue to support implementation and delivery of the government's new five-year action plan on Antimicrobial Resistance</li> </ul>
<b>PLUS stronger action on health inequalities</b>	<p>Including: maternity continuity of carer, physical health checks for people with SMI, learning disability and autism, homelessness and rough sleeping, identifying and supporting carers, social prescribing, gambling, VSCE, Anchor institutions</p>

# Advancing our health: prevention in the 2020s – consultation document, HM Government, July 2019

Decade of proactive, predictive and personalised prevention

- targeted support
- tailored lifestyle advice
- personalised care
- greater protection against future threats

Building on LTP

- announcing a smoke-free 2030 ambition
- publishing Chapter 3 of the Childhood Obesity Strategy, including bold action on: infant feeding, clear labelling, food reformulation improving the nutritional content of foods, and support for individuals to achieve and maintain a healthier weight.
- launching a mental health prevention package, including the national launch of Every Mind Matters

# Prevention and COVID-19

Evidence suggests excess weight is associated with an increased risk of the following for COVID-19:

- a positive test,
- hospitalisation,
- advanced levels of treatment (including mechanical ventilation or admission to intensive or critical care)
- and death.

Risks seem to increase progressively with increasing BMI above the healthy weight range, even after adjustment for potential confounding factors, including demographic and socio-economic factors.

Impact of lockdown on food purchasing and physical activity

Source: Excess weight and COVID-19: insights from new evidence. PHE, July 2020

# Urgent actions to address inequalities in NHS provision and outcomes, August 2020

## Action 4: Accelerate preventative programmes which proactively engage those at greatest risk of poor health outcomes

- **Improve uptake of the flu vaccination in underrepresented ‘at risk’ groups** such as those living in the most deprived 20% of neighbourhoods, those from BAME communities and people with a learning disability;
- **Develop priority lists for preventative support and long-term condition management**, such as for obesity management and hypertension e.g. generating referrals into the NHS Diabetes Prevention Programme on individuals of South Asian, Black African and Black Caribbean ethnicity and those from the most deprived communities.
- Ensure that everyone with a **learning disability** is identified on the GP register and that **annual health checks** are completed
- improve the provision of comprehensive physical health checks and follow-up interventions for people with severe mental illnesses (SMIs).
- In **maternity**, ensure that the proportion of Black and Asian women and those from the most deprived neighbourhoods on **continuity of carer** pathways meets and preferably exceeds the proportion in the population as a whole

# Prioritising prevention of ill health across the lifecourse

Action is needed by the NHS, by national government and by local government, working in partnership with the voluntary, community and private sector.

- Ensure your intervention fits the life course framework of taking action early, appropriately and together
- Take the long view - consider the intra and intergenerational aspects of the issue you are trying to tackle
- Consider how your intervention minimises risk factors and enhances protective factors
- Ensure your intervention strives to achieve health equity and tackle health inequalities, working together with partners
- Undertake evaluation and monitoring of your approach to add to the evidence base

Source: Health matters: Prevention – a life course approach. PHE, May 2019

# References

Prevention is better than cure. DHSC, November 2018. <https://www.gov.uk/government/publications/prevention-is-better-than-cure-our-vision-to-help-you-live-well-for-longer>

The Commonwealth Health Hub. <https://www.thecommonwealth-healthhub.net/prevention/>

Health matters: Prevention – a life course approach. PHE, May 2019.  
<https://www.gov.uk/government/publications/health-matters-life-course-approach-to-prevention/health-matters-prevention-a-life-course-approach>

NHS Long Term Plan. NHS, January 2019. <https://www.longtermplan.nhs.uk/>

Health Matters: tobacco and alcohol CQUIN. PHE, March 2019.  
<https://www.gov.uk/government/publications/health-matters-preventing-ill-health-from-alcohol-and-tobacco/health-matters-preventing-ill-health-from-alcohol-and-tobacco-use>

Advancing our health: prevention in the 2020s – consultation document. DHSC, July 2019  
<https://www.gov.uk/government/consultations/advancing-our-health-prevention-in-the-2020s/advancing-our-health-prevention-in-the-2020s-consultation-document>

Excess weight and COVID-19: insights from new evidence. PHE, July 2020  
<https://www.gov.uk/government/publications/excess-weight-and-covid-19-insights-from-new-evidence>

Implementing phase 3 of the NHS response to the COVID-19 pandemic. NHS, August 2020.  
<https://www.england.nhs.uk/publication/implementing-phase-3-of-the-nhs-response-to-the-covid-19-pandemic/>





# PHResH-ARC-CSaP

## Prioritising Prevention

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### Prevention Research: what? what? what?

Dr Helen Walters  
Public Health Consultant Advisor  
*NIHR*

# Prevention research: what? what? what?

Dr Helen Walter, Consultant Advisor, NIHR  
Prioritising Prevention Webinar

November 2020

@PHev4LG



- **What** do we mean when we say “prevention”?
- **What** prevention is important?
- **What** prevention research is needed?

# What do we mean when we say “prevention”?

## Definition:

“the action of stopping something from happening or arising”

## What are we trying to prevent?

Death?

A horrid death?

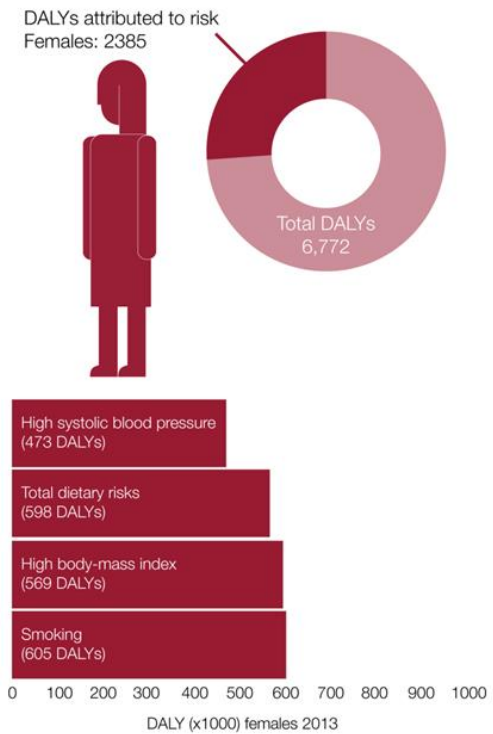
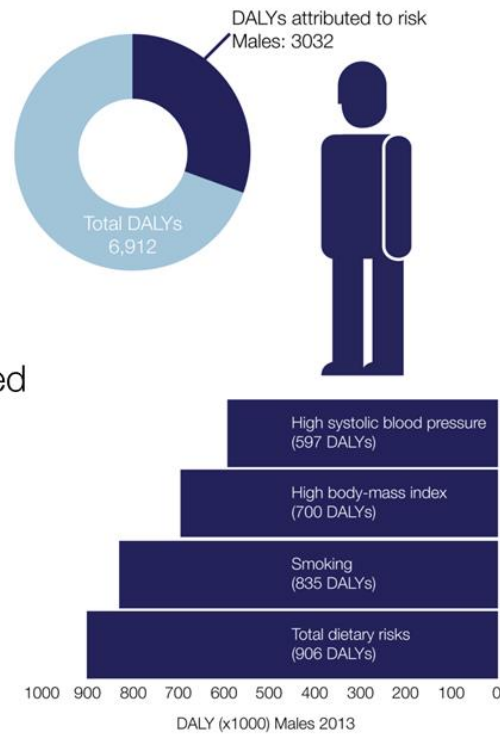
Disease progression?

Disease itself?

Determinants of disease?

# What prevention is important?

Disability  
adjusted life  
years attributed  
to largest risk  
factors, by  
gender, 2013



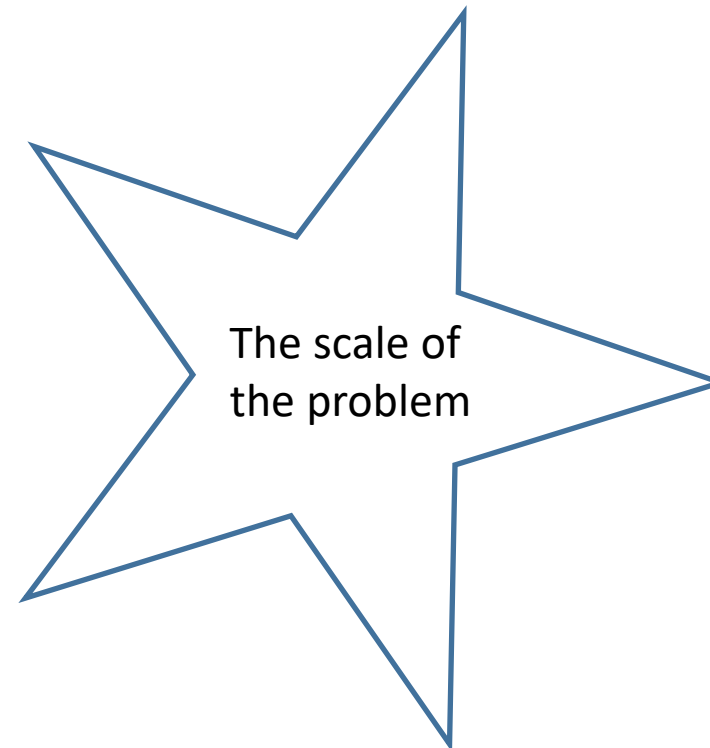
# What prevention is important?

Common risk factors for all major diseases:

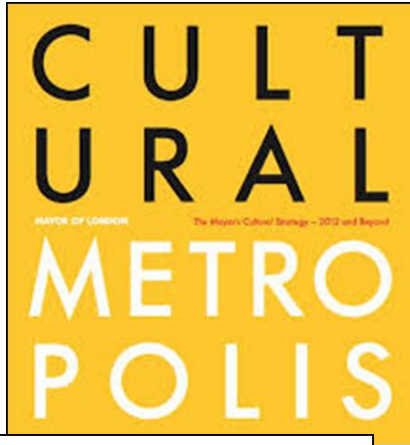
- Lack of movement
- Poor diet
- Smoking

Common determinants:

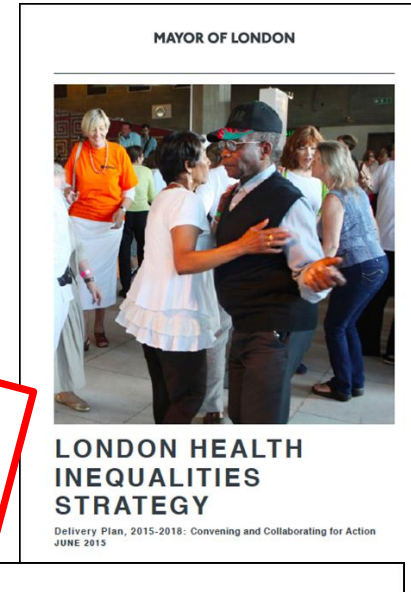
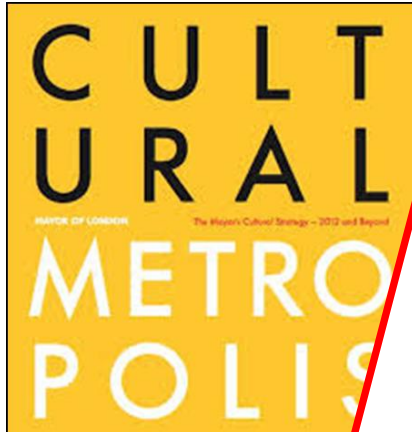
- Poverty
- Place
- People



# Local government impacts all this



# Local government impacts all this



The NHS  
doesn't...





## What prevention research is needed?

- Stuff that is useful and will make a difference
- Stuff that looks at populations (not individuals)
- Stuff that recognises the complexity of real life



**Efficacy and Mechanism Evaluation Programme**

The Efficacy and Mechanism Evaluation (EME) Programme funds 'science driven' studies with an expectation of substantial health gain, and ai...

[More](#)



**Health Services and Delivery Research Programme**

The Health Services and Delivery Research (HS&DR) Programme aims to produce rigorous and relevant evidence to improve the quality, accessibi...

[More](#)



**Health Technology Assessment Programme**

The Health Technology Assessment (HTA) Programme is the largest of the NIHR programmes. We fund independent research about the effectiveness...

[More](#)



**Invention for Innovation Programme**

The Invention for Innovation (i4i) Programme aims to support and advance the research and development of innovative healthcare technologies ...

[More](#)



**Programme Grants for Applied Research**

Programme Grants for Applied Research (PGfAR) were established in 2006 to produce independent research findings that will have practical ap...

[More](#)



**Public Health Research Programme**

The Public Health Research (PHR) Programme funds research to evaluate non-NHS interventions intended to improve the health of the public and...

[More](#)



**Research for Patient Benefit Programme**

The Research for Patient Benefit (RfPB) Programme is a national, response-mode programme established in 2006 to generate high quality resear...

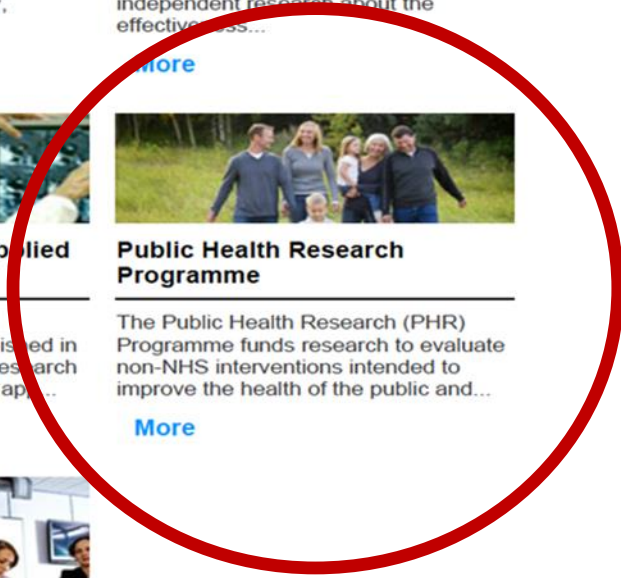
[More](#)



**NIHR Fellowships**

The NIHR Fellowship Programme was launched in 2008 with the aim of developing research capacity in health, and health and social care...

[More](#)



£17m

# What is the PHR Programme?

## Purpose and Remit:

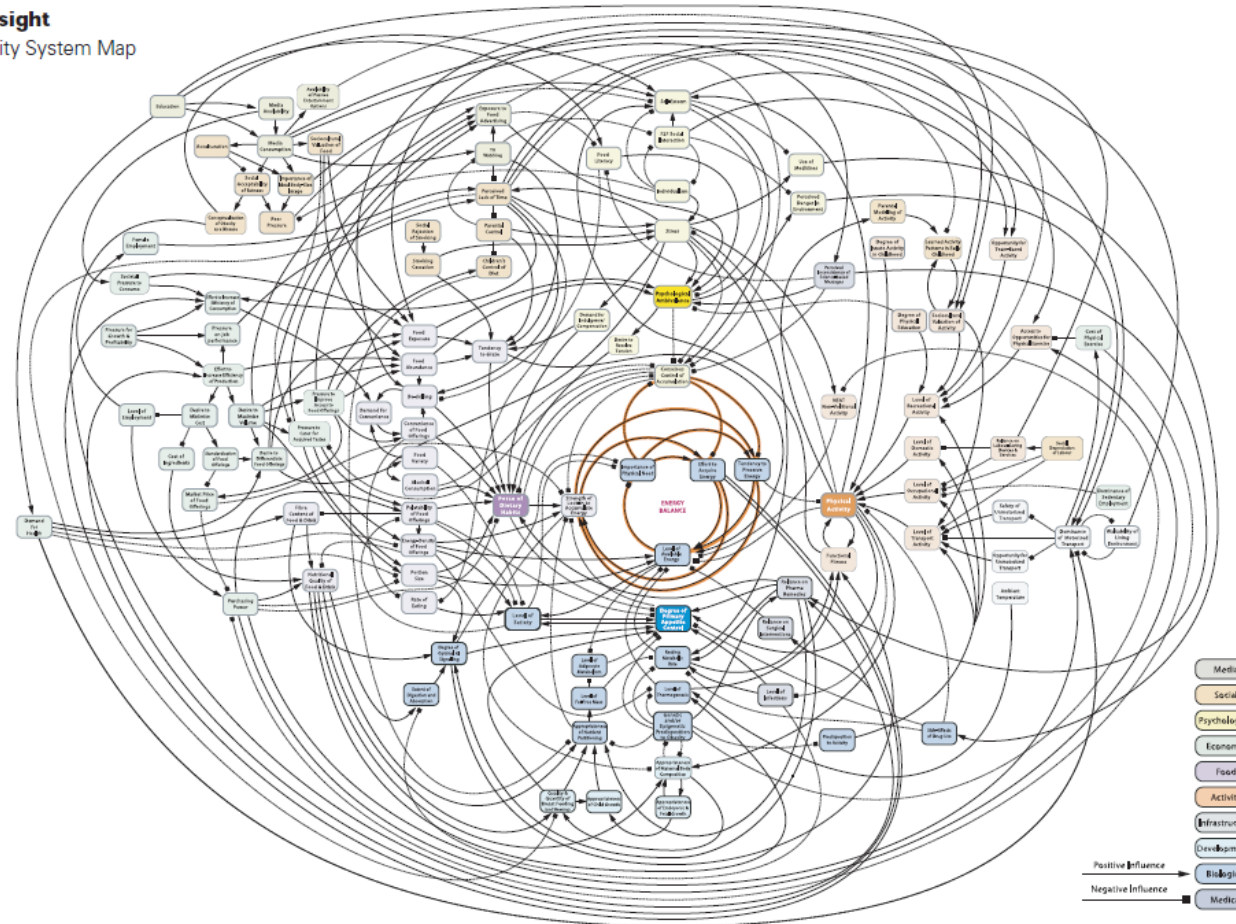
To fund research to generate evidence to inform the delivery of non NHS interventions, specifically, we provide new knowledge on the benefits, costs, acceptability and wider impacts of non-NHS interventions intended to improve the health of the public and reduce inequalities in health.

# Stuff that looks at populations



# Stuff that recognises the complexity of real life

Foresight  
Obesity System Map



# PHIRST: Research what is already happening



no  one  
left behind



# Involve the front line



# Evidence for Local Decisions

- Urban regeneration and health
- Community engagement and disadvantaged communities
- Alcohol environment

09/3007/02

Change in alcohol outlet density  
and alcohol-related harm to  
population health (CHALICE)





## Evidence about the Environment

- Transport – urban motorway, free bus travel, active and sustainable travel
- Housing quality and energy efficiency
- Effect of reducing street lighting on crime and road accidents
- Air quality

09/3001/13 - 'On the buses'

16/139/01 – London's Ultra Low Emissions  
Zone



# National Policies

- Sugar tax
- Minimum Unit Pricing
- Smoke free prisons



16/49/01 - Evaluation of the impacts on health of the UK industry levy on sugar sweetened beverages

11/3005/40 - Evaluating the implementation of Minimum Unit Pricing of Alcohol in Scotland

15/55/44 - Evaluating the implementation of indoor smoke free prison facilities in Scotland

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Thanks for listening

Any Questions ?

[helen.walters@nhr.ac.uk](mailto:helen.walters@nhr.ac.uk)



@PHev4LG



# PHResH-ARC-CSaP

## Prioritising Prevention

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**European and International  
Perspectives on Disease  
Prevention, Promoting Health and  
Wellbeing**

Clive Needle  
Senior Policy Advisor  
*EuroHealthNet*

# Prioritising prevention

European / international perspectives for disease prevention, promoting health and wellbeing



# About EuroHealthNet

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- The European Partnership for Health, Equity and Wellbeing
- 61 members in 26 European countries
- Reducing health inequalities in Europe & improving health and wellbeing for all
- Liaising with EU Institutions, WHO and policy makers
- Facilitating cooperation between public health bodies

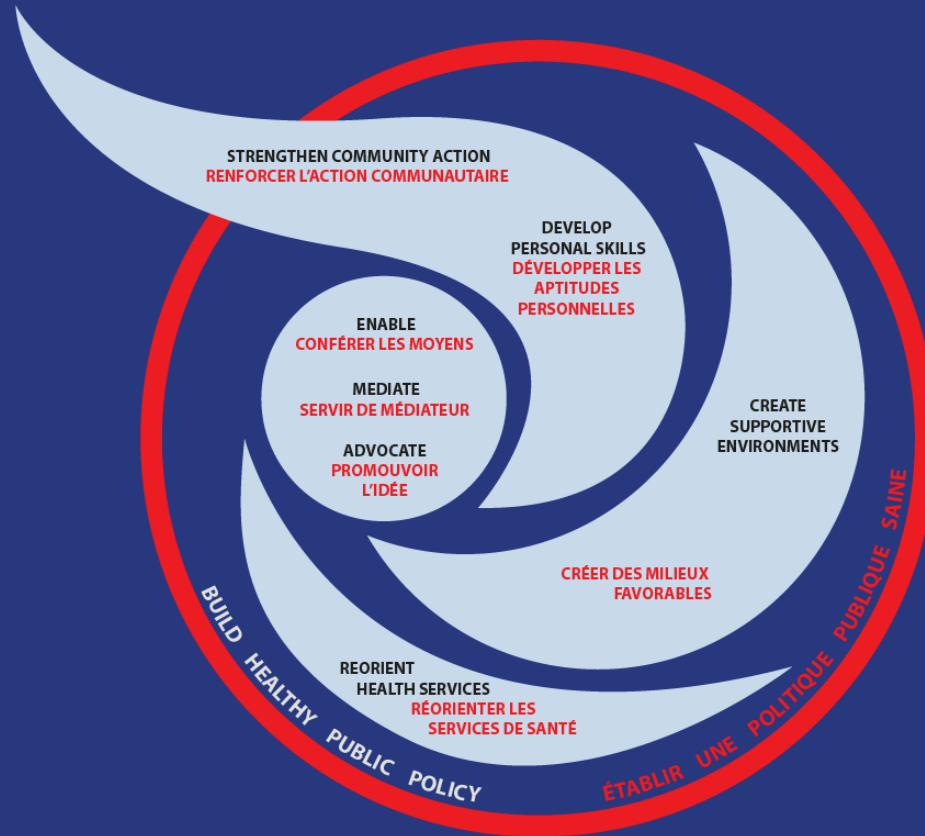


# Health promotion in a changing world



## Develop personal skills

- Digital Health Literacy
- Skills and Capacities



Create supportive environments

A healthier, fairer future for people and planet

- INHERIT
- CHAIN



Building healthy public policy

— Economies of Wellbeing

# Health promotion in a changing world

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## Reorient Health Systems

- Invest in health promotion and disease prevention
- Financing Guide ○

Advocate, enable, mediate

Social, economic and environmental determinants of health in all activities

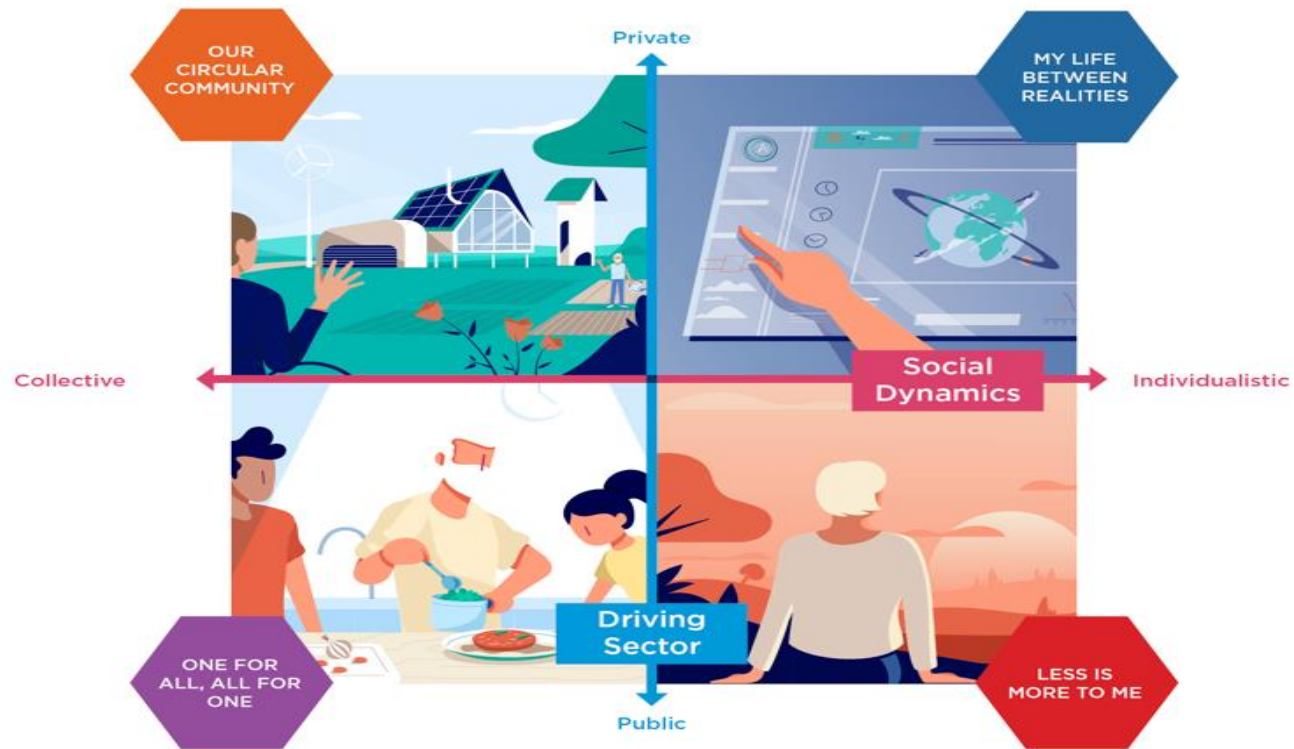
Strengthen community actions

- Chrodis+
- JAHEE
- TWIG on best practice databases for prevention





# • FORESIGHT



## PUBLIC HEALTH FORESIGHT IN LIGHT OF COVID-19 (EuroHealthNet, RIVM)

- Key challenges & opportunities
- Short & long-term

*Foresight*  
headlines for  
national and  
regional  
actions:  
*improve and  
increase*

“Glocalisation”

Health equity impact assessments

3 U’s for healthier technologies

Early years – children -adolescence

Mental wellbeing

Older adults

# HEALTH IN THE SDG ERA





## UN Research Roadmap for the COVID-19 Recovery

Leveraging the  
Power of Science  
for a More Equitable,  
Resilient and  
Sustainable Future



*“... The co-presence of both universalising and particularising tendencies...”*

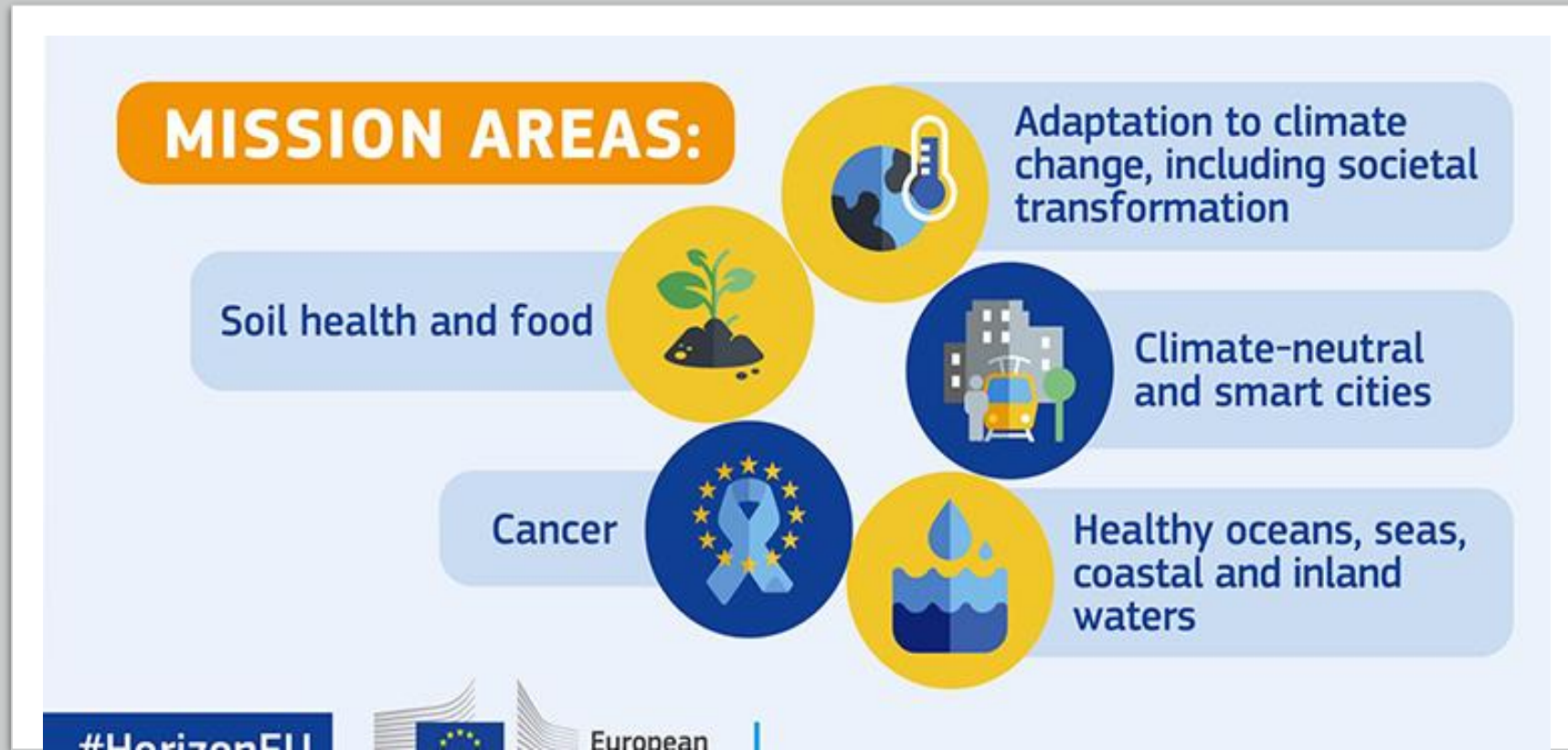
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- **Health Systems and Services:** What strategies and financing models are most effective in expanding universal health coverage?
- **Social Protection and Basic Services:** What are the most effective and equitable ways of ensuring basic income protection for all?
- **Economic Response and Recovery:** How can food supply chains be secured for the world’s most marginalized populations to ensure food security and nutrition in all circumstances?
- **Macroeconomic Policies and Multilateral Collaboration:** What lessons from past economic crises can inform the design of national, regional and global recovery strategies?
- **Social Cohesion and Community Resilience:** What are the best strategies for building sustainable, inclusive and resilient cities that protect people from future pandemics and climate change?

# WHO Europe Programme of Work



- **Mental Health Coalition**
  - **Empowerment through Digital Health**
  - **Immunisation to 2030**
  - **Healthier Behaviours and cultural insights**
- 
- <https://www.euro.who.int/en/health-topics/health-policy/european-programme-of-work/flagship-initiatives>



Horizon Europe “Missions” 2021 -27  
Supporting Recovery / Green Deal / Digital  
Transformations

RESEARCH PLATFORM

# INFORMING POLICIES AND ADVOCATING FOR HEALTH EQUITY



Centre for global health inequalities research



**INHERIT**  
Health | Equity | Environment



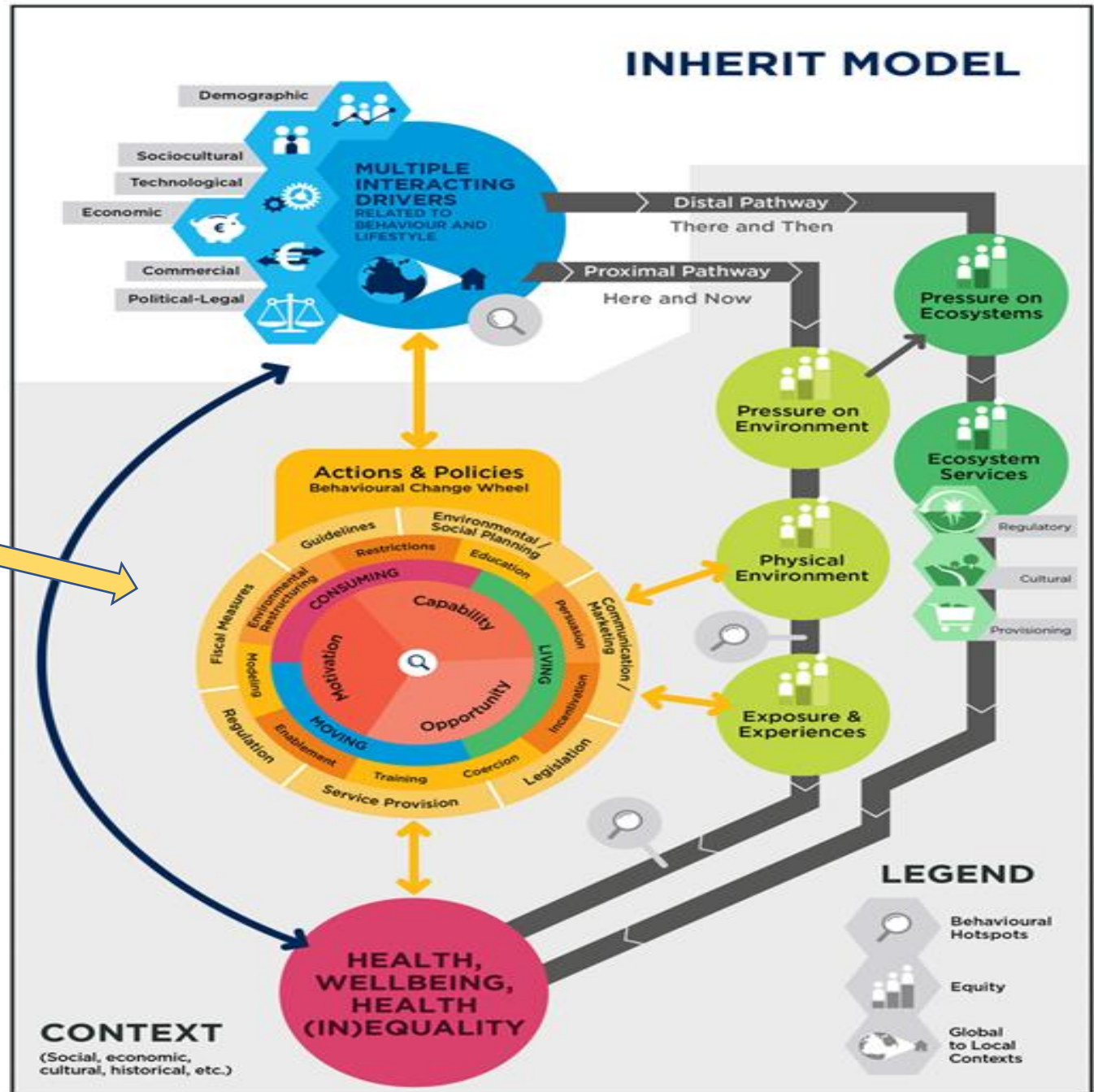
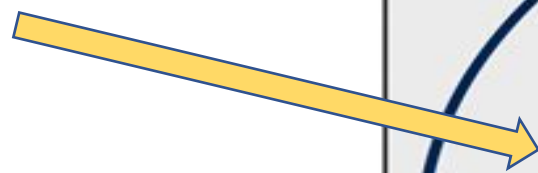
Global Health  
& Education

- Co-ordinating H2020 projects & Horizon Europe planning
- Policy and practice learning outcomes from studies e.g. INHERIT, DRIVERS

**MEMBER OF  
CHAIN**



1. Capability
2. Opportunity
3. Motivation





# State of health in Europe 2020



- “There has been a **clear social gradient in COVID-19 deaths**. This highlights the need for a strong focus on policies to tackle the social determinants of health, including inclusive social and economic policies and interventions beyond the health system that **address the root causes of inequalities**.
- **Air pollution** causes about EUR 600 billion in economic and welfare losses annually across EU countries. The EU recovery plan from the COVID-19 crisis provides a unique opportunity to **promote a green economic recovery**... The **health sector itself can contribute** to achieving this objective by minimising its own environmental footprint. Through multi-sectoral approaches, **public health authorities can also contribute** to environmentally friendly urban and transport policies.
- ... modifiable risk factors also have important impacts on people’s health and mortality, notably **smoking, alcohol consumption, unhealthy nutrition, lack of physical activity and obesity**...”
- OECD/European Union (2020), *Health at a Glance: Europe 2020: State of Health in the EU Cycle*, OECD Publishing, Paris, <https://doi.org/10.1787/82129230-en>.

# EU Joint Action for Health and Equity (JAHEE)

## Direct consequences

- Infection
- Susceptibility
- Severity
- Mortality
- Accessibility & care quality
- Displacement

## Longer term consequences

- Poverty & unemployment
- Isolation
- Barriers to education
- Barriers to community resources
- Barriers to social care
- Social mobility



## Children's rights in Great Britain

Submission to the UN Committee on  
the Rights of the Child

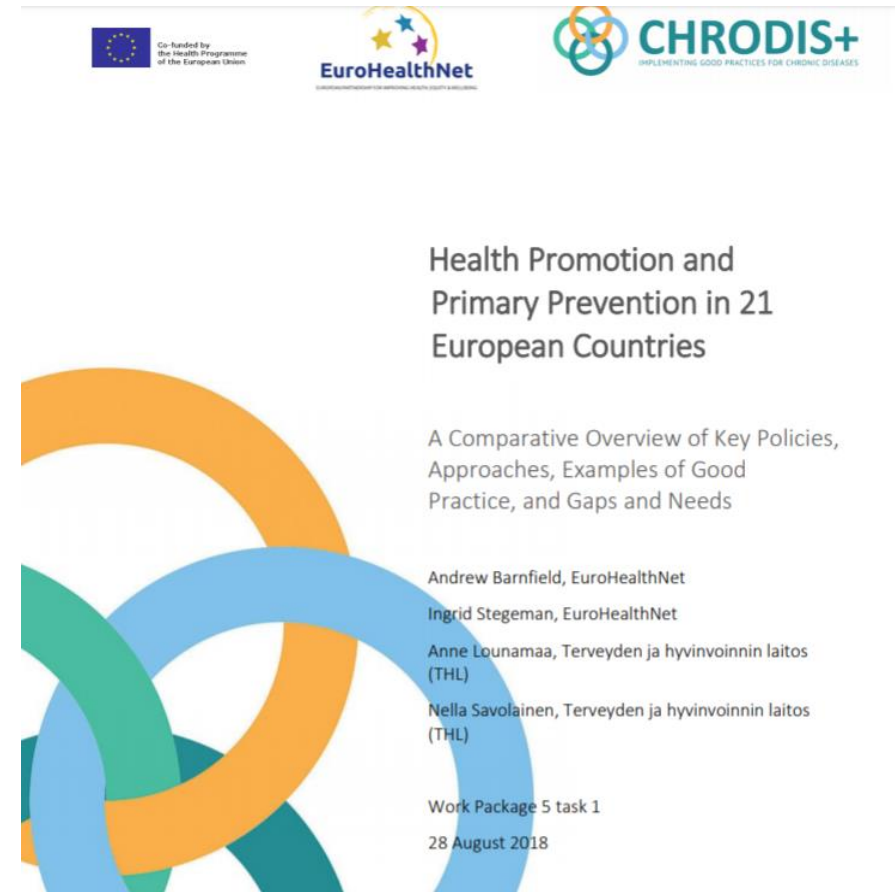
# Local to global priorities

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- “In [our latest report](#) to the [UN Committee on the Rights of the Child \(UN CRC\)](#) , published on International Children's Day 2020, we have expressed significant concerns about how **the pandemic is exacerbating existing inequalities, and having a devastating impact on children's rights, well-being and futures.** Key concerns include more children being pushed into poverty, widening educational inequalities and worsening mental health.
- Although **the effect of the pandemic on children's mental health is not yet fully understood**, we have warned that the **combined impact of limited capacity within the mental health service and children being cut off from support at school, could be severe and long-lasting.**”

# Chrodis Plus Joint Action – EU States

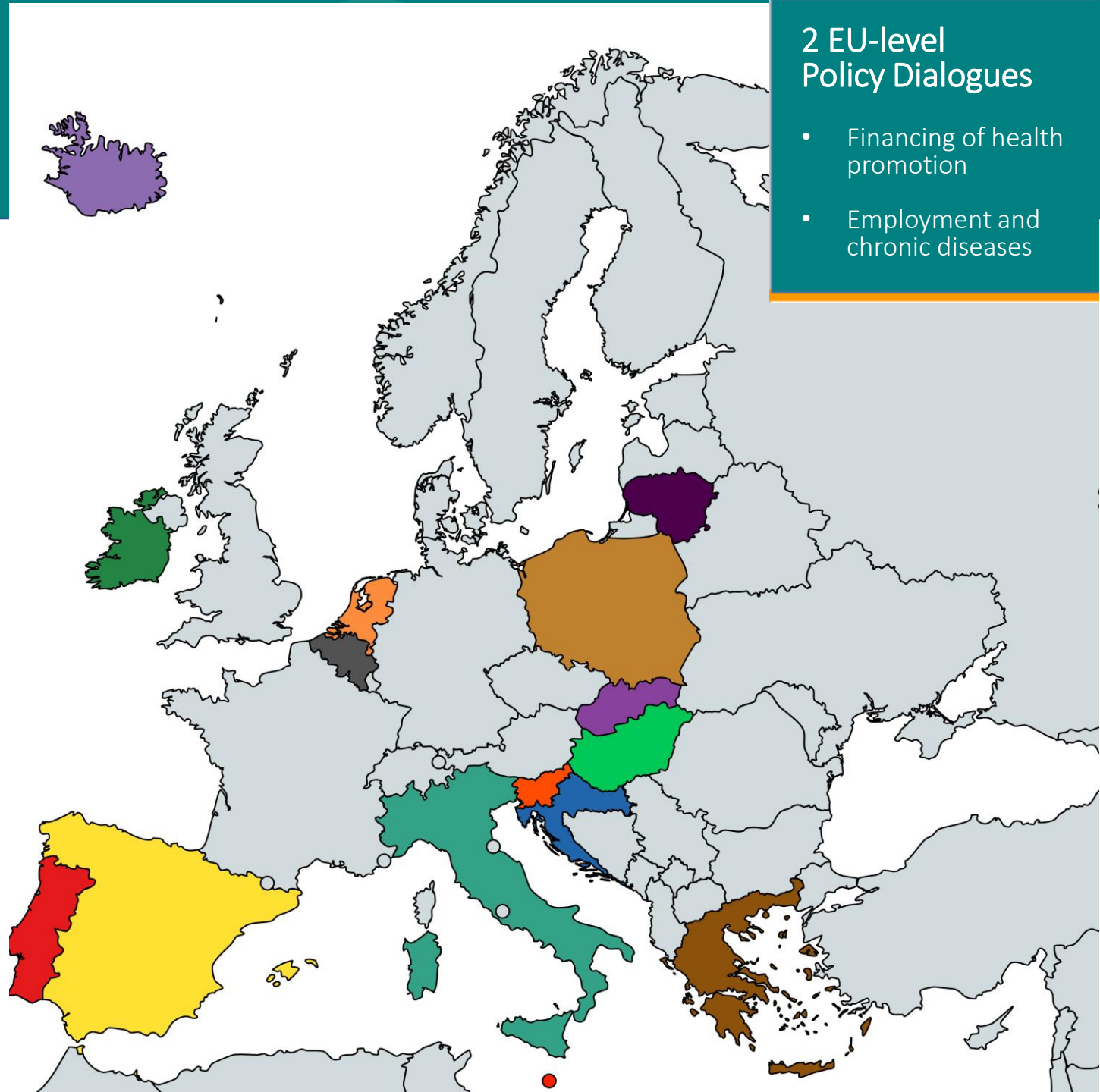
- analysing and assessing countries' health promotion and disease prevention strategies;
- transferring and implementing good practices targeting children, working populations and older adults;
- better integrating health promotion and disease prevention in healthcare and wider social care systems;



- identifying success factors for intersectoral collaboration within and outside health and care which strengthen HP / DP activities.

# 14 National Policy Dialogues

- Croatia
- Greece
- Hungary
- Iceland
- Italy
- Lithuania
- Malta
- Poland
- Portugal
- The Netherlands
- Slovakia
- Slovenia
- Spain




## 2 EU-level Policy Dialogues

- Financing of health promotion
- Employment and chronic diseases


# The social and health investment gap

**Public budgets are not enough:**

- **the investment gap in social infrastructure in EU (education, housing, health, social services) is estimated to be €192 billion/year**
- **the health investment gap increased from €20 to €70 billion/year due to the COVID-19 crisis, around 0.6% of EU GDP, with large variations across countries**



Public sector investment 20% lower than a decade ago. Prevention budgets average 3%



Yet demand rising - even before syndemic...

# E-Guide for Financing Health Promoting Services

EUROPEAN PORTAL FOR ACTION ON  
**HEALTH INEQUALITIES**

HOME WHAT IS HEALTH PROMOTION? BEYOND THE HEALTH SECTOR FINANCE LABELS FOR SAFE INVESTMENTS SOCIAL OUTCOMES CONTRACTING SOCIAL IMPACT FINANCING INVESTING AND DISINVESTING INSURANCE FUNDS STRATEGY AND FORWARD THINKING

## E-GUIDE FOR FINANCING HEALTH PROMOTING SERVICES

COVID-19, as well as other diseases, require serious investments in prevention and health promotion. This e-guide illustrates a spectrum of approaches to mobilise resources to finance the delivery of such health promoting services that benefit health and wellbeing for all.

START

- <http://health-inequalities.eu/financing-e-guide/>

# How to navigate the E-Guide: case studies



## The Prioritisation Framework for public health investments – Public Health England

The Prioritisation Framework is an excellent example of investing and disinvesting to make improve the use of existing resources. To learn more about this method, visit investing & disinvesting. ...



## Health insurance funds – Combined Lifestyle Interventions in the Netherlands



## Social outcomes contract for a preventive and healthy workplace in Sweden












## Social impact bonds finance the Activate program in Canada



## Ethical financing label in France

### Resources & Tools

-  [About this e-Guide](#)
-  [InvestEU & Other Funds](#)
-  [Quality Criteria](#)
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You are invited



**Skills for health**

Up- and re-skilling for a sustainable recovery

Online - 3 December 2020 - 9:30 — 12:45

The banner features an illustration of six diverse people in various professional and agricultural attire, including a chef's hat, a farmer's hat, and a nurse's cap. The EuroHealth logo is visible in the bottom right corner.

# THANK YOU

## Contact us

Email: [info@eurohealthnet.eu](mailto:info@eurohealthnet.eu)

Website: [eurohealthnet.eu](http://eurohealthnet.eu)

## Follow us



EuroHealthNet is supported by the European Commission, through the EU Programme for Employment and Social Innovation (EaSI 2014-2020)



# PHResH-ARC-CSaP

## Prioritising Prevention

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### Question and Answer Session

We are answering questions from the  
Chat section of Zoom

Remember to visit:

<https://www.menti.com/>

Enter the code: **56 36 27 6**



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## What you said about prevention...

*Dr Angelique Mavrodaris  
looks at the Mentimeter findings*

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# Keep the conversation going...



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[angelique.mavrodaris@phe.gov.uk](mailto:angelique.mavrodaris@phe.gov.uk)  
[caitlin.grant@phe.gov.uk](mailto:caitlin.grant@phe.gov.uk)

[ARCOffice@cpft.nhs.uk](mailto:ARCOffice@cpft.nhs.uk)

[enquiries@csap.cam.ac.uk](mailto:enquiries@csap.cam.ac.uk)



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# Prioritising Prevention Webinar

24<sup>th</sup> November 2020

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*A collaboration between:*

**East of England Population Health Research Hub**  
*EoE PHResH*

**NIHR East of England Applied Research Collaboration**  
*NIHR EoE ARC*

**University of Cambridge Centre for Science and Policy**  
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