





Multistakeholder Innovation Ecosystems

DESIGNING HEALTH INTEGRAL INTERVENTIONS FOR & WITH SCHOOLS

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July 2022

















































- Different solutions, different definitions of problem (interdependencies)
- Involve different discplines and stakeholders
- At local and global level







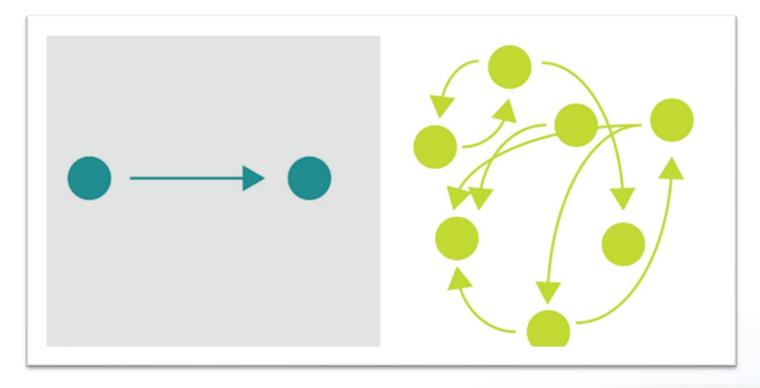












Linear fallacy for complex problems









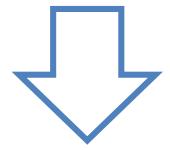








From one-off interventions



Integral interventions (simultaneous & coordinated)

















CHANGE

New form of problem solving









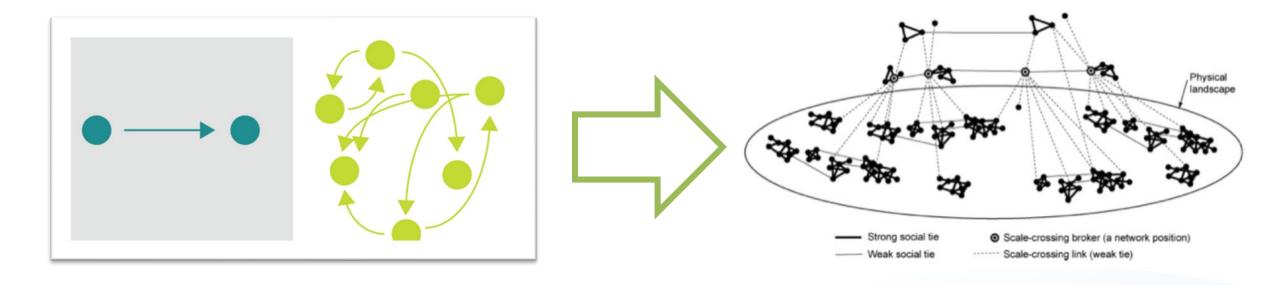












Need to create **Multistakeholder Networks** with **iterative systems innovation** approaches → suggested by ECDC, but how?

















Participatory Research for complex problem-solving

















1. Participatory Research for complex problem solving

> (to design integral interventions)

2. Innovation for complex problem solving

(implementing integral interventions)

3. Monitoring

Innovation in STEAM Education

















2020-22: We have designed the System Innovation Dialogue Model

To design integral interventions for complex health challenges











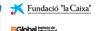












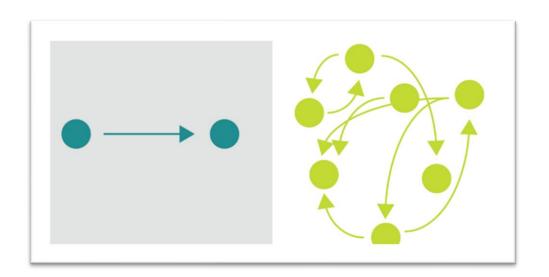


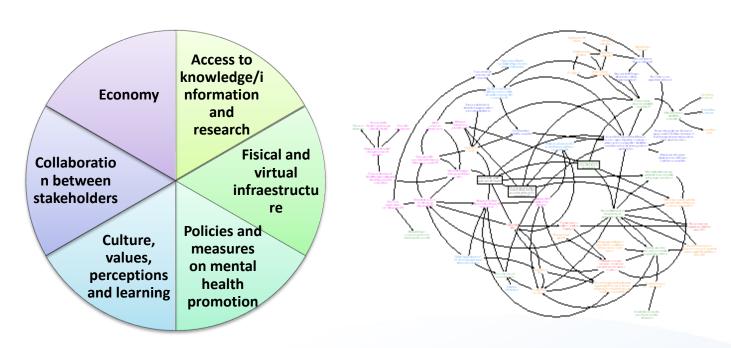






Consultation through Systems Thinking





- Why is it so difficult to solve the challenge?
- Problems & needs within different characteristics & areas of the system

















Results: Integral Models for Health Promotion

Leverage Factors and Missions

Covid-19-868 students + families & 22 teachers

- √ 406 items
- 40 clusters of problems & needs
- 5 categories where to intervene:
- 39 recommendations to improve
- 18 leverage factors
- **5 Missions**

Mental Health-1611 students + families & 45 teachers

- 2013 items
- 22 clusters of problems & needs
- 5 categories where to intervene:
- 29 recommendations to improve
- 17 leverage factors
- **8 Missions**

Healthy and Sustainable Diets- 136 participants&64 organizations

- System map
- **Future vision**
- 4 leverage factors where to intervene
- **8 Missions**

















Integral Model for Mental Health Promotion

(targetted at students, teachers and families)

17 Leverage Problems & Needs where to intervene



6. IMPACT OF **MENTAL HEALTH ON LEARNING AND TEACHING**



12. INTEGRAL **WORK WITHIN NETWORKS WITH CO-CREATION &** PARTICIPATION O

1. PRIORITY FOR **PERSONALIZED & ACCESSIBLE MENTAL HEALTH PROMOTION**

7. INNOVATION IN **FORMAL AND NON FORMAL EDUCATION & IN** COMMUNICATION

13. **IMPLEMENTATION OF PARTICIPATORY RESEARCH TO SOLVE PROBLEMS**

2. EARLY **DETECTION & MANAGEMENT** & PREVALENCE

8. RESPONSIBLE **USE OF ICTs**



14. IMPACT & ADAPTATION OF PUBLIC HEALTH MEASURES



3. SOCIAL RELATIONS, SOCIO-**AFFECTIVE CLIMATE &** RELAX

9. INNOVATION IN THE **ORGANIZATIONAL MODEL OF SCHOOLS**





4. INVESTMENT **IN HHRR & IN COMMUNITY INTERVENTIONS** WITH & FOR **STUDENTS**

10. ZERO STIGMA. REJECTION, DISCRIMINATION, **NEGATION. TABUS** & BULLING





5. COORDINATION **WITH OTHER HEALTH PROMOTION** CHALLENGES²

11. SYSTEMIC **WORK WITH** FAMILIES4



17. INTEGRAL **MONITORING**



















Integral Model for Mental Health Promotion

(targetted at students, teachers and families)

Prioritization: eight missions where to intervene



6. IMPACT OF **MENTAL HEALTH** ON LEARNING AND TEACHING



12. INTEGRAL **WORK WITHIN NETWORKS WITH-CO-REATION &** PARTICIPATION C

1. PRIORITY FOR **PERSONALIZED & ACCESSIBLE MENTAL HEALTH PROMOTION**

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3. SOCIAL RELATIONS, SOCIO-**AFFECTIVE CLIMATE &** RELAX

9. INNOVATION IN THE **ORGANIZATIONAL MODEL OF SCHOOLS**

15. ZERO INEQUALITIES AND ATTENTION TO DIVERSITY5



4. INVESTMENT **IN HHRR & IN COMMUNITY INTERVENTIONS** WITH & FOR **STUDENTS**

10. ZERO STIGMA REJECTION, **DISCRIMINATION NEGATION, TABOOS & BULLING**

16. PHYSICAL **SPACES FOR EMOTIONAL** WELBEING



11. SYSTEMIC **WORK WITH FAMILIES**⁴



17. INTEGRAL **MONITORING**



With prerequisits 8 Missions where to focus R&I **Each Mission** covering also transversal SDGs













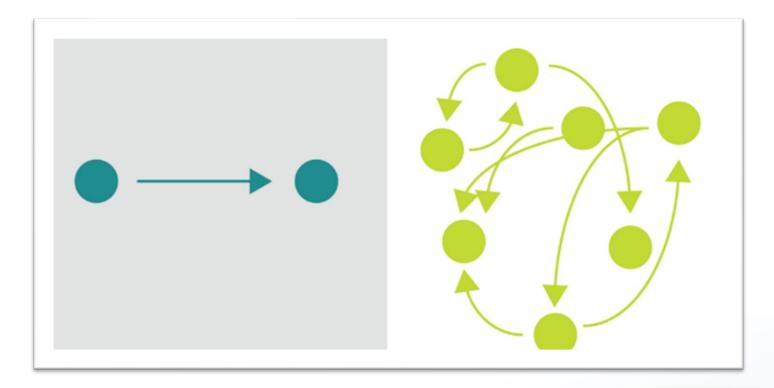




We have identified



& leverage factors & Missions to intervene



















How to move to implementation without linear fallacy?











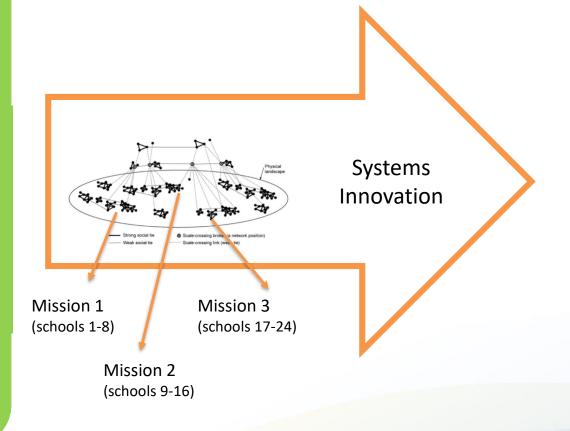






Working on Missions in and among schools & stks

Innovation for complex problem-solving



To design effective Integral

Interventions' **Guidelines**

To pilot and next scalability + iterative loops



















Conclusions

- 1. We have developed a Model for designing Integral Interventions in Schools that **operationalizes international policy standards**:
 - > WHO & UNESCO for Health Promoting Schools
 - > Open Schooling Movement promoted by the EC (improving STEAM education & solving challenges)
 - Responsible Research and Innovation: Opportunity for science policies to respond to needs & expectations of schools
- 2. Need for support by international, national, regional and local policies + dedicated resources for R&I within community structures or networks, as already suggested by the ECDC \rightarrow support for sustainable pilot networks is key (sentinel schools & Fit4FoodBcn)
- 3. **Challenges** regarding:
- effective implementation
- evidence based impact on health promotion and education
- sustainability









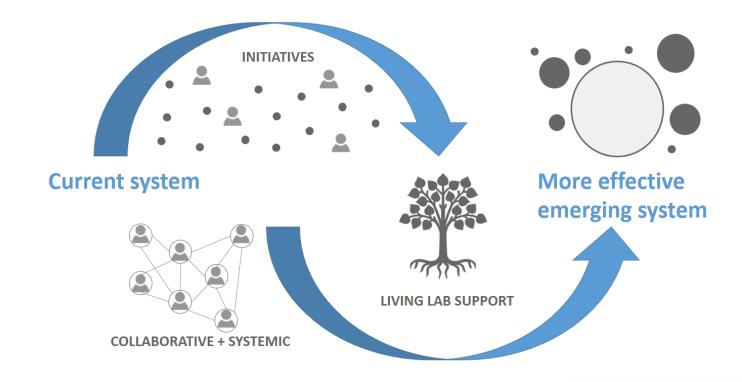








More effective Model of Health Promotion



- For Health challenges
- For STEAM education

























Multistakeholder Innovation Ecosystems

For a more Integral Model of Health Promotion

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June 2022





CONNECT



