



# Networking—A quintessential public health activity

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It is fascinating that, despite the fact that networking is vital to the way that public health activities are planned, coordinated and carried out, relatively little has been written about it. This may be, in part, because it is described in so many ways: stakeholder engagement coordination, multidisciplinary work and an intersectorial approach. And it may be because networks are so integrated into the very DNA of public health that we rarely step back to appreciate them—much like a fish that simply assumes the existence of water.

A public health network is a group of people—people who represent organizations, interests or levels of government who work together to strengthen public health. Networks facilitate social interaction, the sharing of knowledge and the engagement in other activities related to a common goal within a specific domain of knowledge and practice (1). When you think about it, it is hard to conceive public health without networks.

This theme of the February 2020 issue of the *Canada Communicable Disease Report* (CCDR) is on these public health networks. Read about a “network of networks”—Canada’s National Collaborating Centres (NCCs) (2). The NCCs include six centres of expertise, composed of multidisciplinary teams who work as knowledge brokers to identify gaps, and work on knowledge synthesis, exchange and uptake to promote evidence-informed decision-making in public health. They do this with the quintessential public health strategy of networking at all levels of Canada’s public health system, with other disciplines and internationally to facilitate the uptake of knowledge into both policy and practice. The National Advisory Committee on Immunization (NACI) is another excellent example of the power of networking. NACI is a multidisciplinary committee, whose members possess some of the best knowledge of vaccines in the country. These members summarize the evidence and make recommendations for public health and clinical care. Established in 1964, NACI has been a trusted source of immunization guidance for Canada for almost 60 years (3,4). See some of their latest work in this issue of CCDR, with a summary of a recent NACI statement on the use of Trumenba™ for the prevention of meningococcal B disease (5). You will also find a few ID News items at the end of this issue that include a long overdue study that assessed the effectiveness of networking and partnerships designed to address public health priorities.

Networking, as a public health strategy, deserves more recognition and study. Although it is integral to the work of public health, there are surprisingly few studies that evaluate its effectiveness. We should surely learn more about what may work and what may not, and best practices that could all inform future networking strategies.

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