

8th Global Conference on Health Promotion

Health in all Policies – effective governance for health and equity.

Helsinki, Finland 10-14th June 2013

http://www.healthpromotion2013.org/images/8th_GCHP_Draft_Statement_web_consultation.pdf

Background :

The 8th International Conference on Health Promotion: Health in All Policies – effective governance for health and equity was held in Helsinki, Finland from 10th-14th June 2013. The meeting builds upon a rich heritage of ideas, actions and evidence that have emerged since the 1st International Conference in Ottawa in 1986. The Ottawa Charter for Health Promotion identified healthy public policy as a cornerstone for health promotion and the achievement of health equity. Subsequent international health promotion conferences, notably the meeting in Adelaide in 1988, cemented key principles for healthy public policy recognising health as a fundamental human right, emphasising social justice by supporting all citizens in leading healthy lives, and advocating the accountability of governments at all levels for the health impact of their policies.

These principles have been reinforced in the more recent 2011 Rio Political Declaration on Social Determinants of Health, and UN General Assembly Resolution on the Prevention and Control of Non- Communicable Diseases.

Many of the major health and equity challenges present at the time of the Ottawa Conference more than 25 years ago remain. HiAP was first articulated by EU countries during the Finnish EU Presidency in 2006, and has become used in many countries across the continents. Health in All Policies (HiAP) is a practical response to these challenges. HiAP can make a fundamental contribution to the achievement of the current Millennium Development Goals (MDGs), and should remain a key consideration in the drafting of the post 2015 development agenda.

What is Health in all Policies?

Health in All Policies (HiAP) is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity. A Health in All Policies approach is founded on health-related rights and obligations. It improves accountability of policymakers for health impacts at all levels of policy-making. It includes an emphasis on the consequences of public policies on health systems, determinants of health, and well-being. It also contributes to sustainable development.

HiAP focusses on the role that governments play in achieving population health and equity. Public policies and decisions made in all sectors and at different levels of governance can have a significant impact on population health and health equity, and on the capacity of health systems to protect health and respond to health needs. HiAP implies an exemplary role for the health sector, but also explicitly recognises the specific and synergistic impact on health and equity of actions by other parts of government. It incorporates a concern for the equitable distribution of resources for health, and for reconciling economic interests with social advancement.

HiAP provides a mechanism and practical tools to enable public authorities and representative politicians all levels to understand health impact, ensure accountability for the health and equity consequences of their public policy

decisions. It applies to both the executive and legislative arms of government that determine policy, enact laws and regulations, control budgets and decide upon taxes. Although many sectors positively contribute to better health, significant gaps in understanding and action often result in a failure by governments to optimise health and equity gains.

This approach to policy-making recognises that governments have many priorities. The implementation of HiAP does not imply that health and equity priorities automatically gain precedence over other policy aims. It ensures that health considerations are transparently taken into account in policy-making, and opens up opportunities for achieving synergies and co-benefits for health across sectors.

Why does HiAP matter?

Good health enhances the quality of life, improves workforce productivity, increases capacity for learning and strengthens families and communities. Improving health and reducing inequities in health can contribute to security, poverty reduction and social inclusion. Large, unfair inequalities in health continue to be observable between and within countries. These inequalities act as a brake on social and economic development that are at the heart of the MDGs. HiAP has the potential to unlock this brake, achieving optimal levels of population health and equity.

Many of the determinants of health and health inequities in populations have social and economic origins that are beyond the direct influence of the health sector and health policies. The 2011 Rio Political Declaration on Social Determinants of Health is unequivocal in its recognition of the responsibility of governments for the health of their citizens, reaffirming that health inequities between and within countries are politically, socially and economically unacceptable, as well as unfair and largely avoidable.

Governments can achieve health, social and economic goals by actively exploring the potential synergies between and within policies in sectors such as transport, agriculture, education, employment and environment. HiAP enables evidence informed decision-making, identifying opportunities, and supporting a practical approach to achieving the development goals of individual governments, as well as the international MDGs.

How does HiAP work?

Practical experience in the implementation of HiAP has highlighted some key principles that enable success.

Through leadership and commitment to health rights and equity - by government, representative bodies (parliaments, congress, senate), public administration and the judiciary. HiAP is most likely to thrive if there are governance mechanisms that support systematic engagement across government; that support balanced resolution of disputes and power imbalances, especially in relation to commercial pressures and transnational trade; and that support synergies between and within the different parts of government to deliver healthy public policy.

Through an outward facing health sector - that leads by example; can demonstrate the understanding, skills, and commitment necessary for successful engagement with other sectors; and that has the flexibility to respond to opportunities for engagement as they emerge. To achieve this, the health sector will need to engage with wider government and its sectors/departments in new and challenging ways.

By identifying policies that matter – Attention should be proportionate to potential impact. This will be best achieved when there is good information on the ways in which health and equity are created and health is protected through public policy; on the existence of opportunity for change; and on the comparative advantages of different policy options.

Through transparency and accountability – making policy processes and decisions more transparent by using impact assessment and audit tools both within and outside government will ensure greater accountability for health policy outcomes, and help to build trust within government and between governments and their citizens.

Through engagement by civil society – although HiAP is by necessity a government responsibility, governments and policy-makers derive their legitimacy by acting on behalf of their citizens. HiAP will be most successful in circumstances where there is public understanding, and possibilities for public engagement at different stages in the development, implementation and evaluation of public policies. Civil society can have important, independent role in the scrutiny of government policy - by monitoring policy decisions and their implementation, and by engaging in health impact assessment and policy audits in a range of ways.

A call for action:

The participants at this conference recognise the profound impact that government policies can have on the health and on all determinants of health. Health in All Policies is a practical response to the challenge of optimising the impact on health and equity of government policy. By creating co- benefits and synergies, and reducing conflict, fragmentation and duplication in the development and implementation of public policy, HiAP can enable governments to deliver great health and equity benefits to their citizens.

As participants, we are committed to sharing the key messages of the Helsinki Statement with our governments, and call upon the World Health Organisation to work with individual Member States and other levels of government to:

- Commit to effective governance for health at all levels: adopting HiAP as a central guiding approach to policy management across all levels of government in ways that systematically account for the health and health equity implications of decisions, seek synergies, and avoid harmful health impacts in order to improve population health and health equity.
- Create tangible mechanisms within government that will support the necessary cross- sector dialogue and coordination that are central to HiAP, and make it feasible for the health sector to lead by example, and provide any necessary leadership within and across government.
- Support the development of technical capacity for HiAP to invest in the people, institutions statutory instruments and processes that facilitate the implementation of HiAP through the whole government.
- Support the use of audit tools such as health impact assessments, and policy audits, to enable transparency in the examination of health and equity outcomes of policies.
- Enable independent oversight: by creating processes or agencies that can undertake objective oversight and reporting on HiAP and its impact on health and equity outcomes.
- Enable meaningful engagement by civil society: by supporting public understanding, and active public engagement in the development, implementation and evaluation of HiAP.

http://actionsdh.org/Contents/Forums/Member_Forums/Views_on_the_new_draft_working_definition_of_Health_in_All_/4414.aspx

Role of health sector

Health in All Policies calls for participation of all actors of the society. The health sector is not accountable for other sectors' decisions, but it is accountable for advocating for, and contributing to, the implementation of the Health in All Policies approach. This role requires knowledge on determinants of health, health outcomes, health systems functioning and their distribution aspects on the one hand, and the potential effects of policies across sectors on those, on the other. It requires skills to prioritize and strategically think through the key health concerns in relation to other sectors and the ability to understand their agendas and priorities. It requires abilities in reaching out to other sectors to facilitate intersectoral dialogue and in contributing to intersectoral activities led by other sectors.

[i]This simply does not recognize that there is a real growing scientific (psychophysiological) knowledge-base to wellbeing and health promotion –beyond the mindless rhetoric of ‘exercise and diet’ – virtually absent from modern biomedical practice (mentioned above), and nearly absent from public health services now expected to provide health promotion with little or no academic background or expertise in the necessary psychophysiology of health and disease. The gulf between today’s biomedical practice and public health practice is enormous. This proposal should at least have an ‘arm’ responding to that deficiency. For example the mhealth ‘movement’, substantially evolved from ‘public health sector’ in LMIC, and, for some reason, divorced from eHealth – is already failing to appreciate that the mobile phone IS already a personal health system capable of far more than they describe. This same smart phone is likely to be in the pockets of the all the HIAP committee members and could be the vehicle to drive HIAP in a very direct informing way. For example with a simple wireless body sensor displaying on the phone or tablet, the stress factors related to the lifestyle of the committee members, connected to an on-line web-portal, would be a ‘real life’ demonstration of what SDH is all about! Heart rate variability and activity is a generic dynamic biomarker of health.[/i]

HIAP is best placed to lead the personal health revolution