Health 2020
Achieving health and development in today’s Europe
WHO definition of Health:

“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”
Health – a precious global good

• Higher on the political and social agenda of countries and internationally
• Important global economic and security issue
• Major investment sector for human, economic and social development
• Major economic sector in its own right
• A human right and matter of social justice
Principles of universal health coverage

Ensure that people have equal access to quality health services and financial protection;

- coverage with health services (promotion, prevention, treatment and rehabilitation
- coverage with financial risk protection

Potential indicators, focusing on coverage and protection:

- Increased coverage of essential services
- Increased equity and financial protection
- Strengthening health systems
WHO Regional Committee for Europe adopted Health 2020 in September 2012

*Aim* – To significantly improve health and well-being of populations, to reduce health inequities and to ensure sustainable people-centred health systems.
What is Health 2020?

Health 2020 is a value-based action-oriented policy framework, adaptable to different realities in the countries of the WHO European Region.

Health 2020 is addressed to ministries of health but also aims to engage ministers and policy-makers across government and stakeholders throughout society who can contribute to health and well-being.
Why Health 2020?

Significant improvements in health and well-being but … uneven and unequal

Europe’s changing health landscape: new demands, challenges and opportunities

Economic opportunities and threats: the need to champion public health values and approaches
The **short** Health 2020 policy framework contains the **key evidence, arguments and areas for policy action** to address the public health challenges and opportunities for promoting health and well-being in the European Region today.

The **longer** Health 2020 policy framework and strategy document provides the **contextual analysis and the main strategies and interventions** that work; and describes necessary **capacities to implement** the Health 2020 policy.

(www.euro.who.int/health2020)
Health 2020 framework

An adaptable and practical policy framework that recognizes:

• that countries engage from a different starting point and have different contexts and capacities; and

• that every country is unique and they will pursue common goals through different pathways and use different entry points and approaches but be united in purpose.
Health 2020 – reaching higher and broader

• Going upstream to address root causes such as social determinants
• Making the case for whole-of-government and whole-of-society approaches, and Health in All Policies (HiAPs)
• Invest in public health, primary care, health protection and promotion, and disease prevention
• Offering a framework for integrated and coherent interventions
Building on public health history

- WHO Constitution
- Declaration of Alma-Ata
- Health for All
- HEALTH21
- Tallinn Charter

Integrated policy frameworks can and have inspired health-generating actions on all levels.
Increasing attention to inequity

For richer, for poorer
Growing inequality is one of the biggest social, economic and political challenges of our time. But it is not inevitable …

(http://www.economist.com/node/21564414)
Overall health improvement (+ 5 years life expectancy) but with an important divide in the Region

Life expectancy at birth trends by European regions, 1980-2010

**Regions**
- CIS
- EU 12
- EU 15
- European Region

**Source**: European Health for All database. Copenhagen, WHO Regional Office for Europe, 2010.
Changing health landscape

- The global health architecture has become more extensive but very complex
- Globally and regionally health has improved, yet deep inequities remain
- Health challenges are multifaceted and require active involvement of all levels of government (international, national, and local)

- People live longer and have fewer children.
  - People migrate within and between countries; cities grow bigger.

- Noncommunicable diseases (NCDs) dominate the disease burden.
  - Depression and heart disease are leading causes of healthy life-years lost.

- Infectious diseases, such as HIV and TB remain a challenge to control.
  - Antibiotic-resistant organisms are emerging.

- Health systems face rising costs.
  - Primary health care systems are weak and lack preventive services.
  - Public health capacities are outdated.
The Health 2020 development journey – two years participatory process with MS and partners

- Unprecedented evidence-review
- New evidence gathering
- Solutions that work
- Integrating and connecting
- Stakeholder (peer)-reviewed
New evidence informing Health 2020

- Governance for health in the 21st century
- Supporting Health 2020: governance for health in the 21st century
- Promoting health, preventing disease: the economic case
- Intersectoral governance for health in all policies: structures, actions and experiences
- Report on social determinants of health and the health divide in the WHO European Region
- Review of the commitments of WHO European Member States and the WHO Regional Office for Europe between 1990 and 2010
The social determinants, gender and the right to health
10 essential public health operations (EPHOs):

1. surveillance and assessment of the population’s health and well-being;
2. identification of health problems and health hazards in the community;
3. health protection services (environment, occupation, food safety);
4. preparedness for and planning of public health emergencies;
5. disease prevention;
6. health promotion;
7. assurance of a competent public health and personal health care workforce;
8. governance, financing and evaluation of quality and effectiveness of public health services;
9. communication for public health; and
10. health-related research.
Health 2020: strategic objectives

- Working to improve health for all and reducing the health divide
- Improving leadership, and participatory governance for health

Health 2020: four common policy priorities for health

- Investing in health through a life-course approach and empowering people
- Tackling Europe’s major health challenges: NCDs and communicable diseases
- Strengthening people-centred health systems, public health capacities and emergency preparedness, surveillance and response
- Creating resilient communities and supportive environments

World Health Organization
Regional Office for Europe
Improving governance for health

Supporting whole-of-government and whole-of-society approaches
Learning from a wealth of experience with intersectoral action and health-in-all-policies (HiAP) work in Europe and beyond

Two studies on governance for health led by Professor Ilona Kickbusch (2011, 2012)
Intersectoral governance for HiAP, by Professor David McQueen et al.
Health governance & governance for health

Health governance
The governance of the health system and health systems strengthening.

Governance for health
The attempts of governments and other actors to steer communities, countries or groups of countries in the pursuit of health as integral to well-being through both a “whole-of-government” and a “whole-of-society” approach.

WHO European review of social determinants and the health divide:* key findings and recommendations to improve equity in health

Policy goals

• Improve overall health of the population
• Accelerate rate of improvement for those with worst health

Policy approaches

• Take a life-course approach to health equity.
• Address the intergenerational processes that sustain inequities
• Address the structural and mediating factors of exclusion
• Build the resilience, capabilities and strength of individuals and communities

* The study was carried out by a consortium of over 80 policy researchers and institutions across Europe (2012), and led by Sir Michael Marmot.
Case for investing in public health: estimated exp. on prevention and public health as % of total health exp.
The contribution of prevention and treatment related to the decline in global CHD mortality

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Source: NEJM 2007: 2388
The economic case for health promotion and disease prevention

The economic impact of non-communicable diseases amount to many hundreds of billions of euros every year.

Many costs are avoidable through investing in health promotion and disease prevention.

Today governments spend an average 3% of their health budgets on prevention.
Using fiscal policy to improve health outcomes

**Tobacco**
A 10% price increase in taxes could result in up to 1.8 million fewer premature deaths at a cost of between US$ 3 and US$ 78 per DALY in eastern European and central Asian countries

**Alcohol**
In England, benefits close to €600 million in reduced health and welfare costs and reduced labor and productivity losses, at an implementation cost of less than €0.10 per capita

Health impact of social welfare spending and GDP growth

- Each additional US$ 100 per capita spent on social welfare (including health) is associated with a **1.19%** reduction in mortality.

- Each additional US$ 100 per capita increase in GDP is associated with **only 0.11%** reduction in mortality.

Additional layer of complexity from austerity: lessons learned from past and present crises

- Associated with a doubling of the risk of illness and 60% less likelihood of recovery from disease*

- Strong correlation with increased alcohol poisoning, liver cirrhosis, ulcers, mental disorders**

- Increase of suicide incidence: 17% in Greece and Latvia, 13% in Ireland***

- Active labour market policies and well-targeted social protection expenditure can eliminate most of these adverse effects****

Unemployment

Preserving health in times of austerity

- The effects of the crisis vary greatly across countries.
- Across the Region we see lower growth and higher unemployment.
- The crisis exacerbated health-system challenges that already existed.
- It is important to avoid across-the-board budget cuts.
- Target expenditure by focusing on supply side efficiency gains, e.g.:
  - the wiser use of technologies and medicines
  - rationalizing service delivery structures.
- Think long-term and implement counter-cyclical spending (save in good times to spend in bad times).
Catastrophic spending is highest among poorer people

Source: Vörk et al 2009
Supporting Member States to navigate the crisis is central to our work

- Strong economic case for health promotion and disease prevention as economic cost of NCD extremely high (only 3% investment);
- Prevention one of most cost-effective approaches to improve health outcomes;
- Fiscal policy can be used like raising taxes of tobacco and alcohol;
- Sin taxes have short-term benefits.
Supporting Member States to navigate the crisis is central to our work (2).

- Try to protect health budgets but if cuts have to be made, avoid across the board budget cuts and target public expenditures more tightly on poor and vulnerable (avoid or reduce out-of-pocket payments which lead to impoverishment);
- Think long-term: save in good times and spend in bad times!
Health as an economic engine

• Health is not a drain on the economy!
• Health contributes to economic growth.
• Health is a significant sector of the economy.
Trends in premature mortality by broad group of causes in the European Region, 1980–2008

Investing in health through a life-course approach and empowering people

Prevalence of overweight, incl. obesity – boys %
Based on the 2007 WHO growth reference for children and adolescents 5-19 years
NCD action plan 2012–2016

Planning and oversight
- National plan
- Health information system with social determinants disaggregation

HiAP
- Fiscal policies
- Marketing
- Salt
- Trans fats

Healthy settings
- Workplaces and schools
- Active mobility

Secondary prevention
- Cardio-metabolic risk assessment and management
- Early detection of cancer
WHO cost-effective Public Health interventions

• Anti-tobacco interventions
  – Taxes, tobacco free environments, health warnings, advertising bans

• Reducing harmful alcohol use
  – Taxes, health warnings, advertising bans

• Improving diet and physical activity
  – Reducing salt intake and salt contents, reducing trans-fats, promoting public awareness
Increased connectedness
What does becoming “tobacco-free” mean?
Health 2020: rethinking policies for health and approaches to stakeholder engagement

Example: fiscal policy to control harmful use of alcohol

Mapping allies and interests

Ministry of justice, police

Employers and development sectors

Health

Transport

Local communities

Alcohol-related harm

€125 billion annually in the EU, equivalent to 1.3% of GDP

Health system strengthening and the Tallinn Charter

• Supporting Member States in keeping or moving towards UHC (guided by the mission and vision of Health 2020)
• Transforming financing arrangements to overcome sustainability concerns
• Positioning primary health care as the hub to other levels of care
• Ensuring coordination across primary health care and public health services
• Revitalizing a flexible, multi-skilled workforce with aligned task profiles
• Strategizing the use of modern technology and medicines for maximum benefits
Compelling challenges call for the transformation of primary health care

• The future shape of the NCD epidemic is characterized by multiple and interacting risk factors and multi-morbidity

• Most health systems are not designed to cope with multiple interacting risks and multi-morbidity

• We have a “response gap”

*Atun R, et al. Improving responsiveness of health systems to NCDs. Lancet 2013*
Health as a contributor to Public Policies

European targets to increase participation of older people in the workforce.

requires a healthy population & complimentary policies between health, development and social sectors.
Inter-sectoral action: elements for success

- Mayors, Prime Ministers, celebrities

| Dedicated resources | • Taxation, private sector  
|                     | • Co-ordination function needs resourcing |
| Institutional structures | • Health promotion agencies; advisory task-forces; local government  
|                     | • Do not discredit informal relationships & power of community |
| Joint planning | • Quality of the “planning” can be more important than the “plan” |
| Legislative tools | • Trans-fat, setting up structures for health promotion |
| Accountability | • Doesn’t matter who, but needs to be clear (shared or not, health or non-health) |
| Monitoring & reporting | • Targets focus action  
|                     | • Results are important for advocacy |
Health 2020 monitoring framework

2. Increase life expectancy.
3. Reduce inequalities in health.
4. Enhance the well-being of the population.
5. Ensure universal coverage and the right to the highest attainable level of health.
6. Set national goals and targets related to health in Member States.
Increasing momentum in Europe
WHO in the 21st century

• The role of WHO in the global health architecture - WHO reform process
• Forging partnerships for health and sustainable development a top priority
• One WHO – Regions working together
• Closer to countries needs and realities
• Increasing appreciation of health in foreign policy and international health diplomacy
Dear prime minister, minister, mayor or member of parliament:

Good health underpins social and economic development and strengthens policies across all sectors. However, the economic and fiscal crisis facing many countries presents serious challenges and potentially risks undermining the positive progress that has been made. Nevertheless, it also presents an important opportunity to refocus and renew our efforts to improve the health of all people.

All sectors and levels of government and society contribute to health creation. Your leadership for health and well-being can make a tremendous difference for the people of your country, state, region or city and for European Region as a whole.

Your support for Health 2020 is truly essential.
Health 2020 lays the foundation for a healthier European Region

“So many factors affect health, and health has an impact on so many areas of our lives that progress on public health can only come from whole-of-society and whole-of-government efforts.

That is why there is a role for everyone to play in implementing Health 2020, from prime ministers, to civil society, to citizens.”

– Zsuzsanna Jakab, WHO Regional Director for Europe
“We want to see better health and well-being for all, as an equal human right. Money does not buy better health. Good policies that promote equity have a better chance. We must tackle the root causes (of ill health and inequities) through a social determinants approach that engages the whole of government and the whole of society”

Dr Margaret Chan, Director General of WHO