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

– WHO Constitution
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
- Human right and matter of social justice
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
HEALTH 2020 reaching higher and wider

- Going upstream to address root causes such as social and environmental determinants
- Making the case for approaches involving the whole of government and of society, and health in all policies
- Investing in public health, primary care, health protection and promotion, and disease prevention
- Offering a framework for integrated and coherent interventions
The social determinants, gender and the right to health

Social determinants

Gender inequities

Right to health
Overall health improvement (+ 5 years life expectancy) but with an important divide in the Region

CIS: Commonwealth of Independent States
EU12: countries belonging to the European Union (EU) after May 2004
EU15: countries belonging to the EU before May 2004

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.
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 tuberculosis (TB) remain a challenge to control.
   Antibiotic-resistant organisms are emerging.

Health systems face rising costs.
   Public health capacities are outdated.
   Primary health care systems are weak and lack preventive services.
Working to improve health for all and reducing the health divide

Improving leadership, and participatory governance 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
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.
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

Trends in premature mortality by broad group of causes in the European Region, 1980–2008

Over 25% of the burden of disease due to environmental factors

Source: WHO burden of disease statistics.
Health costs climbing faster than health gains, but prevention still neglected

Globally, in the last decade:
- life expectancy rose 0.5%
- health costs rose 6%

Factors influencing health
- Tobacco
- Alcohol
- Unsafe Sex
- Physical Inactivity
- Illicit drugs
- Environment

World-wide health expenditures
- Treatment & overhead
- Prevention < 5%
- Other

Source: estimates from Organisation for Economic Co-operation and Development (OECD), WHO, and Prevention Institute data
Compelling challenges call for the transformation of addressing health

- The future shape of the NCD epidemic is characterized by multiple and interacting risk factors and multimorbidity
- Most health systems are not designed to cope with multiple interacting risks and multimorbidity
- There is a “response gap”

### Intersectoral action: elements for success

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<tr>
<th>Category</th>
<th>Elements</th>
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<tr>
<td><strong>High-level commitment and champions</strong></td>
<td>• Mayors, prime ministers, celebrities</td>
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<td><strong>Dedicated resources</strong></td>
<td>• Taxation, private sector</td>
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<td>• Coordination function needs resourcing</td>
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<td><strong>Institutional structures</strong></td>
<td>• Health promotion agencies; advisory task-forces; local government</td>
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<td>• Do not discredit informal relationships and power of community</td>
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<td><strong>Joint planning</strong></td>
<td>• Quality of the “planning” can be more important than the “plan”</td>
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<td><strong>Legislative tools</strong></td>
<td>• Trans fats, setting up structures for health promotion</td>
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<td><strong>Accountability</strong></td>
<td>• Does not matter who, but needs to be clear (shared or not, health or non-health)</td>
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<td><strong>Monitoring and reporting</strong></td>
<td>• Targets focus action</td>
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<td>• Results are important for advocacy</td>
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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.”

– Margaret Chan, WHO Director-General