

Health 2020 and the case for measuring well-being: fact sheet

Health 2020: objectives and targets

In September 2012, representatives of the 53 Member States that make up the WHO European Region adopted the European health policy framework – now called Health 2020 (see box). The new policy:

- sets out an action framework to accelerate the attainment of better health and well-being for all; and
- includes regional targets on health and well-being.

Through an intense process of consultation and endorsement by the Region's Member States, Health 2020 has arrived at six goals (overarching targets) for achievement by 2020:

1. Reduce premature mortality in Europe by 2020.
2. Increase life expectancy.
3. Reduce inequities in health.
4. Enhance the well-being of the European population.
5. Provide universal coverage in Europe.
6. Establish national targets set by Member States. (This goal reflects the processes put in place by Member States to ensure the achievement of Health 2020 objectives.)

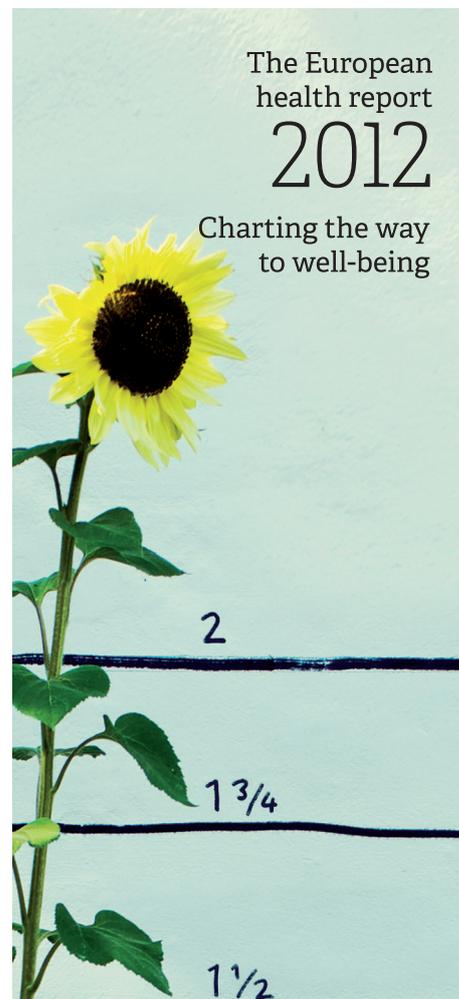
An expert advisory group is proposing indicators to measure the level of achievement for each of these goals. The WHO Regional Office for Europe will consult Member States on the short-list of indicators in spring 2013.

Well-being: key component of the Health 2020 policy

The WHO Constitution defines health as “not merely the absence of disease or infirmity” but “a state of complete physical, mental and social well-being”. Nevertheless, for more than 60 years WHO has neither measured nor reported on well-being, focusing instead on death, disease and disability. One of the core missions of the new Health 2020 policy is to describe the well-being of populations and measure progress in enhancing it in Europe.

Defining well-being

Well-being has two dimensions: subjective and objective. Elements of objective well-being include people's living conditions and their opportunities to realize their potential – opportunities that should be equitably distributed among all people. Aspects of objective well-being include health, education, jobs, social relationships, environment, security, civic engagement and governance, housing and leisure. Elements of subjective well-being include people's experience of their lives.



Health 2020: an overarching health policy framework that promotes an all-of-government approach to improving public health and preventing disease

Values and vision: to maximize opportunities for promoting people's health at all levels, reducing health inequities and focusing on social determinants – the conditions, in which people are born, grow up, live, work and age.

Tools to measure well-being

A wide range of different tools can be used to measure well-being. Some use measures of objective factors, such as air quality or level of hearing impairment. Others include subjective measures: for example, people's satisfaction with a particular area of life, such as employment, or the quality of the environment. Some measures are quantitative; others, qualitative.

One of the most widely used tools is the survey, typically asking people to answer specific questions. A very large number of standardized instruments has been developed to provide additional information on well-being associated with a particular type of morbidity, health condition or disability. The most common domains covered by all tools are economics, health, education, society/community and environment.

Challenges in measuring well-being

- Well-being is multidimensional, so it is difficult to capture with one measure.
- Well-being is often treated as synonymous with the quality of life and happiness, but these include other subjective elements.
- Within the different domains, there is no consistency in the types of questions asked or areas assessed.
- A limited number of tools supports assessment of well-being at the society level; the vast majority focuses on individual well-being.
- Many countries in the Region lack capacities to collect or use information on well-being at the national level.

International organizations are cooperating closely in this area, and their work complements countries' initiatives. We at the WHO Regional Office for Europe will use experience from national governments, other international organizations (including United Nations agencies) and the private sector.

- We will focus on efforts to measure well-being at the society level, rather than individual conditions.
- We will emphasize external factors affecting well-being, since government policy might be able to influence them in the long term.
- In 2013, we are committed to:
 - refining the definition of well-being so that it is conceptually sound;
 - identifying a range of domains and indicators for measuring well-being – for example, linked to the International Classification of Functioning, Disability and Health (ICF), which is WHO's framework for measuring health and disability and complements WHO's International Classification of Diseases (ICD);
 - developing an approach to measuring well-being indicators;
 - clarifying how policy-makers, health professionals and other interested stakeholders across the European Region can use this information as input to policy-making and interventions; and
 - supporting a broad range of countries with different data and measures.

This information
is taken from
The European health
report 2012: charting the
way to well-being.

To download the report,
or for more information, visit
[http://www.euro.who.int/
european-health-report-2012](http://www.euro.who.int/european-health-report-2012)