CONCEPT NOTE

Implementing the Pan American Health Organization’s (PAHO)
Regional Plan of Action on Health in All Policies (HiAP)

Intersectoral action for health was a key component in the World Health Organization’s (WHO) seminal Alma Ata Declaration, 1978, which called for a comprehensive health strategy that not only provided health services, but also addressed the underlying social, economic and political causes of poor health (1). Alma Ata was written with the knowledge that the extraordinary advances in healthy life expectancy achieved since the late 19th century in developed countries had largely been due to improved social, environmental and economic living and working conditions. The call to engage other sectors for health was reinforced over the next decade by the health promotion movement. In 1986 the WHO’s Ottawa Charter for Health Promotion introduced ‘build healthy public policies’ as one of the five key action areas for health promotion, the others being “create supportive environments, strengthen community action, develop personal skills and reorient health services” (2). The Ottawa Charter stated, unequivocally, that health is created in the context of everyday life, where people live, love, work and play. It not only expanded the concept of health determinants to include environmental challenges and people’s empowerment, but it also called for investment in health by other sectors. Implementation of the idea of intersectoral action met with much success at the local level in 1980s and 1990s. Developed to implement the strategies of the Ottawa Charter, the WHO Healthy Cities project was able to work with city governments to implement a range of actions across municipalities in order to promote health. These initiatives have been implemented in hundreds of cities around the world, engaging in processes of city development and urban planning to make these processes more inclusive of health concerns.

Further to Alma Ata and the Ottawa Charter for Health, there has been a global movement to investigate and act upon the determinants of health; that is the causes of the causes. The WHO Commission on the Social Determinants of Health concluded in 2008 that the social conditions in which people are born, live and work are the single most important determinants of one’s health status (3). The work conducted by the WHO Commission on the Social Determinants of Health has since become an important component of the global and regional health agenda. This is evident in the active participation of official delegations in the World Conference on the Social Determinants of Health that took place in Rio de Janeiro in 2011, in which 120 countries out of a total 194 WHO Member States participated; the ratification of the Rio Political Declaration on the Social Determinants of Health by the World Health Assembly as part of Resolution WHA 65.8; the document “The future we want” approved during the Rio+20 Conference that includes health and the social determinants of health among
the pillars of sustainable development, as well as, the adoption of a social determinants of health approach in the definition of objectives and goals of sustainable development in the post-2015 agenda. Thus, the global movement to address the social determinants of health has gained momentum through various international agendas, and the Region of the Americas continues to actively work towards creating linkages between the social determinants of health and other international development agendas.

Today, there is recognition that there are different interests in the policy arena that requires building relationship between policy-makers in order to ensure policy outcomes. In 2013, countries agreed to the Helsinki Statement on Health in All Policies, stating that “Health in All Policies 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 populations health and health equity” (4). HiAP focuses on the social and environmental determinants of health, which are often better addressed through policies, interventions and actions outside the health sector. In order to successfully implement a Health in All Policies approach, it is paramount to identify common ground between the health sector as well as other sectors to build shared agendas and strong partnerships, which promote policies geared towards improving the health and well-being of populations. HiAP responds to the Rio Political Declaration on the Social Determinants of Health adopted in Rio de Janeiro in 2011 (5), as well as to PAHO’s Strategic Plan 2014-2019 in which the social determinants of health is a key pillar (6).

The central theme of the 8th Global Conference on Health Promotion held in Helsinki, Finland in June, 2013 was that of Health in All Policies with a focus on implementation, or the “how-to.” In preparation for the 8th Conference, PAHO in collaboration with the Government of Brazil held a Regional Consultation in February 2013 in which representatives from 30 countries participated. The goal of this consultation was to develop a regional stance on HiAP. One of the key recommendations that emerged from that consultation was for PAHO to develop a Plan of Action on Health in All Policies. During the Global Conference in Finland, PAHO/WHO presented the Summary of the Experiences of the Americas in a collection of 26 case studies from 15 countries in the Americas show-casing best regional practices on HiAP (7). Ecuador’s Minister of Health presented its “Plan Nacional para el Buen Vivir” during the conference and this case study was later published as part of the WHO HiAP Framework for Country Action. Additionally, the recommendations from the Regional Consultation were incorporated into the WHO HiAP Framework for Country Action launched in January, 2014 (8) as well as in the final Helsinki Conference Statement (4a).


Concretely, the plan will facilitate the following activities:

a) Generating and documenting evidence on HiAP for high-level advocacy to further strengthen collaboration between different sectors;

b) Utilize case studies on HiAP to further scaling-up HiAP in the Region;

c) Build capacity on HiAP using the course on HiAP developed by WHO, which will be rolled out by two of PAHO’s collaborating centers;

d) Scale up the use of Health Impact Assessment methodology, following up on the pilot
initiatives on HiAP that was carried in Argentina, Colombia and Suriname as a result of a regional training conducted by PAHO and University of New South Wales, Australia;

e) Work with the Healthy Municipalities Network and Healthy School networks to further roll out the HiAP Regional Plan of Action;

f) Monitor countries’ progress on implementing Health in All Policies;

g) Strengthen South-South collaboration through show-casing progress made on HiAP as well as South-North collaboration in particular with the EURO WHO Office which has progressed significantly on this agenda.

The Regional HiAP Action Plan itself was subject to wide and extensive consultations to ensure that the plan was developed in a collective and inclusive manner reflecting the uniqueness of the Region of the Americas. On April 8th and 9th, 2014 an expert consultation was held as part of the Health Promotion Congress that took place in Havana, Cuba to take advantage of the presence of key experts and stakeholders. Likewise, between January and May, 2014, SDE held a series of regional consultations through which representatives from ministries of health, WHO colleagues, academic experts and collaborating centers contributed to the draft.

A key challenge in developing the Plan of Action has been the definition of indicators. Further to a wide consultation, it was agreed to have a maximum of two regional indicators for each of the objectives set out in the Plan with the agreement that countries can select indicators that suit their specific country context. The Regional Plan of Action on HiAP also takes into consideration the lessons learned from the 26 published country case studies (7a), a study conducted by the WHO on the economic determinants of health in which Mexico took part (10), as well as a study conducted by Chile University on intersectoral action in the Region of the Americas (11).

It is increasingly recognized that public health challenges require action beyond the health sector including the need to address gender, equity, human rights and ethnicity as well as the social and economic policies that often lie outside the realm of the health sector. Universal Health Coverage (UHC) is a case in point as this requires multisectoral collaboration, namely engagement with ministries and institutions dealing with fiscal and monetary policy, education, employment, and other sectors. Similarly health related law provides guidance and a reference framework for legislators and regulatory bodies to adopt the necessary legal instruments to secure an efficient Health in All Policies Approach in response to complex health challenges. PAHO’s Member States adopted the Strategy for Universal Access to Health and Universal Health Coverage in September, 2014 (12). Achieving Universal Access to Health and Universal Health Coverage requires a Health in All Policies approach that establishes clear mechanisms for participation and accountability, multisectoral collaboration, dialogue, and consensus among different social actors. It also requires firm, long-term political commitment from national authorities responsible for formulating policies within and beyond the health sector to the highest attainable standard in health.

The world has progressed and changed substantially in recent decades. How to guarantee a world that is socially, economically and environmentally sustainable is a question that governments, specialists, academics, businesses, and citizens around the world are trying to answer. As part of this debate, the UN is defining a package of Sustainable Development Goals to be adopted in 2015 for fifteen years. The post-2015 agenda needs a rigorous framework that clearly articulates both how sustainable development differs from and is preferable to existing development models and how health and development are inextricably linked. Greater synergies between health and other sectors could be achieved by framing the goals in such a way that their attainment requires policy coherence and shared solutions across multiple sectors; that is a Health in All Policies approach. Thus, as preparations for the post-2015 process continues to
gain momentum, the public health community has an opportunity to secure a broader development framework that puts equity at its very center, using multisectoral mechanisms such as the Health in All Policies approach.

A focus on the social determinants of health and health equity through political action has historically been central to the work of PAHO and to the region itself. The Region of the Americas has made significant overall improvements in terms of addressing inequities. Despite this, many challenges still remain and the region continues to have a high degree of inequality. Addressing the issues of equity is a crucial step towards achieving the highest quality of life and well-being. PAHO Member States are committed to eliminating health inequities, as stated in the PAHO Strategic Plan 2014-2019 (6b), and recognizes that action on health requires a synergized approach with other sectors. HiAP is indeed an enabler for achieving health equity and the Plan of Action is considered to be a concrete tool on how best to address the social determinants of health in a practical manner. This Plan of Action along with the Rio Political Declaration on the social determinants of health (5a) will further strengthen the institutionalization of Health in All Policies across the Region of the Americas.

The Region of the Americas is the first WHO Region to have an Action Plan on Health in All Policies, a Plan that is informed by sound evidence, best practices and extensive consultations with stakeholders within and beyond the health sector. This will not only further strengthen the HiAP agenda and the application of this approach in the Region of the Americas, but also set an example on how best to implement HiAP to the rest of the global community.

On March 31 to April 1, 2015, PAHO will conduct a consultation with key experts on the implementation of the Regional Plan of Action on Health in All Policies. This exercise will serve to define concrete recommendations as to how the Regional Plan of Action on HiAP can best be operationalized within the Region of the Americas over the course of the next five years, 2014-2019. This will also provide an opportunity to engage in a dialogue that reflects upon what kinds of interventions have worked in the region, what we can begin doing to better address health in all policies, and what we should be doing differently to more effectively narrow the inequity gap through the HiAP approach. Central to this consultation will be an analysis of the role of the Healthy Municipalities Network to implement the regional plan of action on HiAP at the local level.

Further to this expert consultation, PWR-Colombia will host the Regional Forum on Urban Health in Medellin, Colombia in September, 2015. This will be the fourth Regional Forum on Urban Health, as part of an initiative established by PAHO in 2007 to foster and facilitate dialogue with internal and external partners on urban health. The regional forum has proved to be an innovative platform to share cutting-edge knowledge, experiences and lessons learned and to strengthen South-South and North-South networking and collaboration. The central theme of the fourth Regional Forum on Urban Health will be that of health in all policies, showcasing successful examples of implementation of health in all policies at the local level. Moreover, given that the Healthy Municipalities Network was established 25 years ago in direct response to the Ottawa Charter; the regional forum will provide an opportunity to assess the progress that has been made, as well as to identify ways to further strengthen this network over the next decade. Prior to the regional forum, a preparatory meeting will be held in Tunja, Colombia in June, 2015.

Finally, it is worth noting that the 22nd International Union for Health Promotion and Education (IUHPE) World Conference on Health Promotion will take place in Curitiba, Brazil from May 24-27, 2016 and the 9th WHO International Conference on Health Promotion will be held in Shanghai by the end of 2016. The Region of the Americas is actively participating in the preparations of these events and the evidence, recommendations and outcomes of the different regional meetings will be featured in these two global conferences.
References


