



## **HAVANA STATEMENT ON INTERSECTORAL ACTION TO ADVANCE HEALTH EQUITY**

**23 November 2023**

**Havana, Cuba**

Since the Declaration of Alma Ata in 1978, emphasis has been placed on coordination between different sectors of public policy beyond the health sector as a cornerstone to achieve health for all people. Since then, the Health in All Policies approach has been consolidated, with several international milestones.

The Ottawa Charter of 1986 reaffirms the importance of intersectoral action in health promotion. The 2010 Adelaide Statement on Health in All Policies maintains that government objectives are best achieved when all sectors include health and wellbeing as a key component of policy development. The 2011 World Conference on Social Determinants of Health (Rio de Janeiro, Brazil) promoted a promising approach to strengthening accountability in other sectors with regard to health and equity. The 2013 Global Conference on Health Promotion (Helsinki, Finland) stated that in order to improve health and health equity, social and economic development must be sustainable in all sectors. In 2017, the Second International Conference on Health Promotion (Adelaide Statement II on Health in All Policies) built on previous developments. Finally, the Sustainable Development Goals contained in the 2030 Agenda guide all actors and sectors at all levels toward achieving the objectives, which are indivisible.

Within the Region of the Americas, the 2014 Strategy for Universal Access to Health and Universal Health Coverage of the Pan American Health Organization (PAHO) proposes strengthening multisectoral coordination to address the social determinants of health in order to guarantee the sustainability of universal coverage.

In turn, intersectoral action is a central component of the Policy for Recovering Progress toward the Sustainable Development Goals with Equity through Action on the Social Determinants of Health and Intersectoral Work (PAHO, 2022), whose first strategic line of action is to “promote intersectoral action to address the indivisible goals of the 2030 Agenda integrating equity as a cross-cutting value.”

Within the framework of the first Regional Meeting on Intersectoral Action for Equity in Health, organized by PAHO/WHO and held 21-23 November in Havana, Cuba, we, the participants, representatives of national and local governments, civil society organizations, academic institutions, and citizens of the Region, state the following:

- 1) We strongly reaffirm the need to consolidate social welfare systems as essential foundations for equity in health, recognizing that intersectoral action stands as a central pillar in this mission. Integrated work between sectors is a fundamental strategy to address persistent challenges in reducing health inequities rooted in social determinants, such as ethnic-racial, gender, and class differences, and the intersectionality of these determinants.
- 2) We underscore the critical importance of intersectoral action as a powerful tool to address the obstacles that limit equitable access to health. Population health is determined by the action and policies of other sectors beyond the health sector, such as housing, transportation, education, employment, agriculture, and food, among others. In this framework, integrated work among all these sectors is required in order to overcome the inequities that affect our communities.
- 3) We emphasize the need for significant and active social participation in intersectoral processes. The voice and experience of communities are invaluable in identifying local challenges, co-creating effective solutions, and ensuring that interventions are culturally sensitive and socially just. Intersectoral action must be an inclusive process that reflects and respects the diversity of perspectives, potentials, and needs in each phase of planning and implementation, in order to ensure the sustainability of the action taken.

- 4) In close relation to the above, we emphasize the leading role of local governments which, in close coordination with national and subnational governments and other significant social actors, necessarily play a role in local intersectoral actions. The social conditions of people's lives play out at the local level, making this a key factor in addressing health inequalities and their social determinants.

Based on these principles, and considering the richness and diversity of intersectoral experiences throughout the Region of the Americas highlighted during the Meeting, the Network for Intersectoral Work and Social Participation for Health Equity in the Americas (TIPSESA network, Spanish acronym) was created.

The purpose of this network will be to reduce health inequities by addressing their social determinants through intersectoral work. It will bring together various actors from the Region of the Americas that are committed to social justice.

We invite all actors in the Region to integrate these principles into their policies and practices. Building healthy and equitable societies can only be achieved through sustained intersectoral work, active community inclusion, and constant evaluation of efforts and impacts towards reducing health inequities.

Finally, we thank the Republic of Cuba for graciously hosting this event and we recognize its trajectory and invaluable experience in intersectoral action.