

## **Report of the Subgroup on Health 2020**

### **Activities 2014–2015**

1. The Standing Committee of the Regional Committee (SCRC) subgroup on Health 2020 met twice in 2014–2015, firstly on 8 December 2014 in Helsinki and secondly on 17 March 2015 in Copenhagen, Denmark. This report provides a short overview of the discussions held during these two meetings.

### **December 2014: Summary**

2. The subgroup discussions had focused on the increased availability of comparative data to assess the impacts of Health 2020 implementation, supported through the WHO Autumn School on Health Information and Evidence for Policy-making, the various dissemination platforms to report progress, including a new public health journal to be published by the Regional Office, and a revitalization of the country profiles, “Highlights on health”.

3. The Director, Division of Policy and Governance for Health and Well-being, introduced the theme of intersectoral collaboration and the subgroup had held productive discussions on the practical promotion and implementation of intersectoral action for Health 2020 and had discussed how to enhance intersessional feedback from the SCRC to the Secretariat on the content of working documents being drafted for RC65.

4. The chairperson of the SCRC subgroup on implementation of Health 2020, Professor Alex Leventhal, said that the subgroup’s terms of reference had been reviewed and had remained unchanged, with one exception – the decision that subgroup members would support the promotion and implementation of Health 2020 at the request of the Secretariat. With the SCRC’s approval, a sentence to that effect would be added to the terms of reference.

### **March 2015: Intersectoral and interagency governance for health**

5. The meeting in Copenhagen on 17 March 2015 was opened by the chair, who reminded the group that the purpose of the Subgroup was to support the implementation

of Health 2020 and that the focus now is on further strengthening and supporting the work in countries. Dr Agis Tsouros provided a briefing on developments since the subgroup last met in January 2014. The key point of the discussion was the following.

6. Building on the work undertaken so far, WHO/Europe is in the process of finalizing a working paper for the 65th Regional Committee to be held in Vilnius in September 2015. The paper builds on the long legacy of intersectoral action in the Region and Dr Tsouros gave some examples including the previous Health for All. However the context and the opportunities have changed and therefore there is both an opportunity and a need to revisit existing work in order to strengthen a strategic approach and provide a framework, particularly given that a number of key modern public health challenges cannot be effectively addressed with intersectoral action. Providing a regional focus will allow intersectoral action to be both strategic and targeted in addressing challenges, including those presented in the European Review of Social Determinants and the Health Divide: in order to implement the recommendations of the Review, the evidence is in place and now is the time to focus on the mechanisms and processes for implementation.

7. Dr Tsouros presented to the Latvian Presidency High Level Conference held on 23-24 February 2015 entitled “Healthy lifestyles: nutrition and physical activity for children and young people at schools” which brought together the health and education sectors. The conference was an opportunity for dialogue between high level representatives from the two sectors and further joint meetings and conferences should be considered. The starting point for dialogue is the state-of-play of joint working for example health education, school nurses and health school meals and follow on to broaden the scope of these discussions to address issues of empowerment, resilience and health literacy, to name a few examples.

8. A further entry point is in the area of non-communicable diseases, where effective intersectoral action goes beyond coordination through synergies and co-benefits and crucially policy coherences. The key role played by national health policies as well as the implementation and accountability mechanisms will be addressed by the paper, which will be both strategic and applied, including tools and guidance.

## **Health 2020 Indicators**

9. Dr Claudia Stein updated the Subgroup on the European Health Information Initiative and the work to strengthen capacity building in the Region. The Autumn School was successfully held in Poland in October 2014 and additional training is planned in June 2015, with the Autumn School to be held in the Russian Federation.

10. Dr Stein informed the group of the work of the Expert Group on indicators for well-being, which raised the need to broaden our evidence in the area of well-being, and in particular the need for new evidence. The Expert Group has put forward a number of key recommendations which will be taken forward by the Secretariat.

11. Dr Stein addressed the issue of a gap in evidence in relation to indicators and intersectoral action. She informed the group that the European Health Review 2015 will include this important component of the work on intersectoral action and in

particular how to get to the level of evidence needed for effective policy and implementation.

## Comments from the Regional Director

12. In addition to the points raised above, the Regional Director added the following points:

- This is a very important topic which will be the main theme of the Regional Committee. In addition to the scheduled sessions addressing intersectoral action, it will be mainstreamed throughout the remaining agenda items including tobacco, physical activity and health systems strengthening. The Regional Director plans to ensure progress on this area is taken forward in a strategic and coherent way by the Regional Office. There is significant experience within the Region, not only at country level but also with the Environment and Health Process and past approaches with the Finance sector. The outcome should be a systematic way of collaboration.
- The Regional Director plans to explore the possibility of a governance process with key sectors for example the education sector. There are many synergies with the education sector including common objectives, co-benefits in terms of population outcomes as well as the learning from the settings approach that could act as a starting point for dialogue and strengthened collaboration, with the possibility of exploring the establishment of a common Platform at Regional level. Strengthening the integration between health, education and social policy would allow concrete next steps in the implementation of the Review.
- Two meetings are being planned for later this year to explore this strengthened collaboration: a meeting in Paris bringing together the education and social sectors and a second meeting in Berlin to address health and foreign policy. A Resolution on the latter was adopted in 2010 and some progress has been made, including training in health diplomacy but there remains much to be done particularly in linking Health 2020 with the Sustainable Development Goals. Any decisions will be taken with the Regional Committee.
- A large conference is being planned for after the Regional Committee which will address all countries in the European Region and include the education and social sectors. It is essential that intersectoral action is being addressed systematically and that action at the Regional level supports and strengthens the work undertaken at national level. In the area of social determinants, intersectoral action needs to be strengthened in its systematic approach for example. Countries are increasingly setting up governance committees at the political level and there are challenges in maintaining the momentum and feeding the national agenda: greater systematic work at the Regional level in the form of a mechanism can support these national processes.

## Comments from the subgroup

13. The chair and members of the subgroup expressed their strong appreciation for the Secretariat taking this issue and work forward and in the value to Member States of this to strengthen implementation of Health 2020. They also made the following comments.

- Health diplomacy is an increasingly important topic given that health is more prominently an issue in the foreign policy relationships between countries.
- The Secretariat could consider narrowing the scope of collaboration between health, education and social policy as the risk is that this is too broad and there is a need to ensure collaboration is aligned with Health 2020. An example for further focus could be vulnerable populations.
- An initial broad focus could be taken to identify potential areas of collaboration with a view to focusing on key issues of co-benefits however it is important to define the goal in partnership with the other sectors in order to strengthen commitment and joint ownership.
- In order to determine the people needed to be part of the structured dialogue it is necessary to determine the desired outcome and objective. The added value of a regional Resolution needs to be considered in light of the World Health Assembly resolution and specifically what we are trying to achieve with a regional approach, for example global leadership in the area given the regional history and experience.
- A key focus for any work taken forward needs to be the area of co-benefits, which has been addressed to a certain extent but can be elaborated further.
- Life skills and resilience need to be included as a priority of any joint collaboration, as well as health literacy.
- The key leadership role of the Ministries of Health is an important component: both in terms of commitment and continued leadership throughout the process.
- The dialogue needs to move away from the 'why' to the 'what' and 'how' of intersectoral action. A focus could be on shared experience.
- The Belarus conference in October 2015 is an opportunity to address intersectoral action and the need to start as early as possible.
- The experience from Healthy Cities is very important in the context of these discussions.
- The Subgroup welcomed the initiative, considering it a timely and useful (both technically and politically) proposal and recommended that the SCRC take this agenda item to RC65
- The Subgroup had a lively and considered discussion on a number of aspects of the proposal including the objectives, the process, the Working Document, the Resolution and the platform and considers further discussion is necessary given the importance of the topic.
- The Subgroup supported the Working Document and considered this a good first document to attempt to focus in what is a complex and multidimensional topic.

## Points for follow up

- Clarifying the approach in terms of the breadth of the proposed platforms, the setting of objectives for the platform and the participating/invited sectors
- Further consideration should be paid to the role of industry, transparency and conflict of interest
- The Subgroup believed that there are a number of synergies between this work and the Belarus conference in Autumn 2016 on Health throughout the Life-course
- The Subgroup believes that the Resolution could add regional value in its ability to:
  - Contextualise the global approach to the European region
  - Bestow further political legitimacy for Member States on taking this work forward at national level
  - Recognise the strong intersectoral legacy within the Region and commit to taking this work forward strategically and systematically

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