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Implementing Health 2020: 2012–2014



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This document describes progress made in implementing Health 2020, the European health policy framework adopted by the WHO Regional Committee for Europe at its sixty-second session in 2012.

The Regional Office work taking forward the implementation of the Health 2020 vision across the Region was principally focused on promoting awareness of the Health 2020 and its support studies; integrating Health 2020 values, principles and approaches with every aspect of the technical and planning work of the Regional Office; building capacity for implementation especially at country level; building strategic partnerships with key international agencies and bodies and supporting countries at national and sub-national levels implement Health 2020 through aligning and developing policies and reinforcing Health 2020 perspectives in the implementation of key strategies and plans.

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Implementing Health 2020: 2012–2014

1. The purpose of this document is to report to the Regional Committee for Europe at its 64th session (RC64) on progress made in implementing Health 2020 in the Region. All the aspects reported were discussed with the Subgroup on Health 2020 implementation of the Standing Committee of the Regional Committee for Europe (SCRC) at its sessions after RC63 and subsequently with the SCRC. The feedback and advice from the SCRC and its subgroup were encouraging and were valuable in framing and shaping this report.

2. [“Health 2020 – the European policy framework for health and well-being”](#), adopted by RC62 in [resolution EUR/RC62/R4](#), is a common policy framework for action to promote health and well-being for people in the Region. The resolution requests the Regional Office to support Member States in developing and updating their health policies in accordance with Health 2020, to ensure wide dissemination of the Health 2020 policy framework, to promote Health 2020 as a possible frame of reference to other international bodies active in health, to continuously update the evidence and knowledge base on effective strategies and to continue to develop the Health 2020 monitoring system.

3. Health 2020 was designed as a policy and strategy that would make a real difference in the health and well-being of the people of the European Region. It is a political and strategic tool designed to confer legitimacy, commitment, coherence and focus on policies and actions to address the public health challenges of our time. Fulfilling the promise and potential of the Health 2020 approach has implications for the work of the whole Regional Office at both technical and country delivery levels. Above all, Health 2020 was designed as a source of motivation and inspiration for countries to adopt and use 21st century values, principles and approaches that are based on evidence and that promote health as a whole-of-government and whole-of-society public good.

4. During the past two years, the Regional Office has responded to the requests in resolution EUR/RC62/R4 with an initial focus on six main areas:

- **spreading awareness** (including launches and debates) of the Health 2020 policy framework to international and country audiences across the Region;
- completing and **disseminating studies** on social determinants of health and the health divide, governance of health, economics of disease prevention and health promotion and intersectoral governance for health in all policies;
- aligning and **integrating Health 2020** values, principles and approaches with every aspect of the work of the Regional Office;
- **building capacity** for implementation at the Regional Office and at country level, including preparing the Health 2020 package and training staff members;
- **devising plans** (including biennial collaborative agreements) to guide the work in the next biennium and making arrangements for coordinated, **integrated delivery in countries** by multidivisional teams; and
- **responding to country requests for support** and assisting them and the WHO networks of regions and cities that are already preparing national or subnational policies and plans inspired by or aligned with Health 2020.

5. Emphasis has been given to promoting coherence and better integration, optimizing delivery for better outcomes and concentrating on the types of support that have maximum impact, including intercountry mechanisms and learning platforms that supplement country-based activities. The [Division of Policy and Governance for Health and Well-being](#) at the Regional Office is coordinating this work.

6. The report that follows describes plans and activities that have been undertaken in the areas noted above and provides assessments of work delivered and examples of progress at country level across the Region.

Awareness and dissemination of Health 2020 and the main studies on which it is based

A communications strategy is being prepared to scale up dissemination of Health 2020.

7. Communication and advocacy are key activities in the implementation of Health 2020 and coordination is needed to guarantee the coherence of the multiple initiatives to disseminate and raise awareness of the framework. Addressing communication in a strategic way can foster social change at all levels of society.

8. Targeting Health 2020 messages to the right audiences will foster its implementation. The whole-of-government and whole-of-society approaches of this framework pose several challenges in terms of communication, as the targets and audiences are diverse. Furthermore, messages need to be adequately adapted for people within and outside the health sector. Health 2020 should actively engage a wide diversity of stakeholders in working together to improve health and well-being. The Health 2020 communications strategy will bring coherence to in-house efforts and foster engagement and commitment to Health 2020 values.

The Health 2020 framework has been promoted at international health policy conferences across Europe.

9. After [adoption of the Health 2020 policy framework](#) in September 2012, the Regional Office has systematically focused attention on this important development at high-profile international health policy events, such as the [European Health Forum Gastein](#), the [World Health Summit 2012](#) and The [Global Healthcare Summit 2012](#), where Health 2020 was presented and debated by a wide audience of stakeholders. During 2013, a number of important global and regional conferences were used as platforms for further debate on Health 2020 topics and included: the [8th Global Conference on Health Promotion](#) in Helsinki, Finland; the [4th European Conference on Health Promoting Schools](#) in Odense, Denmark; and the [international anniversary conference marking 35 years of the Alma-Ata Declaration on primary health care](#) in Almaty, Kazakhstan.

All Regional Office ministerial conferences and other high-level meetings in 2013 were based on and moved the Health 2020 agenda forward.

10. Participants at the [high-level technical meeting on Health systems in times of global economic crisis: an update of the situation in the WHO European Region](#) in April in Oslo, Norway, discussed health budget cuts, universal health coverage and protection of vulnerable groups. Those at the [European Ministerial Conference on Nutrition and Noncommunicable Diseases in the Context of Health 2020](#) in July in Vienna, Austria, discussed policy options on nutrition and the importance of cooperation across sectors, involving health as well as other ministries, in initiatives ranging from food-product reformulation and labelling to school meals and international trade. The [Vienna Declaration on Nutrition and Noncommunicable Diseases in the Context of Health 2020](#) highlights these issues through the lens of Health 2020.

11. In October 2013, a [high-level conference on Health systems for health and wealth in the context of Health 2020](#) marked the progress made since Member States adopted [The Tallinn Charter: Health Systems for Health and Wealth](#) in June 2008. Participants discussed people-centred health systems, a Health 2020 priority, and challenges in promoting effective intersectorality and whole-of-government and whole-of-society initiatives for greater health systems transparency and accountability. The Conference mapped a way forward for strengthening health systems through the lens of Health 2020.

12. In the [Ashgabat Declaration](#), the document resulting from the [European Ministerial Conference on Prevention and Control of Noncommunicable Diseases in the Context of Health 2020](#), held in December in Ashgabat, Turkmenistan, Member States made a clear commitment to policy actions aligned to Health 2020 in order to improve health for all, reduce health inequalities and strengthen leadership and participatory governance for the prevention and control of NCDs.

The Regional Director met with ministers and heads of government on implementation of Health 2020.

13. Since the endorsement of Health 2020, the Regional Director has been invited to countries for national launches and debates on Health 2020. She has also met with several prime ministers and presidents to discuss health from a whole-of-government and whole-of-society perspective. In addition, several recently appointed ministers of health were invited to the Regional Office in Copenhagen for official visits, during which the Health 2020 policy framework was presented and considered from the perspective of each country.

Health 2020 documents and studies were published, translated and launched.

14. Health 2020 policy and strategy documents have been translated into several European languages and have been disseminated widely in countries in connection with awareness-raising campaigns and other work by WHO country offices.

15. In addition to the extensive evidence base that underpins Health 2020, new reviews have been produced, including:

- a [European review of social determinants of health and the health divide](#);¹
- a joint publication of the Organisation for Economic Co-operation and Development (OECD) and the European Observatory on Health Systems and Policies on the [economic case for health promotion and disease prevention](#);²
- two studies on governance for health in the 21st century: [Governance for health in the 21st century](#) and [Governance for health in the 21st century. Making it happen](#);³ and
- [The European health report 2012](#),⁴ which contains the epidemiological evidence base for Health 2020 and its six overarching targets.

16. *The European health report 2012: charting the way to well-being* is available in German and Russian and the French version will be ready in time for RC64; other main Health 2020 studies are also being translated into Russian.

15. The Regional Office has planned a series of events in countries to promote and debate the evidence and recommendations in the new studies, particular in the review on social determinants and the health divide.

Box 1. Debating the recommendations of the European review: launches in London, Helsinki, Tashkent and Montenegro

In October 2013, the Regional Office, the University College London Institute of Health Equity and the United Kingdom Department of Health organized the [official international launch of the European review](#). Policy-makers in many sectors and levels of government thoroughly discussed their relevance for improving public health in the United Kingdom with impressive media interest and coverage.

¹ Review of social determinants and the health divide in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2013.

² Merkur S, Sassi F, McDaid D. Promoting health, preventing disease: Is there an economic case? Copenhagen; WHO Regional Office for Europe; 2013 (http://www.euro.who.int/__data/assets/pdf_file/0004/235966/e96956.pdf?ua=1).

³ Kickbusch I, Gleicher D. Governance for health in the 21st century. Copenhagen: WHO Regional Office for Europe; 2012; Kickbusch I, Behrendt T. Implementing a Health 2020 vision: governance for health in the 21st century. Making it happen. Copenhagen: WHO Regional Office for Europe; 2013.

⁴ The European health report 2012: charting the way to well-being. Copenhagen: WHO Regional Office for Europe; 2013 (<http://www.euro.who.int/en/data-and-evidence/european-health-report-2012>).

Box 1. continued

Three events for debating the recommendations of the European review are planned for 2014: the [first, held in Helsinki, Finland, on 16–17 June 2014](#), targeted the Nordic and Baltic countries; the second, to be held in Tashkent, Uzbekistan, in October 2014, will target countries in the Commonwealth of Independent States (CIS); and the third will be held in Montenegro for the south-eastern European countries. The Regional Office is exploring possibilities for similar events that would bring together other subregional constellations of countries in the European Region.

Box 2. Health 2020 in public health journals across the European Region: from Sweden to Turkmenistan

One of a series of awareness-raising activities on Health 2020 was an article by the Regional Director, presenting the Health 2020 policy framework to the public health community. This has been translated into several languages and published in public health journals across the European Region. Requests for translating this article to other languages continue to be received by the Regional Office.

Integrating Health 2020 into the work of the Regional Office

18. Supporting Member States in implementing Health 2020 is a Regional Office-wide responsibility, although coordination is centred in the Division of Policy and Governance for Health and Well-being, established shortly after adoption of the policy framework. Extensive efforts have been made to integrate Health 2020 fully into all the work of the Regional Office, including external communication (corporate branding, brochures, press and other media, etc.) and technical work at the regional level and in countries.

19. As described above, several ministerial and high-level technical conferences on a wide variety of topics held in 2013 provided opportunities for taking stock of developments in the Region and for agreeing on future directions, guided by the policy priorities of Health 2020. These meetings were important vehicles for moving the Health 2020 agenda forward in the European Region and shaping the work of the Regional Office.

Box 3. Adequate health information: the backbone of good public health policy and practice

Examples of Health 2020 implementation led by the [Division of Information, Evidence, Research and Innovation](#) include the following initiatives.

- [Health 2020 targets and indicators](#), developed in consultation with Member States, were adopted.
- Training for collation, analysis and reporting of Health 2020 indicators is being delivered through the annual [WHO Autumn School on “Health information and evidence for policy-making”](#).
- A new health information web portal, which integrates all existing databases and will facilitate the reporting of Health 2020 indicators and progress, will be launched at RC64.
- The [Evidence-informed Policy Network \(EVIPNet\)](#) is a capacity-building network that promotes systematic use of health research in policy-making. This new initiative will be an important tool for implementing Health 2020 at the country level. Four Member States have launched the first phase.

Box 3. continued

- The [Health Evidence Network \(HEN\)](#) is being revised to include syntheses of evidence that is directly relevant for Health 2020.
- A journal will be launched by the Division of Information, Evidence, Research and Innovation during the current biennium in which Member States can publish success stories of policy implementation.
- The [European Advisory Committee on Health Research \(EACHR\)](#), coordinated by the Division of Information, Evidence, Research and Innovation, continues to contribute greatly to the development of Health 2020 policy.

Box 4. Health 2020: working towards resilient, sustainable health systems and outcomes

Examples of Health 2020 implementation led by the [Division of Health Systems and Public Health](#) include:

- implementation of *The Tallinn Charter: health systems for health and wealth* within the context of Health 2020: the final report and the way forward to 2020 to be discussed at RC65;
- a new operational approach for health systems' strengthening, "[innovative people-centred health systems for better outcomes](#)", currently focusing on NCDs and multidrug- and extremely drug-resistant tuberculosis, now extended to antimicrobial resistance and vaccination;
- work with Member States in moving towards or maintaining universal health coverage, including the [Barcelona Course in Health Financing](#) for senior policy-makers and support for health system reform in Cyprus, Georgia, Greece, Ireland and Portugal and in central Asian countries;
- operationalizing the "[European Action Plan for Strengthening Public Health Capacities and Services](#)" as a pillar of Health 2020 implementation;
- development of a [framework for action towards coordinated, integrated health service delivery](#) to support health systems in adapting to the health challenges of the 21st century; and
- a strategic move to [strengthen nursing and midwifery work](#) in the Regional Office and support Member States in sustainable financing of new medicines and health technology.

Health 2020 has been embedded into all internal planning

20. Operational planning for the 2014–2015 biennium served as an important opportunity for integrating Health 2020 into the work of the Regional Office. Efforts have been made to ensure close alignment between organizational planning and development of the Health 2020 implementation strategy. This allowed for cross-divisional rethinking with adjustments made to programming in order to contribute specifically to the objectives of the WHO reform. Internal retreats of various kinds – Regional Office-wide, divisional, programme managers and executive management – have been vehicles for change in this context.

Box 5. Communicable diseases and environment and health control programmes are reaching the limits of what they can deliver: how Health 2020 advances the work of the [Division of Communicable Diseases, Health Security and Environment](#)

Programmes to address tuberculosis (TB), HIV/AIDS, vaccine-preventable diseases, access to safe water, air pollution and responses to humanitarian and health emergencies all reveal inequalities and marginalized populations that have no or limited access to health interventions. Human rights are not always respected and gender inequalities persist in some settings. Control programmes for communicable diseases, health security and the environment have developed significant intersectoral cooperation that deserves to be further strengthened.

In this field, a number of features fall into the four priority areas of Health 2020 for policy action:

Investing in health through a life-course approach and empowering people:

- childhood vaccines and immunization;
- child and young adults risk behaviour;
- occupational health; and
- transport and health.

Tackling the Region's major health challenges:

- unfinished control and elimination of major infectious diseases;
- increased threats of new introduction or re-emergence of diseases; and
- climate change.

Strengthening people-centred health systems, public health capacity and emergency preparedness, surveillance and response:

- controlling communicable diseases among socially excluded groups; and
- emergency preparedness with an all-hazards approach.

Creating resilient communities and supportive environments is essential for sustained control of communicable diseases. Elements as different as health insurance schemes, vector-free environments, food safety, lower air pollution, good water and sanitation, safe hospitals and effective country emergency preparedness directly contribute to more resilient communities. Countries that meet the requirements of the *International Health Regulations (2005)* are even more resilient.

Concrete steps for implementing Health 2020 are included in all biennial collaborative agreements.

21. A particularly important instrumental component of this process has been biennial collaborative agreements (BCAs) for the 2014–2015 biennium, which have a new structure that facilitates understanding how a country intends to take the Health 2020 vision forward in the national context and how the Regional Office can support those efforts, both at the strategic level and with specific technical approaches.

22. Most BCAs for the biennium have been signed and entry points for Health 2020 in each country have been mapped into thematic areas (such as national health policy development, building capacity for whole-of-government approaches, supporting the establishment and agenda setting of multisectoral committees, developing a multisectoral NCD strategy). The Regional Office has prepared detailed road maps for next steps in the strategic implementation of Health 2020 in each country, including the matching of consultants.

Box 6. Effective prevention and control of NCDs through Health 2020 implementation

Examples of Health 2020 implementation led by the [Division of Noncommunicable Diseases and Life-course](#) include:

- coordination of two ministerial conferences, in [Vienna](#) and [Ashgabat](#), in which nutrition and NCD policies, respectively, were considered in the context of Health 2020;
- introduction of a new approach to NCD policies, promoting close alignment with Health 2020 objectives and values (this approach has already been adopted by several countries in the Region);
- promoting the life-course perspective in international and national meetings of policy-makers and experts on the health of mothers, children and adolescents, reproductive health and healthy ageing;
- providing specific support to countries on mental health reform, creating concrete examples of Health 2020 principles in practice;
- focusing on child maltreatment as a violation of human rights and a determinant of future health and well-being through national assessments and systematic reviews of the evidence, with an action plan to be discussed by RC64; and
- strengthening work on healthy ageing by building on the achievements of 25 years of Healthy Cities and developing cross-sectoral resources and tools for creating “age-friendly environments” in Europe.

WHO Country Cooperation Strategy is to be aligned with the Health 2020 policy framework.

23. Work is under way to roll out a Country Cooperation Strategy (CCS) in the European Region within the Health 2020 policy framework. A meeting was held in March in Tunis, Tunisia, for the heads of all WHO European country offices and staff from the Regional Office and WHO headquarters to discuss the development of the CCS and plan for the 2016–2017 biennium. A template document for the Region, adjusted to the European context and aligned to Health 2020, has been prepared.

Developing the capacity of the Regional Office to implement Health 2020

The Regional Office makes every effort to secure resources for Health 2020 implementation.

24. Resources are essential for implementing Health 2020. While some new initiatives have been launched, emphasis has been placed on using and reinforcing existing resources, mechanisms and processes. Given the present resource constraints, priority is given to types of support that can deliver an impact efficiently, such as multicountry and intercountry mechanisms and new online forms of learning. Some financial and in-kind resources are being mobilized. In order to strengthen the overall support to Health 2020 implementation, a number of strategic and pragmatic decisions have been made, including a call for health policy experts to be seconded to the Regional Office to implement Health 2020. This was successful and two senior posts, on national health policies and governance for health, have been established in the Regional Office. A first round of briefings and training for senior health policy consultants on implementation of Health 2020 took place in early 2014 and a second round will be held shortly.

Box 7. Expanding the resource base: training accredited Health 2020 consultants

In January 2014, the Regional Office brought together public health policy experts from across the European Region, including several former health ministers, for the [first training course for Health 2020 consultants](#). Further candidates have been proposed by countries and a [public call for consultants](#) has been made. A second round of training will be conducted later in 2014.

A resource package of tools and services for Health 2020 implementation has been produced.

25. A key undertaking in strengthening the capacity of the Regional Office is the development of a Health 2020 implementation package and work is progressing in that regard. The Health 2020 implementation package is designed for people and institutions in political and technical roles in countries, including ministers and ministries of health, health associations and agencies, WHO country offices, other government and sector actors and WHO networks. The package will combine tools, services and written materials to support evidence-informed policy development, institutional strengthening and stakeholder engagement for improving health and well-being in line with Health 2020 values, principles and recommended actions. The elements of the package can be combined in various ways to meet the requirements of countries and target groups. Materials will be available in English and Russian.

26. The Health 2020 implementation package has three main aims:

- to promote **awareness** and **learning** about Health 2020 overall and its values, principles, approaches, goals and main messages;
- to support the development and implementation of **national and subnational policies, strategies and plans** for Health 2020 strategic objectives and policy priorities; and
- to support **capacity-building** for leadership, whole-of-government, whole-of-society and health in all policies approaches, partnership development and monitoring of progress nationally, subnationally and across the Region.

27. The implementation package will serve to identify any gaps in the tools and services required to implement Health 2020 and will allow a more coherent approach to developing Health 2020-based policies. It will be a live web product that can be updated regularly with new evidence and good practices.

Fig. 1. Health 2020 implementation package



Box 8. Over 100 staff trained on Health 2020 through the global learning programme

The WHO Global Learning Programme on National Health Policies, Strategies and Plans is an internal capacity-building programme for increasing WHO support to Member States for developing national health policies and strategies. In the Regional Office, the programme has been instrumental in moving forward support to Member States on the implementation of Health 2020 by strengthening the capacity of WHO staff; 105 staff members have been trained, including all heads of country offices.

Box 9. Interactive health inequality atlases: a tool for Health 2020 implementation

The Regional Office's [interactive atlases of health inequalities](#) are a tool for assessing inequalities in social determinants of health as well as the resources, outputs, outcomes and effects of health care at the subnational level in countries of the European Union, candidate countries and some others. The atlases are based on publicly available data from Eurostat (the statistical office for the European Union) to identify and visualize inequalities between national subregions.

Box 10. Feeling the pulse of Health 2020: dynamic monitoring of countries' health policies and progress

The Regional Office is developing a tool to follow the progress of Health 2020 dynamically through the development, alignment and implementation of national health policies, strategies and plans. Such monitoring is essential to keep track of relevant country processes and interactions with WHO, to provide Health 2020-focused information on a continuous basis and to gather and present up-to-date material for country analysis and review. This will support the integrated approach across Regional Office divisions and countries, allowing overall country assessment through the Health 2020 lens.

Responding to country requests

The Regional Office takes a systematic approach to providing support to countries in taking forward the Health 2020 vision in their national contexts.

28. As mentioned above, BCAs in 2014–2015 and the CCS are being developed within the Health 2020 framework and support for implementation is integrated and coherent with the Health 2020 strategic objectives and policy priorities. The Regional Director has sent letters to all ministers of health in the Region to obtain an updated overview of Health 2020 developments, offering support from the Regional Office. Strengthened capacity in the Regional Office has allowed quick responses to specific requests from governments or in response to political changes.

29. Multicountry and intercountry mechanisms are other important types of implementation support that can efficiently impact cross-country exchange of know-how and practice.

Box 11. South-eastern Europe Health Network moves forward on Health 2020

Joint work on implementation of [The Banja Luka Pledge](#) is progressing in all [South-eastern European Health Network \(SEEHN\)](#) countries,⁵ in line with the Health 2020 strategic objectives. The equity in health-in-all policies, multicountry capacity-building programme was designed by the Regional Office to address the priorities of *The Pledge* with regard to equity and accountability.

In partnership with the Regional Office, SEEHN has led the development of a chapter based on Health 2020 in a new economic growth strategy for South East Europe (SEE) – SEE 2020, coordinated by the Regional Cooperation Council (RCC) in Sarajevo, Bosnia and Herzegovina.

Box 12. Small countries platform for Health 2020 know-how

Eight countries⁶ with a population of less than one million have been invited to participate in a [Health 2020-focused project led by the Regional Office and San Marino](#). Countries with small populations are ideal settings for making changes: they can serve as “live implementation sites” and act as “know-how generators” and catalysers for Health 2020.

The project is due to be [launched in San Marino in July 2014](#).

Box 13. Subnational commitment: Regions for Health Network and the Göteborg Manifesto

The [Regions for Health Network \(RHN\)](#) brings together subnational regions across the WHO European Region to accelerate delivery of innovations in health and well-being at regional level. RHN, which has been active for 20 years, entered a new phase in November 2012 with the approval of its *Göteborg Manifesto*, which supports and is inspired by Health 2020. The aim of the RHN is to promote action and sharing of know-how and experience in implementing Health 2020, with an emphasis on governance and leadership. In a dedicated series of publications, RHN documents successful policies and initiatives that adopted whole-of-government and whole-of-society approaches to promote health and reduce health inequities. The next annual meeting of the RHN is to be held in Florence, Italy, in October 2014.

Box 14. WHO European Healthy Cities Network: a key vehicle for delivering Health 2020 locally

Health 2020 provides a strong, timely unifying framework for phase VI (2014–2018) of the [WHO European Healthy Cities Network](#). It builds on and reinforces the fundamental values, principles and work that have been at the core of this 25-year-old movement since its inception. The [Liège statement on the new European policy for health and well-being, Health 2020](#) explicitly involved the Network in development and implementation. Healthy Cities is a strategic vehicle for implementing Health 2020 at local and urban levels.

⁵ Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Israel, Montenegro, Republic of Moldova, Romania, Serbia, The former Yugoslav Republic of Macedonia

⁶ Andorra, Cyprus, Estonia, Iceland, Luxembourg, Malta, Monaco, Montenegro

Exploring and supporting new partnerships

30. Key to the success of Health 2020 will be close collaboration of Member States and WHO and reaching out to engage with partners. Partnerships create an enabling environment for public health policies, facilitating whole-of-government and intersectoral collaboration for health, developing broad international, national and local constituencies, creating policy coherence among different actors and efficient use of resources. The Regional Office strives to establish and maintain effective collaboration with many partners in order to strengthen regional work and in the provision of technical assistance to countries. Therefore, WHO works with a wide range of partners such as other United Nations agencies, the European Union and its institutions, the OECD, global health partnerships such as the GAVI Alliance and The Global Fund to Fight AIDS, Tuberculosis and Malaria, subregional networks and nongovernmental organizations.

The Regional Office has strengthened its relations with the European Union and its institutions, including the European Parliament.

31. The Regional Office continues to collaborate with the European Commission in the six joint roadmaps that support implementation of the [European Commission and WHO Regional Office for Europe Joint Declaration](#) endorsed at RC60. The Regional Office also has joint workplans and common guiding principles with the European Food Safety Authority, the European Environment Agency and the European Monitoring Centre for Drugs and Drug Addiction. In addition, the Regional Office has intensified its work with the countries holding the Presidency of the Council of the European Union in order to ensure coherent follow up of priorities in the Region, sound out provision of support on health issues to countries holding the Presidency and support the Presidency in its involvement in WHO's governing bodies.

The Regional Office supports coordination among United Nations agencies through well-established regional and country mechanisms.

32. At the regional level, the Regional Office has increased its collaboration with the regional coordination mechanism (RCM) and the regional United Nations Development Group (UNDG), which is also called the regional directors team (RDT). Both the RCM and the UNDG provide excellent entry points for United Nations coordination and for creating synergies and policy coherence. For example, United Nations organizations collaborate in the context of interagency working groups on Millennium Development Goals and Roma. The "Roma Regional Working Group of the United Nations Development Group working in Europe and central Asia" has prepared a joint position paper on United Nations support for Roma inclusion.

33. In 2013, the RCM, inspired by Health 2020, discussed collaboration on social determinants of health and the RDT discussed integration of Health 2020 into the forthcoming United Nations Development Assistance Framework (UNDAF). An ad hoc working group on social determinants of health brought together various agencies to review their work and tools for action on social determinants of health. As the UNDAF development process is initiated, WHO country offices promote Health 2020 as the policy framework for health in their individual UNDAFs. A guidance note on how to integrate Health 2020, work on social determinants of health and NCDs into the UNDAF is being developed.

34. At its meeting in 2014, the RCM agreed to set up a regional interagency task force on the prevention and control of NCDs, aligned with the roles and responsibilities of the global interagency taskforce on the prevention and control of NCDs led by WHO and reporting to the RCM. The task force will coordinate the efforts of United Nations agencies on the prevention and control of NCDs and on social determinants of health.

Joint framework of action signed with the United Nations Population Fund and the United Nations Children's Fund.

35. In September 2013, the Regional Office, the United Nations Population Fund (UNFPA) Regional Office for Eastern Europe and Central Asia, and the United Nations Children's Fund (UNICEF) Regional Office for Central and Eastern Europe signed a [joint action framework](#)⁸ to strengthen the partnership among the three organizations. The aim is to more effectively support Member States in achieving the health-related Millennium Development Goals and to address new challenges in the Region in the context of Health 2020. In the action framework, the three agencies are committed to consolidating their work to improve the quality of health care delivery for women and children and to ensure universal health coverage, especially for underserved and vulnerable populations. A more detailed outline of their joint actions is being prepared.

The Regional Office has strengthened ties with subregional organizations to advance Health 2020 implementation.

36. To further strengthen Health 2020 implementation, the Regional Office:

- has moved into closer collaboration with the Council for Health Cooperation of the CIS;
- has led the development of a chapter based on Health 2020 in a new economic growth strategy for SEE 2020; and
- contributes as an active member in the expert group preparing a new strategy within the Northern Dimension Partnership in Public Health and Social Well-being.

Non-state actors are important partners in moving the Health 2020 vision forward.

37. WHO collaborates with a large number of non-state actors, including nongovernmental organizations, philanthropic foundations and academia. These partnerships are particularly important to ensure whole-of-society engagement. For example, the Regional Office engages in intensive collaboration with nongovernmental organizations in many technical areas, including consultation in drafting policy documents (such as the drafting of Health 2020) and in policy implementation and advocacy.

38. Currently, WHO's relations with non-state actors are being discussed in the context of the WHO reform and existing rules and procedures are under review. The Regional Office will ensure alignment of regional procedures with the outcomes of those discussions.

⁷ Joint action framework: WHO Regional Office for Europe (WHO-EURO) UNFPA Regional Office for Eastern Europe and Central Asia (EECARO) and UNICEF Regional Office for Central and Eastern Europe and the Commonwealth of Independent States (CEE/CISRO). Signed 18 September 2013 at the 63rd session of the WHO Regional Committee for Europe in Çeşme Izmir, Turkey (http://www.euro.who.int/__data/assets/pdf_file/0020/232427/Joint-Action-Framework_signed_18-Sept-2013.pdf).

Overview of country progress and illustrations of good practices

Health 2020 in national health policies

A number of Members States have now developed national health policies aligned with Health 2020.

39. **Estonia** and **Latvia** have both developed national health policies consistent with the vision and principles of Health 2020. **Turkey's** national strategic plan 2013–2017 is strongly aligned with the values and principles of Health 2020 and the country is now implementing a national Health 2020 vision in collaboration with the Regional Office, through a combination of health systems strengthening, actions on social determinants of health and improved intersectoral governance for health. **Switzerland** developed a national Health 2020 strategy, which was launched in January 2013. Detailed progress reports are publicly available online, including who is responsible for each activity in order to improve the transparency of the strategy and foster public accountability and engagement in health. In **Israel**, the Healthy Israel 2020 initiative is a whole-of-government process for defining Israeli policy in the areas of disease prevention and health promotion. Led by the Ministry of Health, it establishes intersectoral targets and strategies to improve the health of the population and reduce health disparities, drawing on Health 2020 objectives and priorities.

40. In 2013 the Ministry of Health of **Spain** involved the Regional Office in strengthening alignment of its new national strategy for health promotion and prevention to the Health 2020 policy framework. **Kyrgyzstan** has approved a new national Health 2020 strategy as a whole-of-government vision to improve the health and well-being of its population, with a commitment from the Prime Minister to chair an interministerial committee to oversee the strategy. Health 2020 was helpful in **Italy** to justify a case for investment in prevention in developing the new national public health and prevention plan for 2014–2019. **Luxembourg** is preparing an ambitious new cancer strategy aligned to the principles of Health 2020, covering the full spectrum, from prevention to rehabilitation, with strong emphasis on health promotion and prevention. The strategy was developed in a highly inclusive process, including civil society. **Bulgaria, Croatia, Hungary, Romania** and **Serbia** have all recently developed new national health strategies based on Health 2020. **Slovakia's** strategic framework for health 2014–2030 is based on Health 2020 priorities and values; consultations on the document are under way before its presentation to its Parliament. **Lithuania's** 2014–2023 national health policy based on Health 2020 is before its Parliament and an implementation plan for this strategy will be prepared in mid-2014. **Portugal's** national health plan is closely based on Health 2020 values and principles, and the Government is working with WHO to prepare an implementation plan for the strategy.

Box 15. Healthy Ireland

Healthy Ireland is a national health policy strongly aligned with Health 2020, launched by the Prime Minister in March 2013. Now, one year on, the high political profile of the strategy has been maintained. The first year of implementation focused on building relationships, structures and building blocks to implement Healthy Ireland. A new directorate of health and well-being has been established and an outcomes framework has been developed. Implementation of Healthy Ireland is a standing item on the agendas of the senior officials' group on social policy and the Cabinet committee on social policy. Recruitment is under way for the National Healthy Ireland Council, a multistakeholder council that will serve as a national advisory forum to support implementation of the strategy, consisting of Government and civil society representatives. In the context of the recent financial crisis, Healthy Ireland has been a positive focus for both politicians and the public, with its emphasis on empowering them to make positive changes in their lives.

In the 2014–2015 biennium, an increasing number of Member States will develop new national health policies based on the Health 2020 framework.

41. **Uzbekistan** has expressed interest in developing a new national health policy in line with Health 2020; a whole-of-government workshop on Health 2020 was convened in May 2014 to initiate this process. **The former Yugoslav Republic of Macedonia** intends to prepare a new overarching national operational plan for health in 2014, based on Health 2020 and incorporating action plans on environment and health, NCDs and public health strengthening as core components. **Albania** has signalled its intention to develop a new national health policy by 2015, informed by Health 2020 and the results of a comprehensive national epidemiological assessment. The Parliament of the **Czech Republic** passed a resolution in January 2014 proposing development of a new Czech Health 2020 strategy by the end of 2015. Work has commenced by an existing intersectoral committee on health and a specially convened Ministry of Health working group. **France** is preparing a new national health policy 2015–2020 to respond to a new law on reducing health inequities by improving access to both health services and prevention. **Iceland** has been preparing a health strategic plan for Health 2020 and has also established a committee of four ministers on public health, which will be chaired by the Prime Minister. **Malta** is finalizing a new health sector strategy, which makes explicit reference to Health 2020 and reflects many of its concepts and principles.

Implementing Health 2020 through other strategic policy entry points

National multisectoral NCD strategies can be significantly reinforced through a Health 2020 approach.

42. A number of Member States have applied the Health 2020 framework to developing national multisectoral strategies for NCD prevention and control. **Azerbaijan, Bulgaria, Kyrgyzstan** and **Tajikistan** have all recently developed NCD strategies based on the principles of Health 2020. **Georgia** and **Turkmenistan** are currently developing national NCD strategies that reflect the principles and priorities of Health 2020 with the support of the Regional Office. Turkmenistan has agreed to set up a multisectoral committee to oversee the strategy. **Belarus** has expressed interest in hosting a regional meeting in 2015 on a life-course approach in the context of Health 2020.

Strengthening public health as a key pillar of Health 2020 implementation

43. Many Member States are working to implement the Health 2020 vision by strengthening public health services and capacities. **Armenia** is reviewing its national health policy in line with the Health 2020 policy framework, with a particular emphasis on strengthening public health capacity and services. **Bosnia and Herzegovina** is developing a comprehensive public health policy aligned with the Health 2020 policy framework. A whole-of-government workshop on Health 2020 was held in March 2014. In the **Republic of Moldova**, the Health 2020 policy framework has been used as a guidance document in drafting the new public health strategy.

Incorporating Health 2020 into development frameworks

44. In the **SEEHN countries**, the Health 2020 policy framework was used as a foundation for incorporating health into the SEE 2020 growth strategy, with support from the Regional Office. In parallel, the Network is developing a SEEHN health strategy based on Health 2020 goals. The strategy will focus on collective actions that promote health and well-being for people living in the subregion that could not be achieved by countries acting on their own. The strategy will be adopted and endorsed during the Serbian presidency at the end of 2014.

Implementing Health 2020 policy priorities by work on migration and health

45. In 2013, field assessments were conducted in **Mediterranean countries** to devise values- and evidence-based policy options for addressing migrants' health while implementing Health 2020 priorities. Strengthening the health sector to deal with large, sudden migrations requires better preparedness through the whole of government. Work on migrants' health also enhances people-centred health systems so that they are capable of addressing the variables that affect the health of migrants during their life-course.

Working on the building blocks for a Health 2020 approach

National reviews with a focus on inequities and governance

46. **Poland** has conducted an inventory of its national health policies, strategies and laws through a Health 2020 lens, with a view to informing the development of a new national health policy in 2015. **Hungary** conducted a national review of social determinants of health and health inequities and will be holding follow-on policy dialogues to discuss policy interventions in 2014. In **Sweden**, data and analytical capacity to monitor inequalities are strong, but the country is considering a scoping exercise to identify any gaps in relation to Health 2020.

Increasing capacity for whole-of-government and health-in-all-policies approaches

47. Numerous Member States have made efforts to increase their capacity to take a whole-of-government approach to health. **Montenegro** and **Serbia** have both conducted assessments of governance for health with the support of the Regional Office. Workshops on whole-of-government approaches have been held in a number of countries, including **Bosnia and Herzegovina** and **the Republic of Moldova**. Health 2020 components are strongly present in **Finland's** policies, programmes and ways of working, especially in relation to Health in All Policies (HiAP) and inequalities. Health and social well-being are treated jointly in Finland. Discussions on developing an umbrella national health and social well-being policy to replace the expiring national health policy are under way. Beyond policy frameworks, much of the work in Finland has focused on setting up institutions, structures and mechanisms for health and well-being in all policies. Health 2020 is being taken forward in France to reduce health inequities and strengthen a whole-of-government approach. France is establishing a whole-of-government interministerial committee on health, to be chaired by the Prime Minister.

Box 16. Whole-of-government action for health in Montenegro

In April 2014, an agreement was made between the Ministry of Sustainable Development and the Ministry of Health to tackle social determinants of health and to reduce the prevalence of NCDs within the new national sustainable development strategy.

The Ministry of Sustainable Development is the Government ministry with responsibility for developing and reviewing cross-sectoral policies and is a major ally in taking a systematic, whole-of-government approach to address determinants of health and equity, specifically as these relate to the prevention and control of NCDs.

Evidence and examples from Health 2020 were used to support dialogue and build strong alliances for action between the two ministries and across the Government. The focus for implementation is framed around the importance of improving health and reducing inequities for achieving national goals for inclusive sustainable development.

Box 17. Improving governance and leadership for health: global health diplomacy courses implemented in subregions and countries

Several [executive courses in global health diplomacy and leadership](#) have been held in both multicountry and country-specific settings across the European Region. The course has been organized as collaboration between the Global Health Programme of the Graduate Institute of International and Development Studies in Geneva, Switzerland, and the Regional Office. Due to the high demand for the course, it will continue to be offered in the Region during 2014–2015.

Developing national targets for health and well-being

48. A number of countries have begun identifying national indicators to monitor progress in the implementation of Health 2020.

49. For example, **Austria** is now three years on with its HiAP and whole-of-government health targets. The process constitutes the framework for the national health promotion strategy that is part of a nationwide health reform.

50. In Austria, 10 headline targets were formulated, which reflect the objectives of Health 2020, in a cross-sectoral, highly participatory endeavour over two years. The process is coordinated by the Ministry of Health, but involves a plenum of 40 actors, including other ministries, institutions, organizations and civil society representatives. So far, four headline targets have been further elaborated by intersectoral working groups, each supported by an outcome action plan that includes specific measures and indicators proposed and implemented by sectors within and outside the health sector. Intersectoral working groups have been established for the following targets:

- **Target 1:** To provide **health-promoting living and working conditions** for all population groups through cooperation among all societal and political areas;
- **Target 2:** To promote **fair, equal opportunities in health**, irrespective of gender, socioeconomic group, ethnic origin and age;
- **Target 3:** To enhance **health literacy** in the population;
- **Target 6:** To ensure conditions in which **children and young people** can grow up to be as healthy as possible;
- **Target 8:** To promote **healthy, safe exercise and activity in everyday life** through appropriate environments – the working group will be coordinated by the Ministry of Sports and will start work in the course of 2014.

Involvement at the subnational level is essential for full implementation of Health 2020.

51. In 2012, the Danish Healthy Cities Network and Copenhagen City Council in **Denmark** organized a Health 2020 launch event that included keynote speeches by the Danish Minister of Health and Prevention, the Mayor of Health and Community Care in Copenhagen and the WHO Regional Director for Europe. In **Sweden**, the local level is especially important when it comes to implementing action on the social determinants of health and four local authorities have now established their own “Marmot commissions”; the Region of Skåne has launched Health 2020 with the Swedish Healthy Cities Network. Health 2020 has been highlighted and discussed at regional level in **Spain**, for example, in Andalusia. In **Italy**, several regions have expressed interest in working with the Regional Office on implementing Health 2020. The Wallonia region in **Belgium** is integrating Health 2020 values and concepts as part of its health sector reform.

52. At subnational level in **Bosnia and Herzegovina**, the Republika Srpska introduced a Health 2020 policy in November 2012, focusing on reducing inequities and NCDs through multisectoral policies to promote health and address the underlying determinants, while the Federation of Bosnia and Herzegovina has endorsed two specific strategies drawing on Health 2020 values and approaches: on the protection and promotion of mental health and on the prevention, treatment and control of cancer. In **Serbia**, work is under way to integrate Health 2020 into local health policies being developing by newly established municipal health councils.

Taking the work on Health 2020 targets and indicators forward

53. In September 2012, the Regional Committee proposed six overarching targets for Health 2020 and requested further work on the development of indicators. The Regional Office reconvened the SCRC working group on targets and merged the expert group on indicators with the expert group on the measurement of well-being in order to finalize the work on indicators. A final shortlist of indicators was submitted to RC63, which adopted a list of Health 2020 core indicators and requested the Regional Office to lead further work to finalize objective well-being indicators.

54. During and following the March 2014 meeting of the SCRC's Subgroup on Health 2020 implementation, the members recommended that information for the three qualitative indicators of Health 2020 be collated under "policies addressing health inequalities", "establishment of national processes for target setting" and "establishment of national policies aligned with Health 2020". Members were given the option of a shorter or a longer version of an electronic questionnaire; they proposed use of the longer version, which was sent to national counterparts in Member States during April 2014. The responses are expected in due course.

55. As a result of [resolution EUR/RC63/R3](#) on Health 2020 indicators, the WHO Secretariat reconvened the expert groups on well-being and Health 2020 indicators who proposed core and additional indicators for "objective well-being". The expert group recommended that four domains of objective well-being be covered: social connections, economic security and income, natural and built environment, and education. Of these, economic security and education were domains for which core indicators relevant to this area (and used for other targets) had already been adopted in 2013 ("Gini coefficient", "unemployment rate" and "percentage of primary school-age children not enrolled"). For social connections and natural and built environment, the experts proposed two new core indicators, namely "social support available" and "percentage of population with improved sanitation facilities"; these indicators are routinely collected by Gallup World Poll and WHO, respectively, and therefore pose no additional reporting burden on Member States. As additional, optional indicators, the experts proposed the "percentage of persons aged 65 and over living alone" (available for 28 countries), "total household consumption" (48 countries) and "educational attainment: at least completed secondary education" (32 countries).

Box 18. Implementing Health 2020 targets in SEE countries: health as a development indicator

The core targets and indicators for Health 2020 have been used to establish a common baseline to measure health improvement within a new economic growth strategy for SEE countries – SEE 2020.

The indicators were formally debated and agreed by official representatives from 10 countries at a meeting in Bosnia and Herzegovina in March 2014. The indicators were also supported by the main agencies coordinating the strategy and responsible for its funding and monitoring – RCC, OECD and the European Directorate-General for Enlargement.

