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HOW AND WHAT IN POSITIONING HEALTH ON THE SUSTAINABLE DEVELOPMENT AGENDA AT NATIONAL LEVEL: COHERENCE BETWEEN SUSTAINABLE DEVELOPMENT POLICIES AND HEALTH POLICIES

Why focus on policy coherence between sustainable development policies and national health policies?

The 2030 Agenda entails working towards a single framework and set of goals that are universal in nature and applicable to all countries. The new framework will need to integrate the economic, social and environmental dimensions of sustainable development in a coherent and balanced manner. Setting and implementing the 2030 Agenda will require co-ordination and convergence between the major agendas at global and regional level, but also at national level. Thus, national policy making both for sustainable development and for health will need to be brought into coherence.

European region of WHO welcomes the Agenda 2030 well prepared. The European policy framework for health and well-being, Health 2020 advocates for the importance of integrated policies to address the Region's priority health challenges. Therefore it advocates for policy coherence across different sectors. It emphasizes that governments

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can achieve real improvements in health if they work across government and society and underlines the need to improve leadership and participatory governance for health. Health 2020 supports and encourages health ministries to bring key stakeholders together in a shared effort to promote and protect health. It recognizes the contribution of such stakeholders – particularly the civil society – in taking health agendas forward. Adding value through partnerships, mutual gain or co-benefit strategies has become a common theme in governance for health.

H2020 has been vastly implemented throughout the European Region of WHO, through different entry points for national health policy making, value, process and content wise, bringing the Region closer to the fulfilment of the Sustainable Development Goals. Building up on the developments so far, Member States will not be starting from scratch in their efforts to fulfil Agenda 2030.

Both national sustainable development strategies (SDSs) and health policies (NHPs) are influenced by the global context and are deeply embedded in the national economic, political, cultural and social structures. Achieving policy coherence between those at national level is a prerequisite for achieving Sustainable Development Goals and positioning health in the centre of sustainable development.

Where are we with national health policies development in the European region?

NHPs cover a wide spectrum of dimensions and hierarchies. They range from values and vision (e.g. Norway, Malta), policy direction (e.g. Sweden, Belgium), strategy and strategic planning (e.g. France, MKD, Slovenia), to detailed operational planning (e.g. Wales, Switzerland), from “comprehensive” health planning (e.g. Finland) to health system focus (e.g. Malta, Russian Federation, Ukraine) and “disease-specific or programme” planning (e.g. Kyrgyzstan, Monaco), from a long term, 10-20 year time horizon (e.g. Armenia, Austria, Lithuania, Slovenia, Slovakia), to the 5 year plan (e.g. Greece, Poland, Iceland), the 3 year rolling plan (e.g. Albania), and the yearly operational plan, from national to regional or district plans (e.g. France, Spain, Sweden), from highest level endorsement of the vision and the policy directions (e.g. Belgium, Ireland, Tajikistan, Uzbekistan), to approval of operational plans. Some of the MSs implement interventions that work, rather than develop policies (e.g. Denmark). Those are also policies that work. Thus, NHP making in the Region is complex and depends on contextual factors. What matters is whether NHPs are well managed

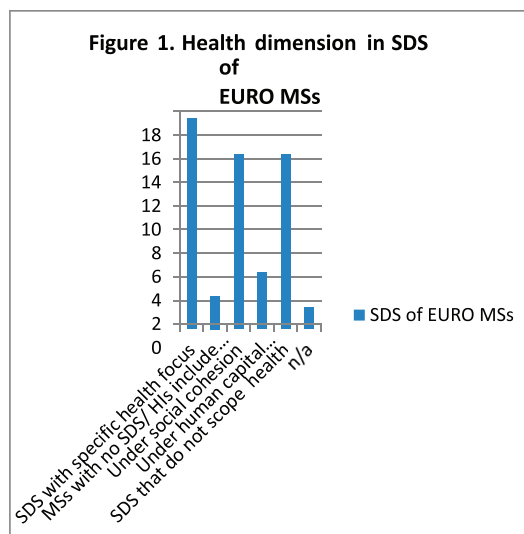
and implemented, and finally, whether they bring about better health of the population.

Based on the data collected in August 2016¹, over 77% of the WHO EURO Member states have an overarching health policy as a wide-scope document.

Although existing NHPs have not been developed to serve 2030 Agenda, they contribute to the development agenda and country needs and serve very well the aim of delivering on SDGs. All the existing NHPs in the European Region contribute to SDGs action to different extent². This retrofitting exercise has been worth the effort of proving once again that the European Region is on its way to achieving SDGs.

What is the case of health in Sustainable Development Strategies in the European region: current and future?

Current sustainable development strategies (SDSs) in the WHO European region demonstrate clearly MSs view of health in the development agenda: 70% of SDSs include health, either as a specific objective (32%), or within social cohesion chapter (27%), or within human capital development (7,5%), or through developed indicators (3,5%) where indicator based approach has been chosen and no strategy has been developed (Figure 1). All of the SDSs focus on environmental sustainability (together with economic and social), and 10% of the MSs have developed SDSs focused entirely on environmental sustainability³.



This makes an excellent case for environmental health as an agent for sustainable development.

Although health is mostly recognized as a driver towards sustainable development, there is a room for making even a stronger case. European H2020 policy for health and wellbeing is a policy instrument that has that potential, now strengthened by the convincing position of health in the 2030 Agenda. Linking health with social and human capital development in the SDSs, demonstrates the long-standing collaboration of social and educational sectors with health sector that should be further steered up continuously.

MSs have already embarked into assessing national status of SDGs achievement, and some of them have already voluntarily reported the results (e.g. Estonia, Finland, France, Georgia, Germany, Montenegro, Norway, Switzerland, Turkey⁴), while 12 countries foresee to submit their development reports in July 2017: Belarus, Belgium, Cyprus, Czech Republic, Denmark, Luxemburg, Italy, Monaco, the Netherlands, Portugal, Slovenia and Sweden⁵. The UNDAF countries have analysed their achievements in the course of developing UNDAFs for 2016-2021. Other countries have published reports on the results from implementing their SDSs. All of those documents present good source of information for assessing where MSs are in SDGs achievement which will further fill in their priority setting for sustainable development, including health⁶.

This is the right moment in time to strongly move for coherence of SDSs and NHPs, thus putting health in the centre of sustainable development.

1 WHO EURO NHP Program analyses of the NHPs in the European Region

2 WHO EURO NHP Program analyses of SDGs reflection in the current NHPs in the European Region

3 WHO EURO NHP Program analyses of health dimension in SDSs in European Region

4 Estonia: <https://sustainabledevelopment.un.org/hlpf/2016/estonia> Finland: <https://sustainabledevelopment.un.org/hlpf/2016/finland> France: <https://sustainabledevelopment.un.org/hlpf/2016/france> Georgia: <https://sustainabledevelopment.un.org/hlpf/2016/georgia> Germany: <https://sustainabledevelopment.un.org/hlpf/2016/germany> Montenegro: <https://sustainabledevelopment.un.org/hlpf/2016/montenegro> Norway: <https://sustainabledevelopment.un.org/hlpf/2016/norway> Switzerland: <https://sustainabledevelopment.un.org/hlpf/2016/switzerland> Turkey: <https://sustainabledevelopment.un.org/hlpf/2016/turkey>

5 2030 AGENDA FOR SUSTAINABLE DEVELOPMENT: Briefing EXC, November, 2016

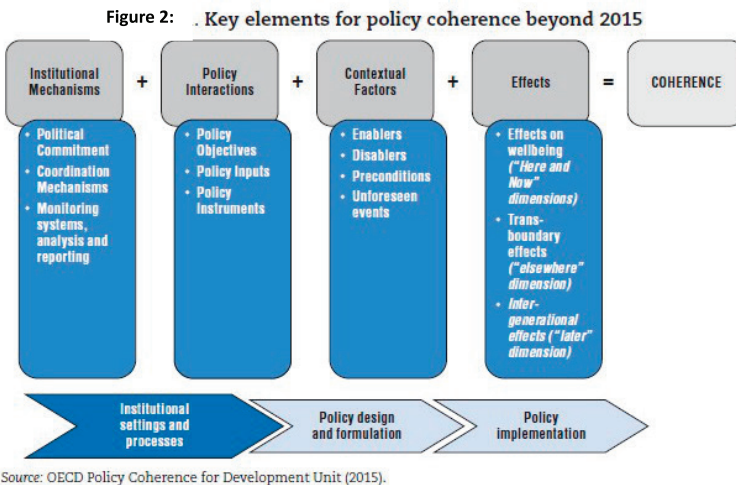
6 WHO EURO NHP Program analyses of sources for assessment of SDGs achievements in the European Region

How and what in the process for positioning health in SDSs

Obtaining policy coherence between SDSs and NHPs: key elements

Analytical framework for policy coherence for sustainable development developed by OECD in a different policy area⁷, serves well as a good illustration of how SDSs and NHPs can be brought into coherence (Figure 2). Political commitment is a key. Coordination mechanisms and monitoring and evaluation frameworks should be developed to support policy interactions and bring effects, within the specific national context.

Thus, the work on SDSs and NHPs in the SDG era should be focused on building institutional settings and processes, strengthening policy design and formulation and fostering policy implementation to provide for their coherence throughout the whole policy cycle.



What does policy coherence of SDSs and NHPs mean at country level?

Policy coherence between SDSs and NHPs at country level calls for SDSs that fulfil the following tasks:

- Put health in their focus in early stages, through a policy dialogue that includes health;
- Include health as a building block that does not operate in a silos, but where functional linkages are provided (governance for sustainable development & governance for health);

7 OECD (2014), Better Policies for Development 2014: Policy Coherence and Illicit Financial Flows, OECD Publishing. doi: <http://dx.doi.org/10.1787/9789264210325-en>

- Are based on evidence, sound data and monitoring and evaluation frameworks to inform decision-making and help translate political commitments into practice, in all of the issues covered, including health;
- Foster multi-stakeholder policy dialogue to identify the barriers to, and the catalysts for transformation towards sustainable development, where health is an integral part; and
- Develop instruments and tools that will support healthy policy making and implementation of the policies that work and deliver results towards achieving SDGs, including Health Goal and other health related targets.

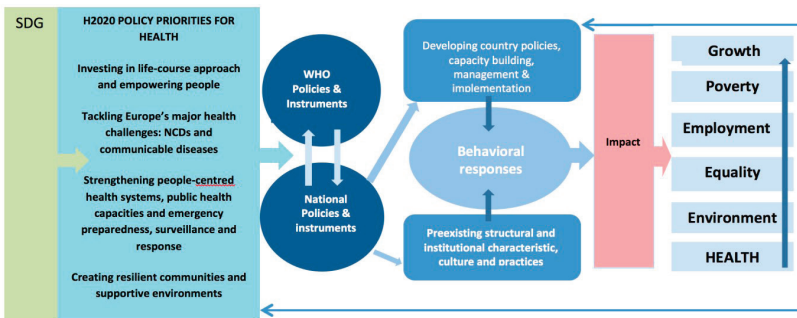
SDSs making process should scope health issue in all its process elements, from situational analysis, through planning, implementation and monitoring and evaluation in the effort to provide for consistency with NHPs making. Issue-based approach is useful to this end. Establishing “a health coalition” at country level from the early days of the process of SDSs making that will discuss health and sustainable development and guide further on the issue, content wise - is an option that works. This will in turn provide for national health policy making that contributes to sustainable development. As discussed above, the processes for localization of SDGs has started and health has been included from the start (e.g. UNDAF countries, countries that reported voluntary on SDGs). SDGs have made strong case of health for development, and this opportunity should not be missed, especially for the 30% of the countries that have not scoped health in their present SDSs.

An example: The case of MKD

In the process of localization of SDGs in MKD, the Office of Deputy Prime Minister for investment has requested UN support. WHO lead the support to including health dimension in the national SDS. A Health Coalition has been established and has held a policy dialogue for localizing SDG 3 and other health-related SDGs. Health is now part of the new UNDAF 2016-2020 of the country and will be part of the new SDSs. Political support and strong public health professionals’ engagement and leadership, were driving forces of this development. WHO has been leading UN support on the health theme and has initiated creation of the Health Coalition. In addition, it supported development of the MKD NHP 2020, aligned with SDGs, that has been already adapted by the Ministerial Committee for Health and Environment.

H2020 policy priorities for health and other WHO policies and instruments provide for an excellent guidance for development of NHPs consistent with the 2030 Agenda. Developing country policies that take into consideration pre-existing structural, institutional characteristics, practices and culture will secure implementation. In addition, capacity building and improved management for change increase the potential for behavioural changes at national level that will have positive impact on the health of the population. Improved health of the population will have a positive spill over effect in other sectors, and ultimately will contribute to growth. (Figure 3).

Figure 3: Coherence of SDSs and NHPs for better health and growth



(Adapted from OECD (2014): Better Policies for Development 2014: Policy Coherence and Illicit Financial Flows)

Conclusion

SDSs and NHPs in the contemporary global and regional context should work together. Coherence between both should be established in the early stages of SDS making- assessing the complexities of the context (the economic, social, health, environmental, legal and political domains) to identify and support pathways towards inclusive sustainable growth, where health plays a role of active contributor.

Further to it, establishing institutional mechanisms, processes and tools to produce effective, efficient, sustainable and coherent SDSs and NHPs is of crucial importance to achieve interoperability.

NHPs have already benefited from H2020 evidence. This should become a valuable input into developing health dimension of SDSs. Evidence-based analysis; sound data and reliable indicators will inform decision-making and help translate political commitments into practice.

Multi-stakeholder policy dialogue should be “issue-based” to be able to

identify the barriers to, and the catalysts for, economic and social transformation in all the sectors, including health as an input and health as an outcome.

Policy making in the new era will call for collective action, common but differentiated responsibilities and mutual benefits, multi-stakeholder involvement and inclusive policy dialogue, and a greater focus on fostering positive synergies among policies and across sectors. Health should become intrinsic part of all the SDSs.

In the WHO European region, implementing SDSs health dimension should be channelled through NHPs that are guided by H2020 approaches with an ultimate goal to contribute to the overall national development and growth.

Abstract

The 2030 Agenda entails working towards a single framework and set of goals that are universal in nature and applicable to all countries. The new framework will need to integrate the economic, social and environmental dimensions of sustainable development in a coherent and balanced manner. Setting and implementing the 2030 Agenda will require co-ordination and convergence between the major agendas at global and regional level, but also at national level. Thus, national policy making both for sustainable development and for health will need to be brought into coherence.

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References

1. OECD (2014). Better Policies for Development 2014: Policy Coherence and Illicit Financial Flows, OECD Publishing, available at: <http://www.oecd.org/pcd/Better-Policies-for-Development-2014.pdf>
2. UN (2015). A/RES/70/1 - Transforming our world: the 2030 Agenda for Sustainable Development, Declaration, available at: <https://sustainabledevelopment.un.org/post2015/transformingourworld>
3. WHO (2012). Health 2020: the European policy for health and well-being, available at: http://www.euro.who.int/__data/assets/pdf_file/0006/199536/Health2020-Short.pdf