

## Getting the most out of the HealthGain web guide

[www.healthgain.eu](http://www.healthgain.eu)

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Impact of Structural  
Funds on Health Gains

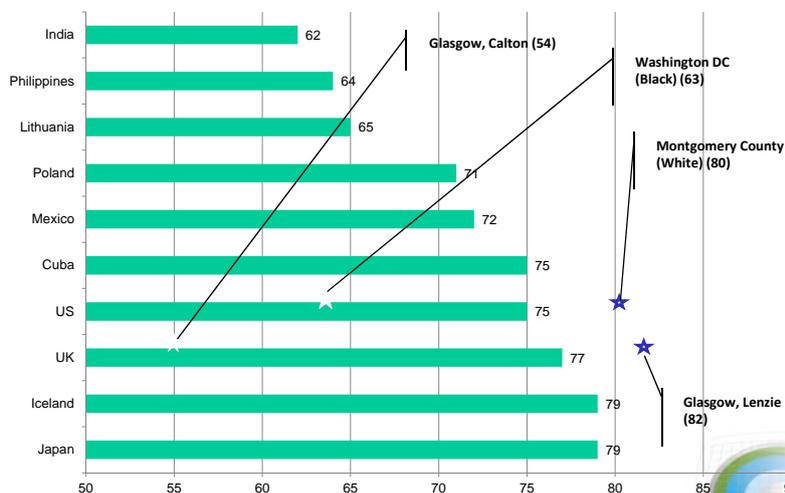
## Some structure

- What do we mean by health gain?
  - Health inequalities
  - Determinants of health
  - Health in All Policies (HiAP)
- The Healthgain approach ... how to use it ...



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## Male life expectancy at birth in selected countries

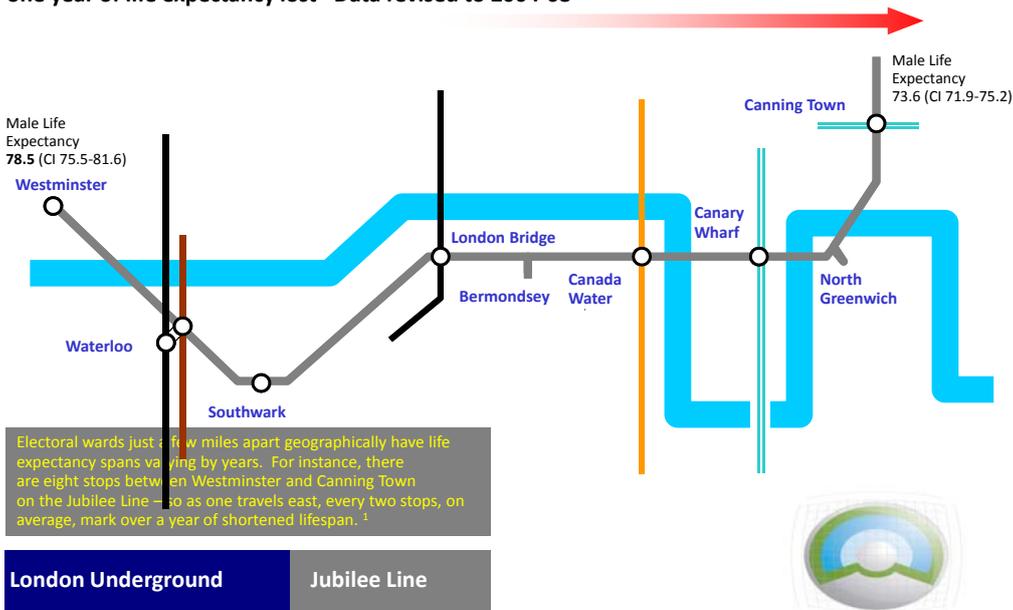


Data from 'Commission on the Social Determinants of Health. Closing the gap in a generation. Health equity through action on the social determinants of health. World Health Organization. 2008.' Available at [www.who.int/social\\_determinants/final\\_report/en/index.html](http://www.who.int/social_determinants/final_report/en/index.html)



## Differences in Male Life Expectancy within a small area in London

Travelling east from Westminster, every two tube stops represent over one year of life expectancy lost – Data revised to 2004-08



Electoral wards just a few miles apart geographically have life expectancy spans varying by years. For instance, there are eight stops between Westminster and Canning Town on the Jubilee Line – so as one travels east, every two stops, on average, mark over a year of shortened lifespan.<sup>1</sup>

London Underground

Jubilee Line



<sup>1</sup> Source: Analysis by London Health Observatory of ONS and GLA data for 2004-08. Diagram produced by Department of Health

## Health in Europe

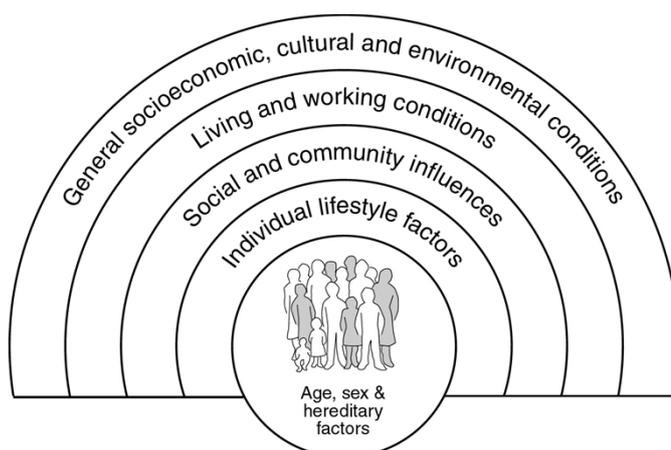
... or disease?

- has improved ...
- we continue to face problems ...
- socioeconomic inequalities in health and health care ...
- chronic diseases, such as heart disease, cerebrovascular disease and cancer;
- mental ill health;
- communicable disease, such as tuberculosis and human immunodeficiency virus (HIV) infection;
- injuries; and
- preventable risk factors tobacco, alcohol, nutrition, and physical inactivity.

Health in the European Union. Trends and analysis. European Observatory on Health Systems and Health Policies. Observatory Studies Series no.19; 2009



## The main determinants of health



Dahlgren, G. and Whitehead, M. Policies and strategies to promote social equity in health. 1991. Stockholm, Institute for Future Studies.



- Health affects everything ... and everything affects health
- This is a powerful insight
- It can be confusing
- We need a strategic approach



## Health in All Policies (HiAP)

- Concept & origin
- Adelaide Statement 2010
- Helsinki 8<sup>th</sup> Global Conference on Health Promotion 2013
- Discussion

These slides on HiAP were prepared as part of HIA training and support delivered by Ben Cave Associates Ltd to the Equity Action Programme. 2011-2012  
The trainers are Erica Ison, Jean Simos, Nicola Cantoreggi and Ben Cave.



## Concept & Origin

- HiAP emerged during the Finnish Presidency of the European Union in 2006
- Approach based on the observation that: health and wellbeing are largely influenced by measures that are often managed by government sectors other than health
- Seeks to highlight the connections and interactions between health and policies from other sectors → explores policy options that contribute to the goals of non-health sectors and will improve health outcomes → population health ↗ and (growing) economic burden of the health care system ↘
- The health sector's role is to support other sectors to achieve their goals in a way which also improves health and wellbeing

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## Concept & Origin #2

- The determinants of health approach highlight the need for policy makers in all sectors to be aware of the impact of their decisions on population health and to act to incorporate considerations of health into their policies
- Implementation of HiAP provides a system which enables governments to respond in a coordinated way to the health and wellbeing needs of the population
- HiAP also aims to bridge the gap in health inequalities
- Incorporated into the latest European Health Strategy: progressively implemented by all EU member countries

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## What happened?

- Around 100 participants - 30% global experts - feedback was positive
- 3 days of keynote presentations, panel discussions and more general discussions (e.g. for the Adelaide Statement)
- Points of view and cases presented from local approaches (SA and other Australian States) and international approaches
  - ✓ UK, New Zealand, USA, Thailand, Sweden, Quebec & Canada, Finland, The Netherlands, Brazil, Switzerland, WHO - HQ & Regional Offices & CSDH, EU, The World Bank



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## Outcomes

- Adelaide Statement on HiAP: «Moving towards a shared governance for health and wellbeing»
  - ✓ Available at [www.who.int/social\\_determinants/hiap\\_statement\\_who\\_sa\\_final.pdf](http://www.who.int/social_determinants/hiap_statement_who_sa_final.pdf)
- Taking account of health means more effective government
- More effective government means improved health
- WHO used the Statement in various forums with the aim of developing Member State consensus on understanding of HiAP and practice models of how it can be operationalized in different jurisdictions & development contexts

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## Adelaide Statement: highlights

- Overall description
  - ✓ Achieving social, economic and environmental development
  - ✓ Need for joined-up government
  - ✓ Health in All Policies approach
  - ✓ Drivers for achieving Health in All Policies
  - ✓ New role for the health sector
  - ✓ Next steps in the development process
  - ✓ Background and acknowledgements
  - ✓ Examples of joined-up government action

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## Helsinki 2013

- 8<sup>th</sup> Global Conference on Health Promotion 2013 (by invitation only)
- The Conference will examine the historical and scientific context of health promotion since the Alma-Ata Declaration (1978) and the Ottawa Conference on Health Promotion (1986) to Nairobi (2009) and assess achievements and aims for HP globally
- It will review the experiences in engaging in the HiAP approach and establish guidance for concrete action in countries at all levels of development
- Special European Day which will highlight the application of HiAP and shared governance to the response to non-communicable diseases in the WHO European Region



8th Global Conference  
on Health Promotion  
**HELSINKI 2013**

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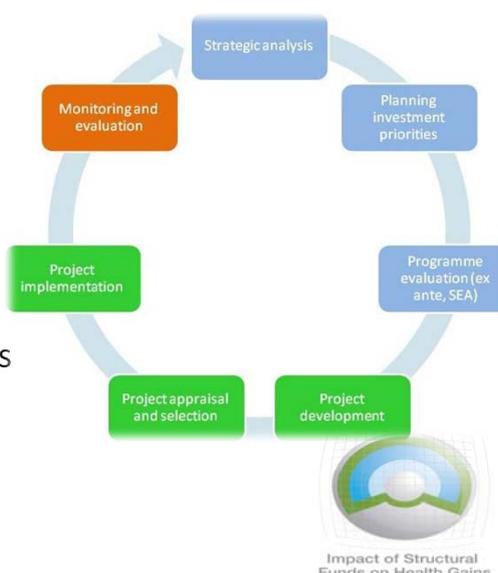


Some examples from the field of Health Impact Assessment ... switch to Prezi

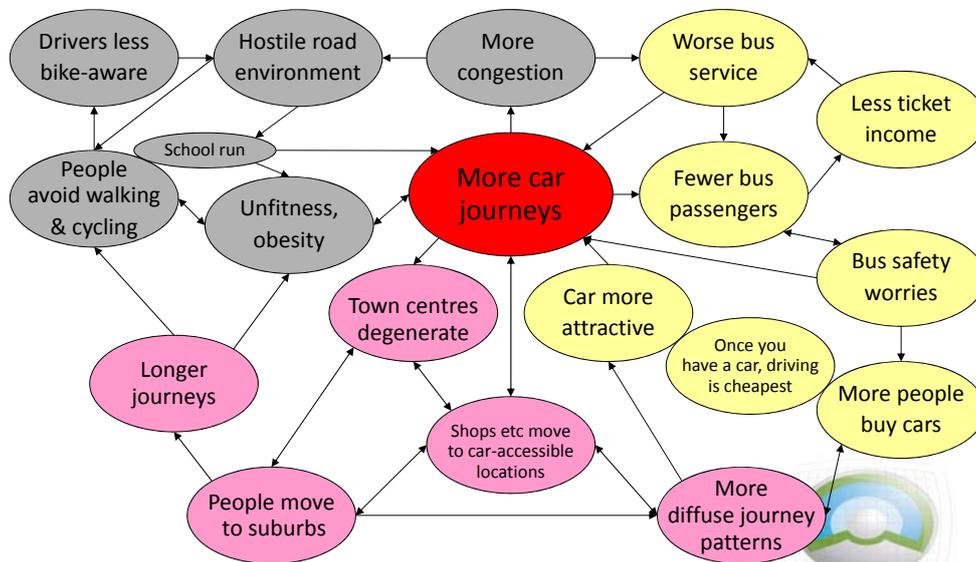


## Programming cycle

- We need to identify how different sectors can support one another's work
- This needs to happen at each stage
- Healthgain has different resources to help with this
  - ✓ Case studies
  - ✓ Policy and background
  - ✓ Planning tool – DPSEEA model



## Why do places get *unsustainable*?



Impact of Structural Funds on Health Gains

## Efficient 'inefficiency'

### Vienna

... trams **must** be running to standard service level **before** people move in to new satellite settlements. This is 'inefficient' in tram management terms - but it is very efficient for the broader aim of avoiding car dependence.



### Milton Keynes

... space was allocated so that trams could be provided as soon as there was enough demand ... but ... there never was.

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... switch to Prezi



1. Get into groups – ensure you have a good mix of expertise
2. Review the case study - ‘Transeuropa’
3. Choose someone to feed back your results!
4. Work in pairs – write down all the issues you can see with this region – 1 per post-it note
5. Share the post-it notes with your group – put them into clusters
6. Choose an issue – use the DPSEEA planning model and develop a pathway to identify
  - a. how this issue fits into a causal pathway
  - b. what needs to be done (& by who)



**Thank you**

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