Health in all policies – What is it, why should we do it, and how can we do it?

Caroline Fichtenberg, PhD
American Public Health Association
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What is Health in All Policies?

“What Health in All Policies is a collaborative approach to improving the health of all people by incorporating health considerations into decision-making across sectors and policy areas.”

- Linda Rudolph, former Director of Chronic Disease Prevention, California Dept of Public Health
Why do we need Health in All Policies?
Why can't somebody do something about high gas prices and the health care crisis?
US lags behind other nations in health despite spending more.
The Main Determinants of Health

- General socio-economic, cultural and environmental conditions
  - Living and working conditions
  - Unemployment
  - Work environment
  - Agriculture and food production
  - Education

- Social and community networks
  - Health care services
  - Water sanitation
  - Housing

- Individual lifestyle factors
  - Age, sex & hereditary factors
Health in All Policies

- Integration of considerations about health impacts into “non-health” decision making to:
  - Maximize positive health impacts
  - Minimized unintended negative health consequences
  - Ensure different parts of society are not working at cross-purposes
This not a new concept (in the rest of the world)

- **1978 Alma Ata Declaration**: “Intersectoral action for health”
- **1986 Ottawa Charter for Health Promotion**: “Healthy public policy”
- **1997 UK Labour Govt**: “Joined-up government” (not health specific)
- **Late 1990s to present, Finland, UK, and others**: Health in All Policies and Health Impact Assessment
- **2001 Public Health Act, Quebec**
- **2006 Finnish Presidency of EU**: Health in All Policies theme
- **2007 South Australia State Strategic Plan**
- **2010 Adelaide Statement on Health in All Policies**
Health in All Policies milestones in the US

- 1999 first US HIA completed by San Francisco DPH
- 2009 RWJF Commission to Build a Healthier America Report
- 2009 CDC CPPW and Partnership for Sustainable Communities (HUD/DOT/EPA)
- 2009 Pew/RWJF Health Impact Project
- 2010 CA Health in All Policies task force
- 2010 National Prevention, Health Promotion, and Public Health Council
- 2011 National Prevention Strategy
- 2011 IOM report For the Public’s Health on public health law
- 2011 CTG
- 2012 >170 HIAs completed or in process in US
Ties to other trends in public health

- Healthy Places/Place Matters
- Policy, systems and environmental (PSE) strategies

All share link to idea that health is determined by more than health care and individual behaviors
How do you do Health in All Policies?

- There is no one single way to “do” health in all policies
- Key idea: Intersectoral collaboration to improve health and reduce health inequities
- Key Principles:
  - Recognizing the multifactorial determinants of health
  - Focusing on addressing health inequities
  - Engaging across sectors and seeking win-wins
- Evolving field
How do you do Health in All Policies?

Key Activities

- Educate about the connections between health and determinants in other sectors
- Engage other sectors in public health work
- Insert consideration of health and health equity in “non-health” decision-making:
  - Decision by decision (eg. using HIA or other health lens analysis)
  - As part of decision-making process
- And more (still an evolving field)
Coming soon!

- Health in all policies guide for local and state governments
- Compendium of HiAP resources on APHA’s website
- Factsheets, ppts, and other tools