

THE FOUR PILLARS MODEL OF HEALTH IN ALL POLICIES

FACTSHEET – 2024

ABOUT THIS DOCUMENT

This document provides an overview of the four-pillars model for Health in All Policies (HiAP) developed by the World Health Organization (WHO) in the document: [*Working together for equity and healthier populations: Sustainable multisectoral collaboration based on Health in All Policies approaches.*](#)

The document was developed by members of the Global Network for Health in All Policies (GNHiAP), which is a country-led initiative that was launched by the governments of Sudan, Finland, Thailand, Québec, and South Australia at a side event during the 2017 World Health Assembly. The Global Network was established as a platform for strengthening and advancing HiAP implementation. Its aim is to support awareness, skill development, capacity building, and knowledge sharing concerning HiAP, to address the social determinants of health and equity.

KEY MESSAGES

- Health in All Policies (HiAP) is a multisectoral approach that incorporates health considerations into all policy areas to improve population health and health equity. It highlights the importance of addressing the social determinants of health equity (SDHE) through collaboration across government sectors.
- The Four Pillars of HiAP are:
 - Governance and Accountability
 - Leadership at All Levels
 - Ways of Working and Work Methods
 - Resources, Financing, and Capabilities
- The HiAP framework is designed to be flexible and adaptable to various contexts, allowing for sustainable multisectoral collaboration tailored to specific needs and challenges.
- By addressing the SDHE through the HiAP model, governments can improve health outcomes and reduce inequities, promoting a more equitable distribution of resources and opportunities across all sectors.



“Health in All Policies is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity.” - (Helsinki Statement on Health in All Policies, 2014)

THE HEALTH IN ALL POLICIES (HIAP) APPROACH

Today, governments face a range of complex social, political, economic, and environmental challenges that highlight the growing need for multisectoral collaboration. The Health in All Policies (HiAP) model recognizes that health and health equity are multifaceted issues that require attention from all levels and departments of government to be fully addressed. Through the incorporation of health and health equity considerations into all policy-making processes, the responsibility for population health and well-being can be shared, creating a unified purpose, reducing duplicating efforts and more comprehensively addressing the social determinants of health equity (SDHE). This method for improving population health can reduce the economic costs of poor health by reducing pressure on the medical care system, allowing resources and funding to be redirected towards broader societal development.



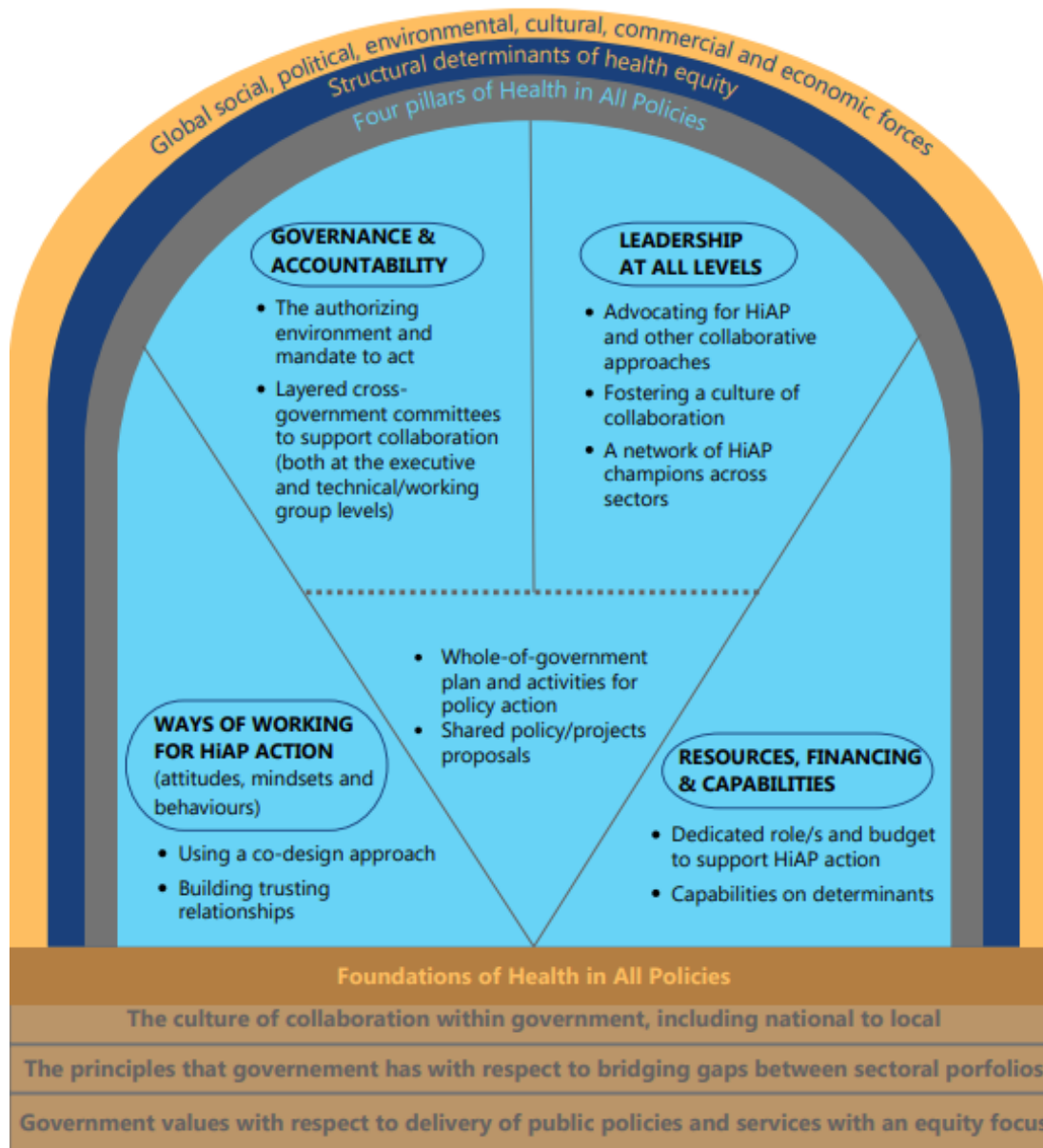
Comprehensively addressing the social determinants of health equity requires consistent application of the HiAP framework across all public policies.

WHY IS HIAP NOT ALREADY COMMONPLACE?

One of the reasons HiAP has not been widely implemented derives from the siloed nature of government structures, where different departments operate independently with limited collaboration. Traditionally and by default, government agencies outside of the public health sector often do not incorporate a health or health equity lens in the work they do. However, health is influenced by every aspect of life, not just by medical care systems. It is therefore crucial to consider health and health equity from all angles and across all sectors. Siloed structures can hinder efforts to address social inequalities and other complex challenges. Therefore, efforts to de-silo government can and should prioritize communities who have the greatest health burdens. By focusing on how policies affect the conditions of daily life, and by fostering leadership at all levels, we can break down these silos and encourage a more integrated approach to policymaking with more equitable health outcomes.

THE FOUR PILLARS AND THEIR PURPOSE

Figure 1 HiAP Model



(Adapted from World Health Organization, 2023, p.21)

The HiAP model (see Figure 1) acknowledges the global forces and structural determinants of health equity that sit above the four key pillars of HiAP: governance and accountability, leadership at all levels, ways of working and work methods, and resources, financing, and capabilities. These pillars are broken down into key elements for which there is no fixed order of priority. Ideally, all the key elements would be implemented to create the strongest and most sustainable foundation for multisectoral collaboration; however, government structures can be rigid, which represents challenges to full integration.



The four pillars and their elements serve as a checklist of actionable steps needed to operate the strongest and most sustainable HiAP approach.

PILLAR 1: GOVERNANCE AND ACCOUNTABILITY



Element 1.1 Authorizing environment and mandate

Element 1.2 Layered cross-government committees and use of existing structures and mechanisms

Element 1.3 Whole-of-government plan for policy action

Element 1.4 Support for collaboration and joint projects and project proposals

The purpose of governance and accountability in the HiAP framework is to provide a mandate and high-level oversight for HiAP activities. Governance legitimizes multisectoral work and establishes accountability mechanisms to ensure success. Effective HiAP governance involves administrative, legislative, and executive system reconfiguration to prioritize health equity through action on the SDHE.

Key Elements:

- 1.1 Authorizing Environment and Mandate:** A mandate from the highest government level establishes collaboration, supports embedding HiAP in government structures, and signals long-term commitment. This facilitates clear strategic vision development and shared accountability.
- 1.2 Layered Cross-Government Committees:** Both horizontal and vertical governance structures are crucial for commitment to and implementation of the HiAP approach. Vertical structures maintain high-level oversight, while horizontal structures facilitate operational levels of policymaking and project development. Existing structures and mechanisms should be adapted to build a HiAP approach while not disrupting their operation.
- 1.3 Whole-of-Government Plan:** A shared vision and objectives within a whole-of-government plan support collaboration and investment in HiAP. Such plans unify policymakers and document collaborative approaches, roles, and outcomes thus enhancing incentives for collaboration.
- 1.4 Support for Collaboration and Joint Projects:** Collaborative policy or project proposals should outline responsibilities and opportunities, be endorsed by the highest government level and be regularly updated on progress.

Governance and accountability actions include establishing mandates or supportive legislation, multisectoral coordination mechanisms, cross-sectoral policies or plans, formal reporting and accountability structures, and public accountability through transparent reporting on HiAP activities.

PILLAR 2: LEADERSHIP AT ALL LEVELS



Element 2.1 Advocating for HiAP and other collaborative approaches

Element 2.2 Fostering a culture of collaboration

Element 2.3 Network of HiAP champions

Element 2.4 Generating and activating a whole-of-government plan

Element 2.5 Joint identification of issues and shared policies and projects for shared goals

Leadership at all levels emphasizes the importance of advocating for new activities and supporting HiAP to foster collaborative practices. Effective leadership connects disciplines and agencies, cultivating collaboration and accountability. HiAP leaders can emerge at any level of authority, and the sharing of this vision across all levels of government strengthens multisectoral action and is critical to sustaining collaboration.

Key Elements:

- 2.1 Advocating for HiAP:** Leadership within HiAP requires advocacy. Skills in negotiation and diplomacy are essential to navigating the needs of other agencies and sharing the HiAP vision. Effective advocates for HiAP can thus drive a strong co-design and co-benefits approach.
- 2.2 Fostering a Culture of Collaboration:** Collaboration is most effective when information is readily shared and there is a culture of collective responsibility. Leaders help shape this culture by setting examples and ensuring conditions that encourage collaboration.
- 2.3 Network of HiAP Champions:** HiAP champions advocate for policies that improve health and address the SDH while recognizing and mediating varying competing interests to push through internal resistance.
- 2.4 Generating and Activating a Whole-of-Government Plan:** Leadership in HiAP means developing and implementing a whole-of-government vision, plan and purpose. Leaders unite people and organizations around common goals and thus are essential for bringing to fruition government priorities and the HiAP vision.
- 2.5 Joint Identification of Issues and Shared Policies:** Leaders establish a shared understanding of common goals or opportunities for collaboration, allowing stakeholders to understand overlapping values, positions, and policies.

Actions to support leadership include developing a HiAP vision, understanding shared goals, establishing supportive structures, networking, cross-sectoral learning, identifying champions, and recognizing HiAP's importance through incentives and performance indicators.

PILLAR 3: WAYS OF WORKING AND WORK METHODS



Element 3.1 Developing collaborative partnerships built on trust and maintaining open communication

Element 3.2 Understanding policy priorities of partners and co-designing policy and project plans

This pillar refers to the collaborative attitudes, mindsets, behaviours, practices, tools and processes used to implement, embed and sustain multisectoral action. Effective communication, respectful negotiation and mutual understanding of the drivers and agendas of partners are fundamental to work methods conducive to developing trusting and respectful relationships.

Key Elements:

- 3.1 Developing Collaborative Partnerships:** Mutual benefit underpins the HiAP approach alongside the formation of long-term partnerships and networks. Trust, open communication and shared accountability sustain partnerships. Both formal and informal methods of collaboration are essential for partnerships to flourish.
- 3.2 Understanding Policy Priorities of Partners:** Understanding individual and external interests and priorities is essential to working across sectors. The co-design of policies, projects and activities can promote trust and mutual understanding. Tensions may arise but a positive attitude toward engagement and communication will aid in the acceptance of common goals, where supported by leadership.

Actions under this pillar include fostering understanding among partners, co-designing solutions for mutual benefits, managing potential conflicts, being adaptable, using effective communication tools, creating platforms for dialogue, nurturing relationships across sectors, engaging in knowledge exchange, and employing multidisciplinary evidence-informed approaches.

PILLAR 4: RESOURCES, FINANCING AND CAPABILITIES



Element 4.1 Dedicated HiAP roles

Element 4.2 Dedicated HiAP budget

Element 4.3 Capabilities to act on determinants and translate knowledge

Cross-sectoral work cannot be sustained long-term without a resource strategy and consistent investment. The HiAP approach does not require large amounts of funding but collaborative work does require time, personnel and a dedicated HiAP budget.

Key Elements:

- ☑ **4.1 Dedicated HiAP Roles:** One or more staff members should be primarily responsible for day-to-day management of HiAP activities to ensure there is sufficient time and focus to prioritize these efforts.
- ☑ **4.2 Dedicated HiAP Budget:** A budget should be allocated, aligned to common goals. Funds should be allocated to capability strengthening, evidence collection, development of communication materials and maintenance of champion networks.
- ☑ **4.3 Capabilities to Act on Determinants and Translate Knowledge:** Knowledge regarding the HiAP strategy and its implementation should be shared within the health workforce and leaders should identify opportunities to develop collaborative working skills. Non-governmental and academic networks should be fostered to ensure timely access to evidence and outside perspectives.

Implementing effective collaborative action requires dedicated personnel with expertise in HiAP, cross-sectoral teams to integrate resources and research, training and mentoring programs, dedicated funding from various government sectors, and strategically developed capacities for HiAP practice.

Next Steps and Further Resources

The Four Pillars Model of HiAP is a flexible framework designed to foster multisectoral collaboration. This model can be adapted to various contexts, sectors, and challenges, offering practical guidance on essential components needed to establish and maintain collaboration for achieving outcomes that are both collaborative and widely beneficial.

Putting the Four Pillars Model of HiAP into Practice: As you review this document, aim to identify and implement at least one actionable element from each pillar that it is feasible to integrate within your current context. Incorporating even a single element from each pillar can lay the foundation for the HiAP approach, creating a platform for further integration of additional elements over time, which will strengthen the overall approach.

Resources: This fact sheet is based on the World Health Organization (WHO)'s [*Working Together for Equity and Healthier Populations: Sustainable Multisectoral Collaboration Based on Health in All Policies Approaches*](#).

For additional information, explore resources from the WHO and the [*Global Network for Health in All Policies \(GNHiAP\)*](#).

Health in All Policies (HiAP) Four Pillars Model Checklist

1 Governance and Accountability



- Is there a high-level mandate supporting HiAP?
- Are horizontal and vertical governance structures in place?
- Is there a whole-of-government plan with shared objectives?
- Are collaborative projects supported and updated regularly?
- Are HiAP activities being transparently reported?

2 Leadership at All Levels



- Are there leaders advocating for HiAP?
- Is a culture of collaboration being fostered?
- Is there a network of HiAP champions in place?
- Are leaders collaborating with stakeholders?
- Are leaders identifying common issues and shared policies?

3 Ways of Working and Work Methods



- Are collaborative partnerships being developed and sustained?
- Is collaborative communication respectful, positive, trusting and open?
- Is accountability shared within partnerships?
- Is collaboration happening through both formal and informal channels?
- Are the policy priorities of partners understood and respected?
- Are mutual benefits identified and projects co-designed?

4 Resources, Financing and Capabilities



- Are there dedicated HiAP roles in place?
- Is there a dedicated HiAP budget aligned with common goals?
- Is the HiAP strategy being effectively communicated and shared?
- Are opportunities to develop collaborative working skills being identified and employed?
- Are non-governmental and academic networks being fostered?

REFERENCE

The Helsinki Statement on Health in All Policies, *Health Promotion International*, Volume 29, Issue suppl_1, June 2014, Pages i17–i18, <https://doi.org/10.1093/heapro/dau036>

World Health Organization. (2023). *Working together for equity and healthier populations: Sustainable multisectoral collaboration based on Health in All Policies approaches*. <https://iris.who.int/bitstream/handle/10665/372714/9789240067530-eng.pdf?sequence=1>

The Four Pillars Model of Health in All Policies

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